

NEW MEXICO HEALTH ALERT NETWORK (HAN) ALERT

New Mexico Department of Health Announces Start of Influenza (Flu) Season

Department of Health Recommends Influenza Vaccination for Everyone 6 Months of Age & Older

October 7, 2024

Background:

The New Mexico Department of Health (NMHealth) has announced the start of the 2024-2025 influenza (flu) season. The New Mexico Department of Health (NMHealth) has been informed of an elevated number of positive influenza tests in the Northwest region of the state. Since the end of August, a facility in this region has reported that over two dozen patients have tested positive for influenza, suggesting an early start to respiratory disease season. The NMHealth Scientific Laboratory Division (SLD) has confirmed that two patients tested positive for seasonal influenza. Influenza and influenza-like illness activity are on the rise in the Southeast part of the US as well. Health care visits for respiratory illness and outbreaks are expected to increase in the coming weeks and months. Influenza vaccination can help reduce severity and duration of illness and, with rare exceptions, can be received by everyone six months of age and older. Fall is generally the best time to receive influenza vaccine.

The NMHealth Viral Respiratory Infection dashboard is updated weekly to keep providers updated on respiratory virus activity in New Mexico, particularly levels of community transmission and when viruses are co-circulating:

[NMHealth Viral Respiratory Infection Dashboard](#)

Recommendations for Clinicians:

Testing for influenza

We expect to see co-circulation of respiratory viruses in the coming months. Clinicians should follow CDC's [Testing Guidance for Clinicians When SARS-CoV-2 and Influenza Viruses are Co-circulating](#). The key points are:

1. **For patients experiencing respiratory illness who require hospitalization:**
 - a. Testing for both influenza and SARS-CoV-2 using a nucleic acid detection assay (e.g PCR or molecular) is recommended.
 - i. Ideally, a multiplex assay for influenza A/B and SARS-CoV-2 can be ordered. If only singleplex assays are available, you might need to collect two respiratory specimens.
 - b. Rapid influenza antigen detection assays are not recommended for hospitalized patients due to low sensitivities. For hospitalized patients, a positive rapid antigen test=should be confirmed with NAAT testing.
2. **For residents of Nursing Homes or Long-Term Care Facilities:**

- a. Notify NMHealth by calling 1-833-796-8773-if any of your residents or staff test positive for influenza
 - b. Testing symptomatic residents or staff for both influenza and SARS-CoV-2 using a nucleic acid detection assay (e.g PCR or molecular) is recommended.
 - i. Ideally, a multiplex assay for influenza A/B and SARS-CoV-2 can be ordered. If only singleplex assays are available, you might need to collect two respiratory specimens.
 - c. If a resident tests positive for influenza using a rapid antigen test, do not delay treatment or infection control activities. However, due to low sensitivities of these tests, please send a specimen to the state lab or reference lab for PCR confirmation of influenza.
3. ***For patients experiencing respiratory illness who do not require hospitalization:***
- a. Testing for SARS-CoV-2 is recommended using nucleic acid detection (e.g PCR or molecular), or antigen detection.
 - b. Testing for influenza is recommended for all patients, if possible, while SARS-CoV-2 and influenza are co-circulating.
 - c. Influenza testing should always be ordered if the results will change clinical management:
 - i. E.g. patients at increased risk of complications who might benefit from early antiviral treatment.
 - ii. E.g. patients not at increased risk, but where testing might reduce unnecessary antibiotic use, further diagnostic testing, time in facility, or influenza antiviral treatment.
 - iii. For infection control decisions (e.g. patient is a resident of a long term care facility).
4. Influenza nucleic acid detection (e.g PCR or molecular) testing is recommended. Rapid antigen testing is okay if molecular assays are not available.

Reporting Influenza To NMHealth:

in accordance with New Mexico Administrative Code (NMAC) 7.4.3.13, influenza is a reportable condition in the following situations:

- Influenza, laboratory-confirmed hospitalizations only
- Influenza-associated pediatric death (<18 years old)
- Other illnesses or condition of public health significance (novel influenza A)
- influenza outbreaks must be reported. An outbreak is defined as one confirmed case of influenza (either by rapid or PCR test) and any other cases of ILI in the same geographic location. Outbreaks should be reported to the on-call epidemiologist 24/7/365 at 1-833-796-8773.

Influenza Vaccination:

NMDOH recommends that everyone six months of age and older get flu vaccine each flu season. Individuals aged 65 years and older should preferentially receive high-dose or adjuvanted influenza vaccines but can receive standard vaccine if high dose is not available at the time of vaccination. COVID-19 and influenza vaccine can be co-administered.

