



STATE OF TENNESSEE  
DEPARTMENT OF HEALTH

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COMMISSIONER

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**Respiratory Illness Prevention and Control**

September 25, 2017

Dear Colleague:

With the arrival of fall in Tennessee, children are back in school. With the return to school comes the expected increase in respiratory illnesses. Although many respiratory illnesses are merely an inconvenience, the population impact of these diseases can be significant and warrants the sharing of some relevant Tennessee-specific information to assure our coordinated approach this fall and winter.

This correspondence includes information and reminders regarding the following topics:

- Colds, parainfluenza, and influenza
- Emerging respiratory viruses, such as novel influenza and Middle East Respiratory Syndrome Coronavirus
- Appropriate antibiotic use

**Colds, Parainfluenza and Influenza**

The most common respiratory viruses that circulate this time of year are [the common cold](#) and [parainfluenza viruses](#). Vaccines to prevent these infections are not available, and treatment is limited to symptom relief and supportive care. To prevent the spread of these viruses, remind your patients to stay home when sick, cover their coughs, and wash their hands frequently with soap and water. Standard and contact precautions are recommended for health care workers caring for these patients to avoid spreading these viruses.

Influenza vaccination remains the most effective way to prevent influenza. [Annual influenza vaccination](#) is recommended for all persons aged six months and older who do not have contraindications. Thanks to reassuring safety data from the US and abroad in recent years, the Centers for Disease Control and Prevention (CDC) no longer classifies egg allergy as a precaution to receiving influenza vaccination. Persons who have a higher risk of developing influenza-related complications (including infants and young children, pregnant women, the elderly and those with underlying medical conditions) and all health care workers are especially encouraged to get vaccinated. Thank you for continuing to promote flu vaccine, both by setting the example as healthcare providers in Tennessee hospitals had vaccination rates over 89% in 2016-17 and by your encouragement which resulted in 46.3% of Tennesseans getting vaccinated in 2015-16. Pregnant women remain very important vaccine recipients, as vaccinating them can protect them and their children after delivery. Influenza vaccination is available through local health departments, clinics and pharmacies across the state. Vaccination will continue throughout the influenza season. Contact your local health department to learn more about their activities in your community.

**Emerging Respiratory Viruses**

Please consider [novel influenza virus infections](#) in persons with influenza-like illness and swine or poultry exposure or in persons with severe acute respiratory infection after travel to areas where avian influenza viruses have been detected. Please contact the [local health department](#) immediately if you suspect a novel influenza virus infection. The CDC offers important [guidance for people attending agricultural fairs or other settings where swine might be present](#), including additional precautions for

people who are at higher risk of developing serious influenza complications for your reference. In addition, avian influenza viruses, particularly A/H7N9, remain a threat to travelers and residents of other parts of the world, with 760 cases reported in China during this current epidemic season by the World Health Organization as of September 5<sup>th</sup>, making this the largest H7N9 epidemic to date. [CDC guidance about preventing avian influenza](#) is available and includes the importance of hand hygiene and avoiding contact with live poultry or bird markets.

[Middle East Respiratory Syndrome Coronavirus](#) (MERS-CoV) is another emerging respiratory virus to consider for patients with recent travel to the Arabian Peninsula. The annual Hajj or pilgrimage to Mecca, Saudi Arabia, one of the largest mass gatherings in the world, occurred August 30 through September 4, 2017. In previous years, health departments have seen an increase in [patients under investigation \(PUIs\)](#) for Middle East Respiratory Syndrome two to three weeks following the completion of Hajj, as travelers returned to the United States. We recommend that health care providers routinely ask patients about their travel history and consider MERS-CoV infection if the patient has both clinical features and an epidemiologic risk for being a PUI. If you have a patient that meets these criteria, please implement recommended infection control precautions (e.g., standard, contact, and airborne precautions) immediately and contact the Tennessee Department of Health at 615-741-7247 (business and after-hours) to discuss laboratory testing.

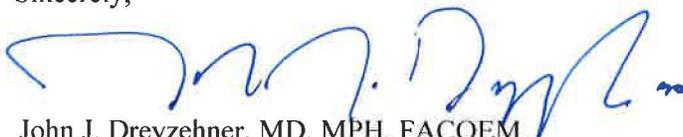
#### **Reminders about Antibiotic Use and Drug Resistance**

The season of respiratory illnesses also provides an opportunity to review the importance of the judicious use of antibiotics. CDC estimates that one-third of the antibiotics prescribed in outpatient settings are not necessary, and overuse can lead to antimicrobial resistance, increased health care costs, and more severe illnesses. Materials are available to help you [address the challenges you face when you cannot meet your patients' expectations of receiving a prescription for an antibiotic](#).

The Tennessee Department of Health, along with key partners, is committed to antimicrobial stewardship. We support programs that promote the optimal use of antimicrobials including use of the right medication at the right dose for the right duration. These efforts are aimed at preserving the effectiveness of antibiotics. In addition, we track unusual patterns of antibiotic resistance so we can take action to minimize the risk of the spread of these organisms. In Tennessee we are seeing increasing numbers of antimicrobial resistant organisms including carbapenem-resistant Enterobacteriaceae (CRE) every year. Please help slow the advance of antimicrobial resistance by having those difficult but important conversations with your patients about appropriate antibiotic use.

As always, I thank you for all you do to protect health and promote well-being in Tennessee. I want to particularly thank you for your diligence in detecting, treating, and preventing these illnesses.

Sincerely,



John J. Dreyzehner, MD, MPH, FACOEM  
Commissioner