

## “It’s Gonna Be a Bad One”

Predictions and early indications from the CDC point to a bad influenza season. There are a couple of reasons why they are worried about this year being particularly challenging.

First, the predominant strain circulating this year is Influenza A - H3N2. This particular strain has traditionally produced bad flu years in the past than the H1 strains, including more infections, and higher morbidity and mortality. Children under 5 and adults over 65 years old being particularly hard hit.

Secondly, the H3N2 strain is not included in this year’s trivalent influenza vaccine. Influenza vaccine strains are chosen early in the year to develop enough vaccine for the upcoming flu season based on what is circulating in the Southern Hemisphere during their flu season which is opposite of the Northern Hemisphere. This year, the strains did not translate as expected.

### Current Situation

Based on [reports from the CDC](#)

- Influenza like illnesses (ILI) activity slowed over the past week nationally but is still above the threshold for over 7 weeks. It is too early to know if influenza has peaked
- 26 States experienced an increase in ILI
- 46 states reported increased activity of ILI
- The rate of hospitalization for persons > 65 years old is the highest of any age group at 91 per 100,000
- There have been 26 pediatric deaths reported so far this flu season with 5 last week
- The predominant strain identified is the Influenza A H3N2 strain

### What does this mean to EMS?

It is shaping up to be a bad flu season – *Be prepared*

- All healthcare workers should be vaccinated against the flu regardless of the poor match
- Monitor the workforce and be prepared for multiple personnel to be absent from work
- Personnel that are ill should stay at home
- Practice good personal hygiene including frequent hand washing, protecting others from cough and keeping personal items clean
- Contact supervisors if feeling ill

## EMS Agencies should be aware

- Elderly and young are particularly susceptible, be prepared to treat these types of patients
- Practice good personal protection including the use of universal precautions to limit exposure
- Practice good decontamination procedures for ambulances and equipment
- Notify receiving facilities if suspected influenza patients are being transported
- Work with public health to identify trends in the population
- Monitor EMS call volume and type to see if the system is becoming overwhelmed
- Consider the use of call triage to identify influenza patients during call taking
- Be prepared for ED overcrowding and increased patient offload times.

Protect yourselves with good personal protection and vaccine.

Protect the population with good data monitoring and public awareness and patient care.

Be prepared to execute plans if there is high demand and high absenteeism in the workforce.

This document is provided by FirstWatch as a service to prehospital and public health providers. The information has been compiled from a variety of sources such as the CDC, Health Canada and WHO. It is copyrighted, but may be freely copied and distributed as long as it remains intact. For up-to-date, EMS-specific information on emerging diseases, please visit [www.firstwatch.net/hi](http://www.firstwatch.net/hi)