



PANDEMIC (H1N1) 2009

Advice on Length of Infectious Period for Patients with Pandemic H1N1 2009

Applies to:	All Queensland Clinicians		
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PURPOSE

To provide advice to clinicians on length of infectious period for patients with Pandemic H1N1 2009.

ADVICE

Based on current knowledge, the following guidelines are recommended for patients documented to be suffering influenza:

- **Outpatients** who are not significantly immunosuppressed are considered non-infectious:
 - 7 days after the onset of symptoms if no antiviral treatment has been given; or
 - after 3 days of neuraminidase inhibitor (antiviral) therapyas long as the patient has been afebrile for a minimum of 24 hours.
- **Inpatients** who have been hospitalised either on the basis of the severity of their influenzal illness or because of active co-morbidities, whether in intensive care, high dependency units or general ward areas, may be considered non-infectious 7 days after the initiation of anti-viral therapy.

This period may be extended if evidence of infection is still present (as verified by PCR testing or clinical condition eg ongoing otherwise unexplained fever).

- **Severely immunocompromised patients** as outlined above may be expected to have viral shedding of greater quantity or greater duration and may therefore be considered infectious for a longer period. These patients should be considered on a case by case basis by the treating clinician in consultation with Infection Control personnel.

BACKGROUND

Conventional advice regarding the infectious period for influenza is that the patient is infectious from shortly before, until 1 week after the onset of symptoms. In the context of treatment with neuraminidase inhibitors, outpatients who are not immunosuppressed are considered non-infectious after 72 hours of treatment providing they are afebrile for >24 hours. However, a recent study in hospitalised patients¹ demonstrated ongoing viral shedding beyond 72 hours despite neuraminidase inhibitor therapy. Patients who are significantly immunosuppressed (eg >20mg/day prednisone for > 2 weeks, those receiving cytotoxic chemotherapy, and transplant recipients) may shed virus for more prolonged periods.

Original signed by

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1. Leekha s et al, Duration of Influenza A Virus Shedding in Hospitalized Patients and Implications for Infection Control. *Infect Control Hosp Epidemiol* 2007; 28:1071-1076