

STATE OF HAWAII DEPARTMENT OF HEALTH

P. O. BOX 3378 HONOLULU, HI 96801-3378 In reply, please refer to:

November 10, 2022

MEDICAL ADVISORY: INCREASED RESPIRATORY VIRUS ACTIVITY, ESPECIALLY AMONG CHILDREN, EARLY IN THE 2022-2023 FALL AND WINTER SEASON

Early elevated respiratory disease incidence caused by multiple viruses is occurring nationally and locally in the State of Hawaii.

Clinicians are advised to:

- Vaccinate against influenza and COVID-19, including boosters. Encourage vaccination for all eligible household members.
- Offer pre-exposure prophylaxis for COVID-19 and RSV for eligible age and risk groups.
- Perform diagnostic testing as appropriate to guide treatment and clinical management.
- Counsel patients and families about their risk of severe disease, warning signs, and when to seek care for acute respiratory illness.

Dear Healthcare Provider:

Early elevated respiratory disease incidence caused by multiple viruses occurring especially among children and placing strain on healthcare systems is being reported <u>nationally</u> with similar trends being noted locally in the state of Hawaii.

Data on respiratory syncytial virus (RSV) testing in Hawaii from the National Respiratory and Enteric Virus Surveillance System (NREVSS) from 2020 through the present indicate that while RSV transmission was suppressed when pandemic mitigation measures were in place, as measures have been relaxed, we are seeing a return of RSV circulating in Hawaii. This year's total testing volume (positive and negative tests) and percent positivity are both increasing quickly early in the season. Out of an average of 1,858 RSV tests performed per week statewide in recent weeks, 23% were positive. This indicates there is a high level of both detected and undetected RSV infection in our community.

Influenza activity in Hawaii remains low but is increasing. Out of 3,886 <u>specimens tested for influenza statewide</u> in the week of October 16–22, 5.8% were positive. During a similar timeframe, statewide SARS-CoV-2 test positivity was 6.4% out of 14,927 tests performed. SARS-CoV-2 test positivity has declined to 5.3% in the current week.

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In response to increased respiratory illnesses due to multiple circulating respiratory viruses, clinicians are advised to do the following:

1. Vaccinate against influenza and COVID-19, including boosters. Annual Influenza and COVID 19 vaccination is associated with reduced infection, hospitalization, and death rates. Annual Influenza vaccination is recommended for persons age 6 months and older. COVID-19 primary series vaccines are recommended for persons age 6 months and older and COVID-19 bivalent boosters are recommended for persons age 5 years and older. Encourage vaccination for all eligible household members. COVID 19 vaccine sites in the state of Hawaii can be found here.

2. Offer pre-exposure prophylaxis for COVID-19 and RSV for eligible age and risk groups.

For COVID-19, preexposure prophylaxis with tixagevimab plus cilgavimab (EVUSHELDTM), a monoclonal antibody, may help prevent COVID-19 in persons 12 years and older who are moderately to severely immunocompromised or for whom COVID-19 vaccination is not recommended because of their personal risk for severe adverse reactions. While currently, a moderate proportion of circulating <u>variants in Hawaii</u> have genetic mutations that might confer resistance to EVUSHELDTM, preexposure prophylaxis with EVUSHELDTM may still provide benefit to many patients and HDOH still recommends its use for eligible non-hospitalized patients. Among currently identified variants, the subvariants BA.4.6, BA.2.75.2, BA.5.2.6, BF.7, BQ.1, and BQ.1.1 are likely to be resistant to tixagevimab plus cilgavimab (Evusheld). These subvariants make up approximately 27% of circulating variants in Hawaii as of October 22, 2022. A November 10 <u>update</u> to the NIH COVID-19 Treatment Guidelines provides additional details on circulating variants, susceptibility of variants to COVID-19 medications for treatment and prevention, and recommendations for clinicians. HDOH will continue to <u>report every two weeks on circulating variant proportions</u>.

To prevent RSV-associated hospitalizations, eligible high-risk children should receive palivizumab treatment in accordance with <u>AAP guidelines</u>. In brief, children eligible for palivizumab include infants prematurely born at less than 29 weeks gestation, children younger than 2 years of age with chronic lung disease or hemodynamically significant congenital heart disease, and children with suppressed immune systems or neuromuscular disorders.

- **3. Perform diagnostic testing to guide treatment and clinical management.** Multiple respiratory viruses can cause severe illness and may have different implications for management and infection control. Early testing after the onset of symptoms can identify flu or COVID 19 infections in persons for whom treatment is indicated and limit unnecessary antibiotic use. Testing for RSV should also be considered for symptomatic children younger than 5 years of age, particularly among hospitalized patients. RSV testing is not generally indicated for older children and healthy adults.
- **4.** Counsel patients and families about their risk of severe disease, warning signs, and when to seek care for acute respiratory illness. Not everyone with RSV or other respiratory disease needs medical care, but everyone should know the warning signs. Children under 5 are at highest risk for severe RSV infections, but older adults and especially those with underlying medical conditions can also experience severe illness. Review signs and symptoms that should

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prompt patients and families to seek care for any respiratory illness, including high fever, rapid breathing or difficulty breathing, wheezing, dizziness, confusion, or loss of consciousness.

To report suspected outbreaks of respiratory illness in schools, long term care facilities, or other congregate settings, contact the Hawaii Department of Health immediately. Additional disease reporting information, tools, and templates can be found on the Disease Outbreak Control Division website.

Oahu (Disease Reporting Line)	(808) 586-4586
Maui District Health Office	(808) 984-8213
Kauai District Health Office	(808) 241-3563
Big Island District Health Office (Hilo)	(808) 933-0912
Big Island District Health Office (Kona)	(808) 322-4877
After hours on Oahu	(808) 600-3625
After hours on neighbor islands	(800) 360-2575 (toll free)

Thank you for your continued efforts to protect the health of all those who live in and visit Hawaii.

Sincerely,

Sarah K. Kemble M.D. State Epidemiologist

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Additional resources:

https://emergency.cdc.gov/han/2022/han00479.asp

https://www.cdc.gov/surveillance/nrevss/rsv/state.html#HI

https://health.hawaii.gov/docd/files/2018/03/FLU_Influenza_Surveillance.pdf

https://hawaiicovid19.com/vaccine/

https://www.cdc.gov/coronavirus/2019-ncov/vaccines/index.html

https://www.cdc.gov/flu/professionals/vaccination/index.htm

https://health.hawaii.gov/coronavirusdisease2019/what-you-should-know/covid-19-data-reports/

https://www.covid19treatmentguidelines.nih.gov/therapies/statement-on-omicron-subvariants/

https://www.cdc.gov/coronavirus/2019-ncov/your-health/treatments-for-severe-illness.html

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https://www.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/interimguidance-for-use-of-palivizumab-prophylaxis-to-prevent-hospitalization/

https://health.hawaii.gov/docd/for-healthcare-providers/reporting-an-illness-for-healthcare-providers/