

HICMR INFORMATION SHEET 1: 14th AUGUST 2009 PANDEMIC (H1N1) 2009 INFLUENZA - PROTECT PHASE: CLINICAL MANAGEMENT GUIDELINES

1. Clinical Management Principles

- The focus in the Protect Phase is to identify people who are most vulnerable to severe diseases, and to provide medical care and Infection Control interventions to reduce the incidence of poor outcomes and transmission.
- The majority of people infected with Pandemic (H1N1) 2009 will have a self-limiting illness, and will recover with rest at home and supportive measures alone. However, there are some people who will suffer a more severe illness, and may rapidly deteriorate. There should be a focus on early recognition and treatment of this group.
- People considered to be vulnerable to more severe outcomes, and who therefore should be specially monitored include those with the following:
 - Pregnancy (2nd and 3rd trimesters),
 - Chronic respiratory conditions (eg. asthma, COAD).
 - Several reports of hospitalisations and admissions to ICU.
 - Morbid obesity.
 - Indigenous people of any age (especially those with chronic conditions - Indigenous people are 5 times more likely to be hospitalised for Pandemic (H1N1) 2009.
 - Other chronic conditions such as cardiac disease, diabetes mellitus, metabolic conditions, renal disease, haemoglobinopathies, immunosuppression, neurological conditions.
- Other groups where active monitoring is recommended include smokers, people with obstructive sleep apnoea, children under 5 years old, pregnancy in the first trimester, and health care workers (HCWs) working in units or settings with a high proportion of vulnerable patients.
- Severe illness tends to show as:
 - Early onset of a severe viral illness with respiratory failure.
 - Secondary bacterial pneumonia.
 - Destabilisation of a pre-existing chronic condition.
- Signs of deterioration to moderate or severe illness include:
 - Respiratory distress – high respiratory rate (>20 breaths per minute in adults) and increased work of breathing,
 - Abnormal pulse oximetry (≤92%),
 - Generalised organ dysfunction – reduced baseline function or exercise capacity.
- Children and young people may not appear to be as ill as they actually are.
- Appropriate use of PPE, isolation, social distancing and other Infection Control measures are important to control spread and protect those at risk of infection. For further information refer to Govt Resource below - *Clinical Management of Pandemic (H1N1) 2009*.
- Antiviral medication is indicated for the treatment of those with moderate to severe disease, or members of a vulnerable group considered to be at risk of deterioration. Refer to Government and State Guidelines for antiviral medication use.
- Appropriate antibiotics should be commenced early in those suspected of developing a secondary bacterial pneumonia.
- Transfer to a facility with intensive care and ventilatory support should be considered early if deterioration is evident.

2. Govt Resources

- For updated information refer DoHa:
 - *Protect Phase - Annex to the AHMPPI – Pandemic Influenza. (V2, July 2009);*
 - *Resource – Clinical Mngmnt of Pandemic (H1N1) 2009;*
 - *Pandemic H1N1 2009 Guidance for Residential Aged Care.*
 - H1N1 influenza 09 Infection: 'Protect Phase' Guidelines for Australian Public Health Units
- <http://www.healthemergency.gov.au/internet/healthemergency/publishing.nsf/Content/home-1> and
<http://www.healthemergency.gov.au/internet/healthemergency/publishing.nsf/Content/healthprof#clinical>

3. Latest State Health Dept Updates

ACT: <http://health.act.gov.au/c/health?a=da&did=11044035&pid=1242181681>
New South Wales:
http://www.health.nsw.gov.au/policies/gl/2009/pdf/GL2009_013.pdf
Queensland: <http://www.health.qld.gov.au/swineflu/html/phases.asp>
South Australia: <http://flu.sa.gov.au/Swineflu.aspx>
Tasmania:
http://www.pandemic.tas.gov.au/what_does_it_mean_to_you/health_sector
Victoria: <http://humanswineflu.health.vic.gov.au/>
Western Australia:
http://www.public.health.wa.gov.au/3/952/3/human_swine_flu_health_providers.pm