



Friday Sunday Night [under the] Lights...

2018



Happy Friday...

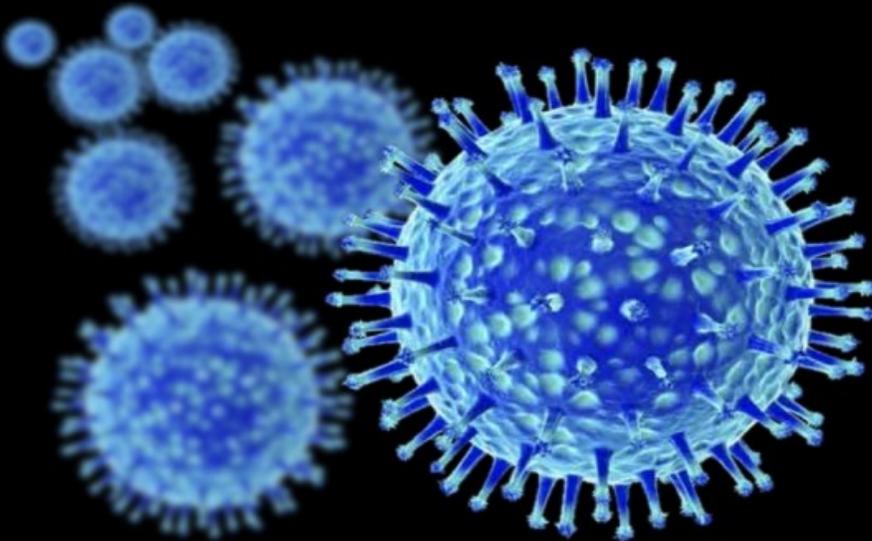
(As you are probably aware, Friday falls on a Sunday this week). It's really complex – I don't want to bore you with the details. It would take way too long to discuss. You wouldn't understand.

Busy week for many (most) of you – and there's a good reason (in part) why.

(Did you ever notice how often I use "parentheses" in FNuL? I think it's the equivalent of leaning forward, lowering my voice and looking you in the eyes).

(Know what I mean?)

So – what's the biggest thing on our clinical radar screen at this moment in time?



The Flu.

It's one of the worst Flu seasons we've seen in a while and it's going to get worse before it gets better. This is a huge public health issue and it's already had a significant impact on EMS and healthcare systems.

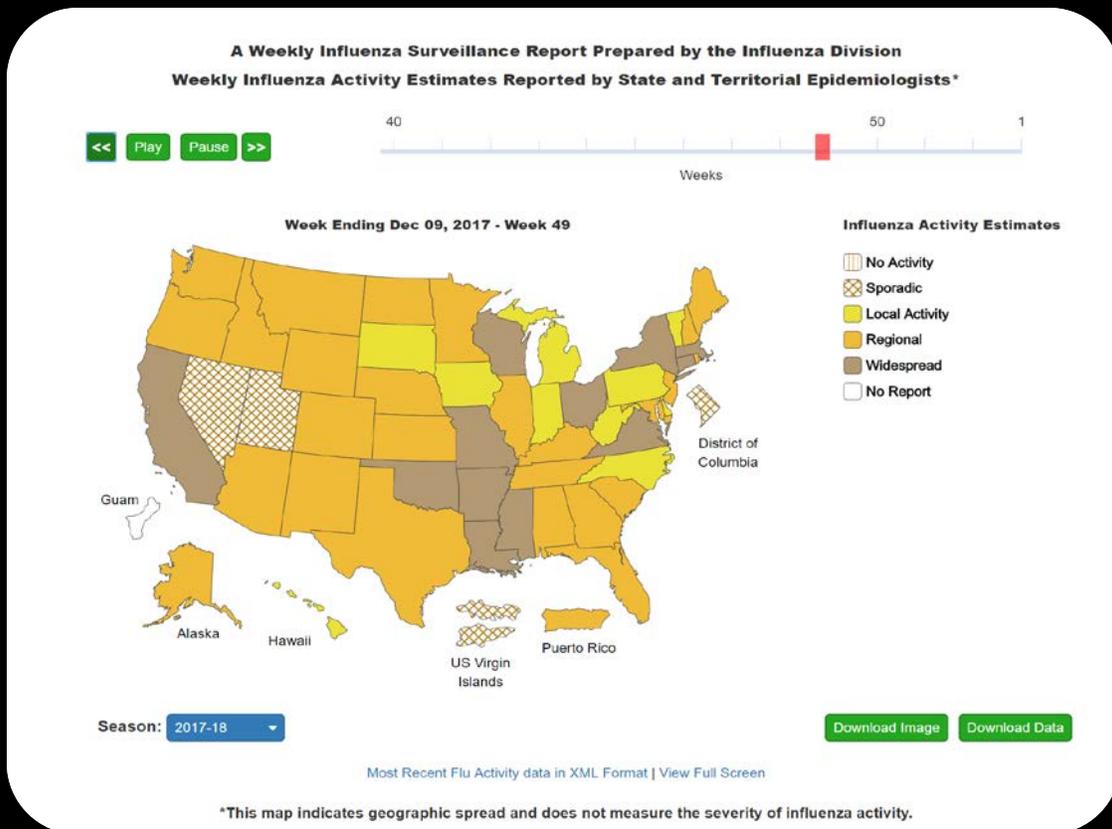
Here's the hard part – Talking about the Flu to healthcare providers sometimes feels like discussing the value of flossing with a group of dental hygienists or the risks of smoking with oncologists or current concepts in deception with lawyers (not ours, for the record) ...

