

Antiviral Medicine Guidance for Department of Energy (DOE) Federal Employees

What are influenza antiviral medications?

Influenza antiviral medication (a prescription drug) reduces an influenza virus' ability to reproduce in the body. It is not a cure for influenza. When used appropriately, it can shorten the duration and lessen the severity of illness. It may also be used to prevent illness in people who are exposed to influenza. This medicine must be prescribed by a physician.

How are antiviral medications used for influenza?

For Treatment: To be most effective, antivirals must be started within 48 hours of the start of symptoms.

For Prevention: During a pandemic, health care workers, first responders, and others may consider taking antiviral medications for prevention depending on their level of exposure to influenza, job duties, availability and prioritization of antivirals. There are two types of prevention: post-exposure prophylaxis, which is when a person has a known or suspected close exposure to someone with influenza, and starts antiviral medications to prevent illness, and outbreak prophylaxis, which is when a person is recommended to take antiviral medications for the entire duration of a pandemic outbreak.

What are the types of antiviral medications available?

There are two categories of antivirals that can be obtained for treatment through a private health care provider: amantadines and neuraminidase inhibitors. Because a pandemic strain of influenza may be resistant to an amantadine, the Centers for Disease Control and Prevention has recommended that neuraminidase inhibitors be used for treatment and prevention. These are:

- Oseltamivir (Tamiflu®) - which is licensed for the prevention and treatment of influenza in persons greater than 1 year of age.
- Zanamivir (Relenza®) - which is licensed for the treatment of persons older than 7 years, and the prevention or treatment of influenza in persons aged greater than 5 years.

The antiviral medicines Tamiflu® and Relenza® can help alleviate H1N1 flu symptoms in those with severe illness or risk factors for complications from influenza. Most influenza lasts only a few days, and **most people recover completely without medication.**

Post-exposure prophylaxis for ten days after exposure can be considered for:

- Persons who are at high-risk for severe influenza due to underlying medical conditions and have had close contacts of a confirmed, probable or highly suspected case.
- Health care personnel, public health workers, or first responders who have had a recognized, unprotected close contact exposure to a person with H1N1 influenza virus infection (confirmed, probable, or suspected) during that person's infectious period.
- Mission essential employees.

Employees who are feeling sick are advised to seek medical care from a physician in order to determine the cause of their illness. If an employee exhibits influenza-like symptoms, the employee should limit interactions with others and remain home for at least 24 hours after symptoms have resolved:
(<http://www.cdc.gov/h1n1flu/guidance/exclusion.htm>).

Individuals should seek medical care for symptoms of more severe influenza, such as:

- difficulty breathing
- unable to take adequate fluids
- confusion or altered mental status; severe headache or other pain that is clearly not controlled by usual medications; sudden weakness, or change in vision
- rapid worsening of symptoms

Will DOE provide employees with antiviral medications?

DOE recommends that all HQ and field elements follow the most recent recommendations of HHS with respect to antiviral medications.

It is currently the policy of HC that the headquarters health clinic will not prescribe or distribute antiviral medication to federal employees. Individual Program offices may decide on a different policy, however, they will be responsible for administering their own policies. Employees who wish to obtain antiviral medical treatment or post exposure prophylaxis may seek care from their own physicians or other healthcare providers.

Field elements should determine if they will offer antivirals to Federal employees. Depending on the state law where the Field element is located, prescriptions or physicians' standing orders may be required. Field elements ought to consider if the distribution of antivirals will be limited (e.g., to employees with a high risk of complications from influenza, or to persons with mission essential functions) or made available to all Federal employees at a particular location.

Medical information regarding the H1N1 virus is rapidly changing so please refer to both the DOE web site (<http://www.hss.energy.gov/healthsafety/pandemic.html>) as well as the HHS web site at: (<http://www.cdc.gov/h1n1flu/recommendations.htm>)

This guidance is for informational purposes only, and it not intended as a substitute for professional medical advice, diagnosis, or treatment. Employees should consult with his/her health care professional regarding any questions on the H1N1 influenza.