

Please see the following pages for the Use of Oseltamivir (Tamiflu®) for the Management of Influenza Outbreaks in Special Care Homes.

IMPORTANT

In preparation for Influenza season each fall, the manager of the Special Care Home should:

1. Have the creatinine clearance for each resident calculated.
2. Have the community pharmacist confirm the oseltamivir dosage based on the creatinine clearance results.
3. Ensure processes are in place to facilitate timely access to oseltamivir for treatment or prophylaxis in the event an Influenza outbreak is declared by the Medical Health Officer.

Use of Oseltamivir (Tamiflu®) for the Management of Influenza Outbreaks in Special Care Homes

Purpose:

To endorse the Association of Medical Microbiology and Infectious Disease Canada (AMMI Canada) guidelines on the use of antivirals for influenza in the management of outbreaks in Special Care Homes.

To define the process for reimbursement to pharmacies for oseltamivir prescriptions when provided to residents of special care homes during an influenza outbreak.

Background:

The National Advisory Committee on Immunization (NACI) provides national guidance on influenza vaccinations (<http://www.phac-aspc.gc.ca/naci-ccni/>). NACI recommendations inform the Ministry of Health's provincial influenza immunization strategy.

AMMI Canada produces guidelines on the use of antivirals for influenza (<http://www.ammi.ca/guidelines/>). Surveillance of antimicrobial resistant patterns contributes to the evidence for the recommendations for the use of specific antivirals in the treatment and prophylaxis of influenza. The Ministry of Health supports the AMMI Canada guidelines.

The United States' Centers for Disease Control and Prevention (CDC, 2020) identifies the elements of a multi-faceted approach in preventing transmission of influenza viruses and other infectious agents within healthcare settings, including in long-term care facilities:

1. Influenza Vaccination
2. Influenza Testing¹
3. Infection Prevention and Control Measures
4. Antiviral Treatment
5. Antiviral Chemoprophylaxis

During influenza outbreaks in these settings, antiviral medications² for prophylaxis are used to control an outbreak in the facility and not exclusively for the benefit of the individual resident. Chemoprophylaxis is combined with antiviral treatment of ill persons plus other measures to control outbreaks of influenza in special care homes.

¹ Influenza and COVID-19 cannot be reliably differentiated on clinical symptoms due to the range of overlapping respiratory and systemic symptoms.

² Peramivir (an intravenous neuraminidase inhibitor [NAI]) and baloxavir marboxil (a virus replication inhibitor distinct from NAIs) were licensed in Canada in 2017 and 2020 respectively, but neither are marketed and neither are approved for managing influenza outbreaks in Special Care Homes.

Expectations for General Infection Control Measures:

Special care homes have appropriate infection prevention and control programs. Refer to [Outbreaks in Integrated and Long-term Care Facilities](#) for general infection prevention and control measures as well as other existing policies and guidelines.

Definitions:

The Public Health Agency of Canada *FluWatch* definitions apply to this policy (<http://www.phac-aspc.gc.ca/fluwatch/index-eng.php>)

Eligibility Criteria:

Population Health Branch (PHB) is responsible for the program.

Reimbursement for **oseltamivir**³ drug coverage will be provided:

- when influenza is lab-confirmed;
- when a Medical Health Officer (MHO) has declared an outbreak;
- when routine and additional infection prevention and control measures are implemented;
- for treatment (5 days) of symptomatic residents in the areas/wards the MHO has designated as having an outbreak; and
- for prophylaxis (10 days) of all asymptomatic residents located in the areas/wards the MHO has designated as having an outbreak.

Use of oseltamivir outside of the above criteria is the responsibility of the Saskatchewan Health Authority (SHA).

Additional considerations:

- If new cases continue to develop >48 hours after initiation of prophylaxis, further investigation is warranted (Hota, 2007).
 - The Ministry of Health must be notified of extensions (i.e. repeat prescriptions) for ongoing outbreaks. NOTE: All extensions are subject to audit for appropriateness of use.

Exclusions:

- Reimbursement for costs of oseltamivir during outbreaks in special care homes, or similar institutions, in First Nations communities is the responsibility of Health Canada.
- The Ministry will not cover the use of zanamivir, peramivir or baloxavir marboxil under this program.
- Oseltamivir prescribed to employees in the facility is the responsibility of the individual or the SHA.
- Antiviral prophylaxis or treatment for in-hospital patients is the responsibility of the SHA.

³ Zanamivir is approved for this indication, however is not covered by the Ministry of Health. Neither Peramivir nor baloxavir marboxil are approved for managing influenza outbreaks in Special Care Homes

Oseltamivir is listed as a drug benefit under the Ministry of Health’s Drug Plan. Reimbursement to pharmacies is made through the Saskatchewan Drug Plan online computer system.

Step 1: Declaration of an Influenza Outbreak

- The MHO is responsible for notifying the Ministry of Health immediately of suspected and confirmed outbreaks as per the [Guide for Completing the Outbreak Notification and Summary Report](#)
- The MHO is responsible for declaring an outbreak; lab confirmation of influenza is required prior to initiating oseltamivir.

