

## FREQUENTLY ASKED QUESTIONS

# Antiviral Medication Use During an Influenza Outbreak: Congregate Living Settings

## Introduction

Influenza antiviral medications may be recommended for use by the local public health unit in congregate living settings during an influenza outbreak in facilities where residents are mostly the same from day to day and are at increased risk for influenza complications. Antiviral medications are used to treat people who are ill with influenza symptoms, and during outbreaks in facilities, can also be used to prevent influenza. The most commonly used influenza antiviral medication during influenza outbreaks is oseltamivir (Tamiflu), which is taken by mouth.

This document is intended to support administrators and staff members in congregate living settings in using influenza antiviral medications with a focus on the use of oseltamivir. For more information see: [Antiviral Medications for Seasonal Influenza: Information for Health Care Providers, 2019](#)<sup>1</sup>

### Q1. How do antiviral medications work?

Antiviral medications stop the influenza virus from growing and making more copies. People with influenza who take antiviral medications within 48 hours of the start of symptoms get better faster and have fewer complications.<sup>1</sup> In addition, well people who are exposed to influenza – for example, during an outbreak - are much less likely to develop influenza if they take antiviral medications for prevention during the outbreak.<sup>1</sup>

### Q2. When should antiviral medications be given?

When an influenza outbreak is declared in a facility, the local public health unit may recommend antiviral medications to treat ill residents and to prevent infection in exposed residents and some staff members in the outbreak area. It is important to start antiviral medications as quickly as possible for both treatment and prevention. Ideally these medications should be started for prevention as soon as the outbreak is declared, and rapidly after the onset of symptoms for treatment of ill residents (although there may still be benefit even if treatment is started later, such as after 48 hours from symptom onset).<sup>2</sup>

### Q3. How do I get antiviral medications for my facility?

Antiviral medications must be prescribed by a doctor or nurse practitioner. If your facility has a physician or nurse practitioner who provides care for the facility's residents, make a plan in advance of influenza season to ensure that antiviral medications can be started as soon as possible (i.e., as soon as an outbreak has been identified) for all the residents. This can be done through the use of a medical directive from the physician or nurse practitioner that indicates when and how to use antiviral medications in an outbreak.

If your facility does not have a dedicated doctor or nurse practitioner, a prescription for antiviral medications (for treatment and/or for prevention) must be obtained from the residents' own health

care providers. Ideally this prescription should be obtained before the start of the influenza season and kept on the resident's file at the facility.

If possible, have a pre-arranged plan with the pharmacy that supplies your facility to be able to obtain antiviral medications as quickly as possible if/when an influenza outbreak is declared in your facility. Consider options for receiving antivirals after-hours and on weekends. Be in touch with your pharmacy as soon as an outbreak is suspected so they can be prepared to provide the antiviral medications as soon as they are ordered by the health care provider.

When using antiviral medications, facilities should consider any requirements related to administration and safe storage of medication applicable to the congregate living setting.

#### **Q4. How do I give antiviral medications for treatment and prevention?**

In an influenza outbreak, antiviral medications are used for residents (regardless of whether or not they have received the influenza vaccine) and for unvaccinated staff members (and rarely for vaccinated staff if recommended by the local public health unit).<sup>3</sup>

- **People ill with influenza:** Antiviral medications are given twice daily for 5 days for treatment (and sometimes longer for severe disease).<sup>2</sup>
- **Well but exposed people:** Antiviral medications are given once daily<sup>2</sup> until the influenza outbreak is declared over to prevent influenza.<sup>3</sup>

#### **Q5. What are the common side effects of oseltamivir?**

Common side effects of oseltamivir include nausea and vomiting.<sup>4</sup> Taking oseltamivir with food may help reduce the nausea and vomiting.<sup>4</sup>

#### **Q6. Who should not take oseltamivir?**

Almost everyone can take oseltamivir, including pregnant women.<sup>2</sup> Although only authorized for those 1 year of age and over, oseltamivir can be used for treatment at any age and for prevention at 3 months of age and over.<sup>2</sup> Some people who are known to have kidney problems may need to take a lower dose,<sup>2</sup> although routine testing of kidney function is not required before prescribing oseltamivir for those without known kidney problems.<sup>1</sup> The prescribing health care providers will adjust the medication dose for their patients with known kidney problems.

#### **Q7. What if someone misses one or more doses of antiviral medication?**

If someone misses one or more doses of antiviral medication, they should continue to take the medication as prescribed until all the doses have been completed for treatment, or until the outbreak is declared over when used for prevention.

## References

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4. Centers for Disease Control and Prevention. Influenza antiviral medications: summary for clinicians [Internet]. Atlanta, GA: Centers for Disease Control and Prevention [modified 2020 Aug 31; cited 2020 Aug 31]. Available from: <https://www.cdc.gov/flu/professionals/antivirals/summary-clinicians.htm>

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