We all know that it's a problem so when I talk about it, it falls into that blah, blah, blah category.

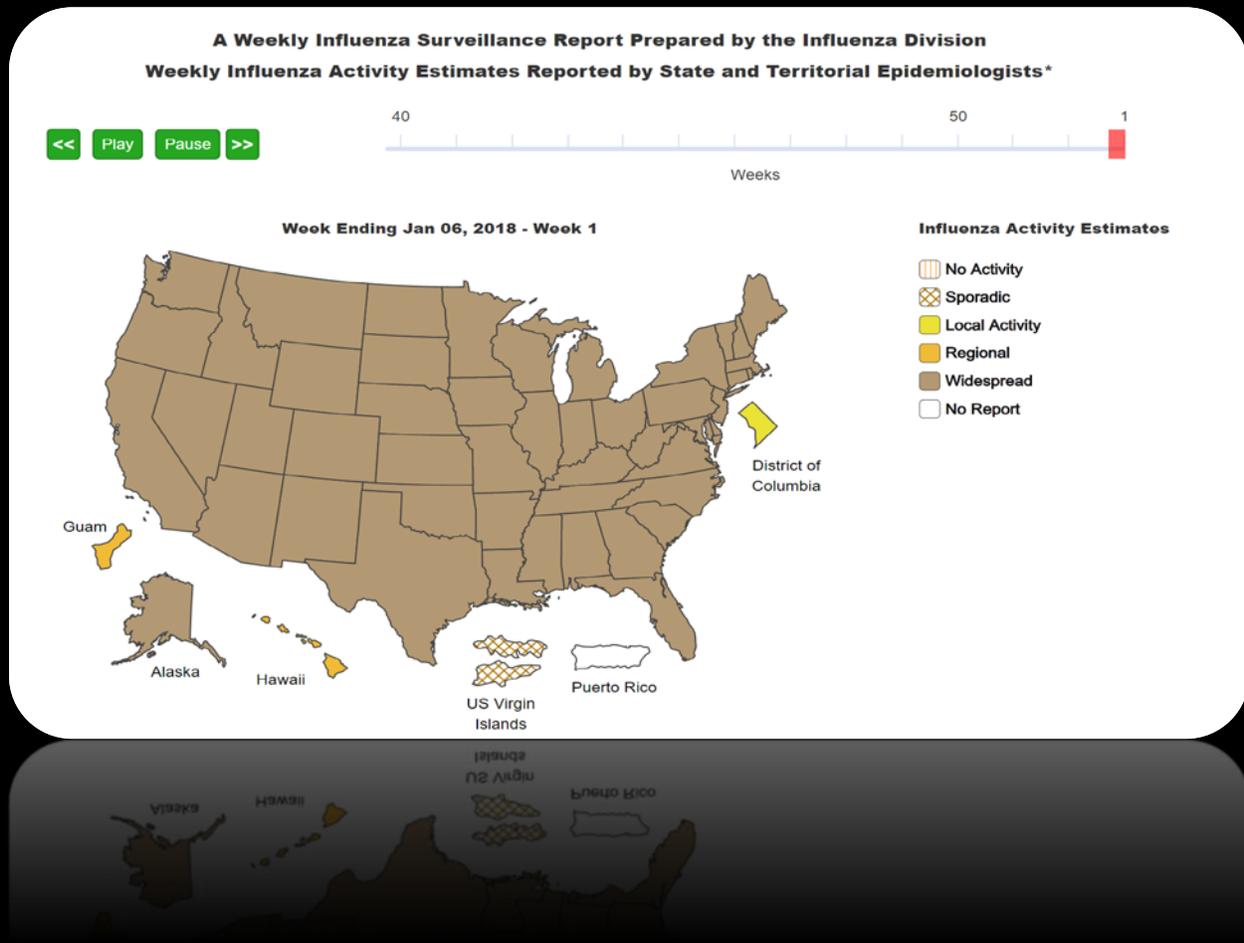
So, I will try and reinforce (and potentially provide new information) about this year's Flu season and motivate you to become a passionate warrior against a well-known enemy.