Step 2: Implementation of Oseltamivir Use

- In consultation with the attending physician or the employees in charge at the facility, the MHO determines if it is appropriate for oseltamivir to be used for outbreak control and will make recommendations as necessary.
- The facility employees create an “eligibility list” including the names and health registration numbers of the residents of the facility who meet the eligibility criteria to receive oseltamivir prophylaxis or treatment. **The eligibility list is sent to the pharmacy that provides services to the special care home for reference.**
- Once the MHO has recommended oseltamivir use for the outbreak, the patient’s attending physician makes the decision as to whether any individual resident is *treated* or provided *prophylaxis*. The physician is responsible for determining the dosage for each patient for whom the drug is prescribed. The physician(s), who are responsible for prescribing oseltamivir, should be made aware of this protocol and consult the product monograph⁴ for more detailed information.
- The employee(s) designated by the facility communicate with and obtain prescriptions for oseltamivir for the residents from their physician(s). The facility should have a consent procedure for residents in place.

Step 3: Notification of the Ministry of Oseltamivir Use

The MHO is responsible for notifying the Saskatchewan Drug Plan and Extended Benefits Branch, Ministry of Health of oseltamivir use within 48 hours using the [Tamiflu Approved for Influenza Outbreak](#) form.

The completed form shall be sent to the Saskatchewan Ministry of Health by:

- E-mail – dpeb@health.gov.sk.ca
- Indicate “Tamiflu Approved for Outbreak” in the e-mail subject line.

The following is used for accounting purposes:

- The name of the Special Care Home and city of the facility;
- The date oseltamivir was started;
- Number of beds in the facility's outbreak unit; and
- The name of the pharmacy.

Step 4: Monitoring the Outbreak

The MHO is responsible for communicating with the facility during the outbreak to track success of control measures and determine an end date for the outbreak and an end date for the use of oseltamivir. If new cases continue to arise more than 48 hours after initiation of treatment and prophylaxis, further investigation is warranted. A decision about the ongoing use of oseltamivir should be based on results of the investigation.

- Individuals who have completed a 5-day treatment course should not be given additional doses of oseltamivir.
- Residents who have recovered from laboratory confirmed influenza infection during the outbreak do not require oseltamivir prophylaxis.

Step 5: Payment of Oseltamivir

Eligible residents of Special Care Homes will pay \$0.00 co-payment for a prescription for oseltamivir when prescribed and used in the management of an influenza outbreak approved by the MHO. Pharmacies should refer to the Drug Plan Pharmacy Information Bulletin for specific details regarding the billing procedure.

References:

- Aoki, F. Y., Allen, U. D., Stiver, H. G. Evans, G. A. (2019). The use of antiviral drugs for influenza: A foundation document for practitioners – Update 2019. Retrieved October, 2022 from [Use of antiviral drugs for seasonal influenza: Foundation document for practitioners—Update 2019 \(utpjournals.press\)](https://utpjournals.press/doi/full/10.3138/jammi-2019-01-31).
- Aoki, F.Y., Papenburg, J., Mubareka, S., Allen, U. D., Hachette, T. F., and Evans, G. A. (2022). 2021-2022 AMMI Canada guidance on the use of antiviral drugs for influenza in the COVID-19 pandemic setting in Canada. Retrieved October, 2022 from <https://jammi.utpjournals.press/doi/full/10.3138/jammi-2022-01-31>.
- Hota, S. & McGreer, A. (2007). Antivirals and the control of influenza outbreaks. *Clinical Infectious Diseases*. 45: 1362-8 (15 November). Retrieved November, 2012 from <http://cid.oxfordjournals.org/content/45/10/1362.full>

Centers for Disease Control and Prevention. (2020). Interim guidance for influenza outbreak management in long-term care and post-acute facilities. Retrieved October 2022 from <https://www.cdc.gov/flu/professionals/infectioncontrol/ltc-facility-guidance.htm>

Centers for Disease Control and Prevention. (2011). Antiviral agents for the treatment and chemoprophylaxis of influenza. *Morbidity and Mortality Weekly Report (MMWR)*. 60(RR01); 1-24, January 21. Retrieved November, 2012 from <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr6001a1.htm>.

