

# MEDICAL HEALTH OFFICERS **UPDATE** FOR PHYSICIANS

**September 27, 2017**

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To view previous MHO UPDATES, go to:  
[www.interiorhealth.ca/AboutUs/Leadership/Pages/MHOUpdates.aspx](http://www.interiorhealth.ca/AboutUs/Leadership/Pages/MHOUpdates.aspx)

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## **Hantavirus Pulmonary Syndrome (HPS)**

Although HPS is an extremely rare respiratory infection, there have been 2 cases reported within Interior Health in the last 4 months. There are 0-2 cases of HPS are reported every year in BC. While the majority of these cases are reported in Interior Health and Northern Health, the reservoir for the virus (a deer mouse) can be found throughout BC.

Exposure to hantavirus is greatest when people work, play, or live in closed spaces where rodents, specifically deer mice, are actively living. Infected rodents may shed the virus in saliva, urine or feces. The primary transmission of HPS is via inhalation of aerosolized rodent urine and feces such as when soil litter or nesting materials are disturbed. Most patients give a history of cleaning dusty outbuildings or unused buildings and/or disturbing known rodent/mice burrows.

Hantavirus cannot be spread from person to person. The best way to prevent infection from hantavirus is to avoid contact with deer mice, their droppings, urine, or saliva. You can do this by controlling rodents in and around the home. Patients can refer to the [HealthLinkBC File on HPS](#) for further information on HPS and how to safely clean areas where mice have been.

HPS is an acute viral disease that begins with flu-like symptoms (fever, chills, myalgias), abdominal pain and cough, progressing to difficulty breathing and pulmonary edema. Typical clinical laboratory findings include hemoconcentration, left shift in the white blood cell count, neutrophilic leukocytosis, thrombocytopenia, and circulating. Previously healthy patients with clinical symptoms compatible with HPS should be tested for the virus even if they do not report any exposure to the primary vector (deer mice).

Clinical symptoms compatible with HPS includes one or more of the following features:

- A febrile illness (i.e., temperature greater than 101.0° F (greater than 38.3° C) characterized by bilateral diffuse interstitial edema that may radiographically resemble Acute Respiratory Distress Syndrome, with respiratory compromise requiring supplemental oxygen, developing within 72 hours of hospitalization, and occurring in a previously healthy person.
- An unexplained respiratory illness resulting in death, with an autopsy examination demonstrating noncardiogenic pulmonary edema without an identifiable cause.

Diagnosis is made by:

- Serological testing for hantavirus antibodies, or
- Detection of hantavirus-specific RNA in an appropriate clinical specimen, or
- Detection of hantavirus antigen by immunohistochemistry

There is no known antiviral treatment for HPS and supportive measures are usually required. For further information please refer to: [BCCDC information on HPS](#).

## **Influenza Immunization Program**

There has been a manufacturer delay and change in the products that IH is expected to receive. At this time, a delay in the receipt of Flulaval® Tetra has led to a partial replacement of this product with Fluzone® Quadrivalent vaccine. Details on Fluzone® are available at BCCDC's site at <http://www.bccdc.ca/health-professionals/clinical-resources/communicable-disease-control-manual/immunization/biological-products> > **Influenza Vaccines**.

For the latest newsletter on the Influenza program in IH please visit <https://www.interiorhealth.ca/sites/Partners/ImmunizationResourcesTools/Documents/CVP%20Update%201.pdf>

## **We Want to Hear from you!**

In 2013/14, Interior Health implemented the STOP HIV and Health Outreach Nursing program across the region. As part of this program, IH spent some time engaging with physicians, increasing awareness and education regarding HIV care and testing in our communities and for our patients. Now IH needs to hear from you, to learn about your experiences (if any), potential barriers for HIV testing in your practice, and how best to improve the current HIV services to date.

[Click here to complete a short 5 minute survey.](https://www.surveymonkey.com/r/STOPHCP) <https://www.surveymonkey.com/r/STOPHCP>

**Your time and input is greatly appreciated!**

## **Infection Prevention and Control Newsletter (available only through the internal IH website)**

Stay up to date with the Infection Prevention and Control newsletters called Infection Reflections.

For the latest edition of Infection Reflections from July 2017:

<http://insidenet.interiorhealth.ca/QPS/IPC/Documents/July%202017.pdf>

You can also find all previous editions of the newsletter at the bottom of IPAC site:

<http://insidenet.interiorhealth.ca/QPS/IPC/Pages/default.aspx>