▪ **How bad is it, really?**

Just a month ago, this was the CDC surveillance report on Influenza activity in the US...



Here's the same map today (even I can figure out how dramatic the difference is) ...



Essentially the entire US, except for Hawaii & DC (btw, there are so many great potential jokes buried in a low Flu impact in DC...) is now seeing widespread Flu activity.

Of note, this is the first year that the entire continental US is seeing such widespread activity at the same time. It is here and here in a very big way.

There are some interesting observations about why this year's season became so bad so quickly.

Remember that the Influenza virus is transmitted through droplets. The season started to peak right before the Holidays and researchers believe many patients ignored their early symptoms ("I'll just take some Motrin and see if it gets better), didn't seek care early (remember the emphasis on antiviral treatment) and because their regular clinician had limited office hours due to the Holidays.

And then there's the huggy, kissy of the Holidays – Connecting with loved ones and sharing gifts and droplets...

Finally, the extremely cold weather kept many people inside thereby increasing the chances of exposure to the virus.

- **How serious is it?**

For the week ending January 6, the proportion of people seeing their health care provider for influenza-like illness (ILI) was 5.8%, which is above the national baseline of 2.2%.

Flu-Associated Hospitalizations: Since October 1, 2017, 6,486 laboratory-confirmed influenza-associated hospitalizations have been reported through the Influenza Hospitalization Network (FluSurv-NET). This translates to a cumulative overall rate of 22.7 hospitalizations per 100,000 people in the United States.

The highest hospitalization rates (no surprise) are among people 65 years and older (98.0 per 100,000), followed by adults aged 50-64 years (24.0 per 100,000), and children younger than 5 years (16.0 per 100,000). During most seasons, children younger than 5 years and adults 65 years and older have the highest hospitalization rates.

The proportion of deaths attributed to pneumonia and influenza was 7.0% for the week ending December 23, 2017. *This percentage is at the epidemic threshold of 7.0% for that week.*

From a laboratory standpoint...Nationally, the percentage of respiratory specimens testing positive for influenza viruses in clinical laboratories during the week ending January 6 was 24.7%.

During the week ending January 6, of the 10,320 (24.7%) influenza-positive tests reported to CDC by clinical laboratories, 8,628 (83.6%) were influenza A viruses and 1,692 (16.4%) were influenza B viruses. The most frequently identified influenza virus subtype reported by public health laboratories was influenza A(H3N2) virus.