Flu vaccination has many [benefits](#) including:

- Reduces flu illnesses, hospitalizations, and deaths.
- Reduces illness severity in people who get vaccinated and still get sick.
- Protects pregnant people from flu and protect their babies from flu for several months after birth.
- Lower rates of some cardiac events among people with heart disease.
- Flu vaccination also has been shown in separate studies to be associated with reduced hospitalizations related to diabetes and chronic lung disease.
- Reduces the burden of flu on health care systems.

The following groups of people are strongly recommended to be vaccinated because they are at high risk of having serious flu-related complications, or because they live with or care for people at high risk for developing flu-related complications:

- Children younger than 5, but especially children younger than 2 years old
- Children aged 6 months through 8 years who have never been vaccinated against influenza, or have an unknown vaccination history, should receive two doses of influenza vaccine, administered at least 4 weeks apart
- Pregnant women (all trimesters), and up to two weeks post-partum
- People ages 65 years and older
- People of any age with medical conditions like asthma, diabetes, kidney, liver, lung or heart disease, neurological disease, and those who are immunocompromised
- People who live in nursing homes and other long-term care facilities
- People who live with or care for those at high risk for complications from flu, including healthcare personnel and caregivers of babies younger than six months
- Certain racial and ethnic minority groups, including non-Hispanic Black persons, Hispanic or Latino persons, and American Indian or Alaska Native persons
- People with severe obesity (Body Mass Index of 40 kg/m² or higher)

All vaccinations for children and adults are required by law to be entered into the New Mexico State Immunization Information System (NMSIIS). If you need access, training, or assistance with using NMSIIS, contact the [NMSIIS](#) Help Desk at (505) 827-2356.

NMHealth encourages individuals with health insurance to contact their health care provider or pharmacist about getting a flu vaccine. NMHealth offers vaccinations for people without insurance or those who are otherwise not able to get vaccinated.

Patients can find a location with available influenza vaccine with the following resources:

- [Vaccines.gov - Search for flu vaccine locations](#)
- [Vaccines for Children providers in NM](#)
- [Vaccines for adults without insurance](#)

Antiviral Treatment:

Influenza antiviral medications can be used to shorten the duration of illness, reduce the risk of complications, and reduce death caused by influenza, and some can be used to prevent influenza (prophylaxis).

Antiviral treatment is recommended as soon as possible for any patient with suspected or confirmed influenza who:

- Is hospitalized;
- Has severe, complicated, or progressive illness; or
- Is at higher risk for influenza complications.

Decisions about starting antiviral treatment for patients with suspected influenza should not wait for laboratory confirmation of influenza virus infection. Empiric antiviral treatment should be started as soon as possible in the above priority groups. Because the amount of influenza circulating in New Mexico will influence clinical suspicion, it is important to conduct laboratory-based testing in these situations even when antiviral medications will be initiated without waiting for results.

Clinicians can consider early empiric antiviral treatment of non-high-risk outpatients with suspected influenza [e.g., influenza-like illness (fever with either cough or sore throat)] based upon clinical judgement, if treatment can be initiated within 48 hours of illness onset.

Additional Resources:

[IDSA Guidelines on the Treatment and Management of Patients with COVID-19 \(idsociety.org\)](#)

[Influenza Antiviral Medications: Summary for Clinicians | CDC](#)

[Information for Clinicians on Influenza Virus Testing | CDC](#)

[People at Higher Risk of Flu Complications | CDC](#)

[Testing Guidance for Clinicians When SARS-CoV-2 and Influenza Viruses are Co-circulating \(cdc.gov\)](#)



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Testing and Management Considerations for Nursing Home Residents with Acute Respiratory Illness Symptoms when SARS-CoV-2 and Influenza Viruses are Co-circulating | CDC

New Mexico Health Alert Network: To register for the NM Health Alert Network, please visit the following site <https://nm.readyop.com/fs/4cjZ/10b2> Please fill out the registration form completely and click Submit at the bottom of the page, to begin receiving Important health alerts, advisories, and updates.

Please Note that our system also utilizes text messaging to notify members of important health information. Due to FCC Regulation changes that are designed to decrease the amount of unwanted spam text messages sent each year to citizens, please save, this phone number **(855) 596-1810** as the **“New Mexico Health Alert Network”** default phone number for your account used for text messages on the mobile device(s) you register with us.