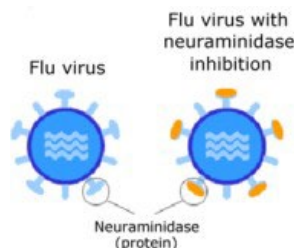


# Antivirals for influenza - balancing the evidence for patients in residential care facilities (RCFs)

Antiviral medications, like oseltamivir (Tamiflu™) or Zanamivir (Relenza™)\* are recommended by the HSE, the WHO, the ECDC and NICE to:

- treat people with influenza who are at risk of complications
- provide post-exposure prophylaxis to their vulnerable close contacts

Both of these drugs are neuraminidase (NA) inhibitors that reduce the spread of the influenza virions from the infected host cell to other cells, thereby alleviating the severity of the disease if administered in the early stages.



**Antivirals should be started within 48 hours of onset of illness/exposure to a case.**

## Benefits of oseltamivir for patients in RCFs

### When used as treatment:

- Oseltamivir has been shown to reduce the duration of illness by up to 3 days, with the risk of nausea and vomiting only slightly increased.
- It also reduces the risk of complications including 70% reduction in the risk of hospitalisation.

### When used as post exposure prophylaxis:

- When used post-exposure, oseltamivir has been shown to reduce the risk of influenza-like illness by as much as 92%.
- Oseltamivir has been shown to reduce the risk of complications in older people exposed to flu by 86%.
- Post exposure chemoprophylaxis is therefore a key aspect of controlling influenza outbreaks in RCFs.



## How to prescribe oseltamivir for influenza?

### Treatment dose of oseltamivir

Oseltamivir (Tamiflu™) 75 mg **twice daily** for **5 days**



### Post exposure chemoprophylaxis dose of oseltamivir

Oseltamivir (Tamiflu™) 75 mg **once daily** for **10 days**

### Dose adjustment for renal impairment (discuss with nephrology/physician if eGFR <10)

Creatinine clearance (or eGFR if CrCl unknown)	Treatment dose (x5/7)	Chemoprophylaxis dose (x 10/7)
61 and over	75 mg bd	75 mg od
>31-60	30mg bd	30 mg od
11-30	30mg od	30 mg every 48 hours

\*Zanamivir inhaler may be considered first line for severe immunosuppression. It is authorised for use in the EU but is only available as an unlicensed product in Ireland. See HPSC guidelines for info.

Detailed HPSC guidelines available:

<https://www.hpsc.ie/a-z/respiratory/influenza/seasonalinfluenza/guidance/antiviraltreatmentandprophylaxisguidance/Antivirals%20guidance%20for%20treatment%20and%20prophylaxis%20of%20influenza.pdf>

### Key messages



- ✓ Antivirals to prevent and treat influenza are an important, evidence-based component of controlling outbreaks in RCFs.
- ✓ Decisions regarding prescribing are made by the resident's GP, with support from Public Health if needed.
- ✓ Treatment should be offered to all residents with signs/symptoms of influenza/ILI who are in a high-risk group for influenza and their close contacts, based on clinical judgement.
- ✓ Empiric treatment should be commenced as soon as possible after symptom onset (within 48 hours for both oseltamivir and zanamivir), without waiting for the results of viral swabs/testing.