There's also a strong emphasis this year on use of the antiviral medications if the Flu is indeed diagnosed. These meds include oseltamivir, zanamivir, or peramivir. Since October 1, 2017, the CDC has tested influenza A & influenza B viruses for resistance to those meds. While the majority of the tested viruses showed susceptibility to the antiviral drugs, two (1.2%) viruses were resistant to both oseltamivir and peramivir, but was sensitive to zanamivir.

One other challenge may be that this year's vaccine may be less effective against the current flu strains than what we've seen in the past. Remember, the Influenza Vaccine is concocted each season based on a prediction of what specific type(s) of virus will be problematic – Sort of like picking the right weed killer in the fall to control what may sprout in the spring. The H3N2 virus, btw, is associated with higher rates of hospitalizations and deaths, as well as with lower vaccine effectiveness. While not yet known, several CDC researchers believe this year's vaccine may be about 30% - 40% effective.

But it may actually be lower - Concerns have been raised about this year's vaccine after an editorial published in the New England Journal of Medicine last Thursday said it was only 10 percent effective against H₃N₂ in Australia. The data will be analyzed after flu season but it's really important to remember that the vaccine protects against other strains as well and is the only vaccine available this year.

Based on all of that, CDC still strongly recommends influenza vaccination for **all persons 6 months of age and older** as flu viruses are likely to continue circulating for several more weeks (you think the virus spread was a problem during the last Holiday, think about how those charts will change on Valentine's Day). In addition, in the context of widespread influenza activity like we see today, CDC is reminding clinicians and the public about the importance of antiviral medications for treatment of influenza - especially in people who are severely ill and people who are at high risk of serious flu complications.

So... Bottom line:

- Get the Flu Shot (please) Leaning in, talking softly, looking you in the eyes)
- If you are pregnant, it's even more important because both you and your baby can develop the antibodies which will help them during their first 6 months
- Wash your hands constantly – shrivel your fingers. It's one of the most effective methods of controlling spread
- Sneeze (and cough) in your sleeve – Not your hand (see above)
- If you're sick, get away from everyone else on the planet. Use your cell phone to communicate – Lord knows it seems to be the preferred method of most of our kids today anyway...
- If you are ill, see your doctor or a healthcare provider early. Remember the emphasis on earlier administration of antivirals this year.
- Floss regularly – Dentist's visits aren't fun even when you feel good.

**I'M SO OFFENDED WHEN MY
BODY DECIDES TO BE SICK.**

**LIKE I GAVE YOU A
VEGETABLE LAST WEEK.
HOW DARE YOU?**

- **AMR Life...**

There are very few things in life that are as rewarding as helping out our fellow human beings when they need it most.

**THE CRISES WERE DIFFERENT.
THE RESPONSE WAS THE SAME.
HEROIC.**

From multiple hurricanes battering our coasts to a horrific tragedy in Las Vegas to devastating wildfires across the country, the past two months have been an unprecedented time in our nation's history. We honor the heroism on the front lines of all the first responders who answered the call. You were there when it mattered—when our communities needed you most.

THANK YOU.

For more information, visit JEMS.com/rs and enter 16.

- What the...?

Today's WTH comes from Jen Jones. Let's just hope it's the camera angle...



- Epilogue...

Three elderly ladies were discussing the trials of getting older.

One said, "Sometimes I catch myself with a jar of mayonnaise in my hand in front of the refrigerator and can't remember whether I need to put it away, or start making a sandwich."

The second lady chimed in, "Yes, sometimes I find myself on the landing of the stairs and can't remember whether I was on my way up or on my way down. "

The third one responded, "Well, I'm glad I don't have that problem; knock on wood," she raps her knuckles on the table, then says, "That must be the door, I'll get it."



So, that's it from my world. *Happy Friday (this Sunday).*

Thanks again for what you do, and how you do it. It makes such a huge difference. As I've said many times before, I'll never get tired of telling you how proud I am to share this Journey with you...

(I mean that).

End parentheses.

Ed

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