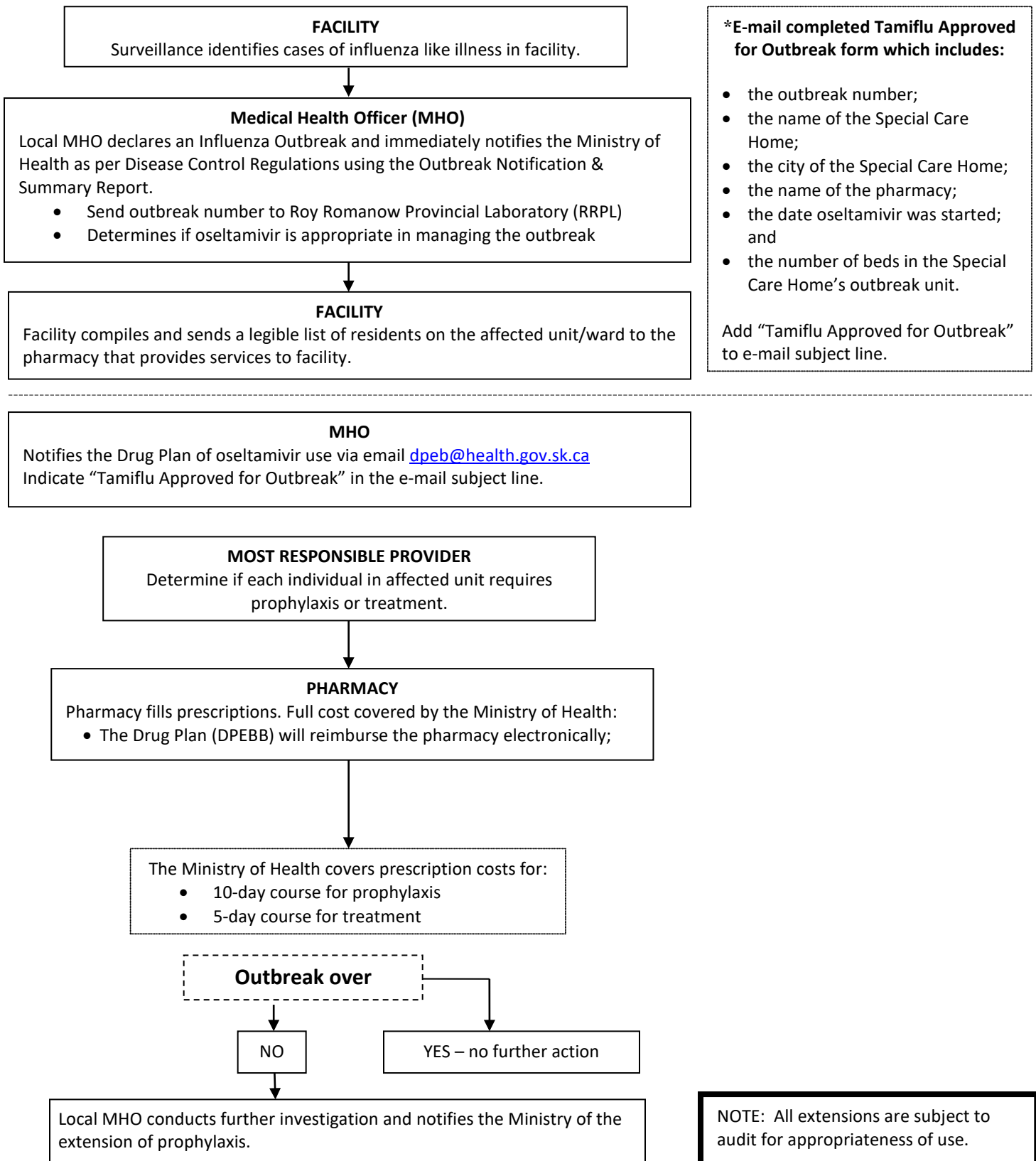
Appendix 1 - Checklist of Eligibility Criteria

- Laboratory confirmation of influenza received.
- Infection prevention and control measures implemented.
- 5 day treatment initiated for all symptomatic cases within the affected unit/wing.
- 10 day prophylaxis initiated for residents within the affected unit/wing.
- If additional cases continue to occur 48 hours after oseltamivir initiation, additional investigation completed:
 - Additional specimen collection for other infections and influenza virus susceptibility testing.
 - Review of other infection prevention and control measures.
- Notify the Ministry of all extensions of the use of oseltamivir for outbreaks lasting longer than 10 days. NOTE: All extensions are subject to audit for appropriateness of use.

Revisions

Date	Change
Oct 2022	<p>Added elements of multi-faceted approach for influenza outbreak prevention from CDC. Included footnote acknowledging the overlapping and indistinguishable clinical presentations between COVID-19 and influenza.</p> <p>Added footnote acknowledging peramivir and baloxavir marboxil as other antivirals, however these are not approved of outbreak response.</p> <p>Removed the requirement to obtain CMHO approval for antiviral extension for ongoing outbreaks and replaced with statement that extensions are subject to audit for appropriateness.</p> <p>Updated references.</p>

Quick Reference for Saskatchewan Ministry of Health Use of Oseltamivir (Tamiflu) for the Management of Influenza Outbreaks in Special Care Homes – General Process



Saskatchewan Quick Reference for Saskatchewan Ministry of Health Use of
 Oseltamivir (Tamiflu) for the Management of Influenza Outbreaks
 in Special Care Homes –
 Information for Pharmacies

This document should be used in conjunction with the *Quick Reference for Saskatchewan Ministry of Health Use of Oseltamivir (Tamiflu®) for the Management of Influenza Outbreaks in Special Care Homes – General Process*.

ELIGIBILITY

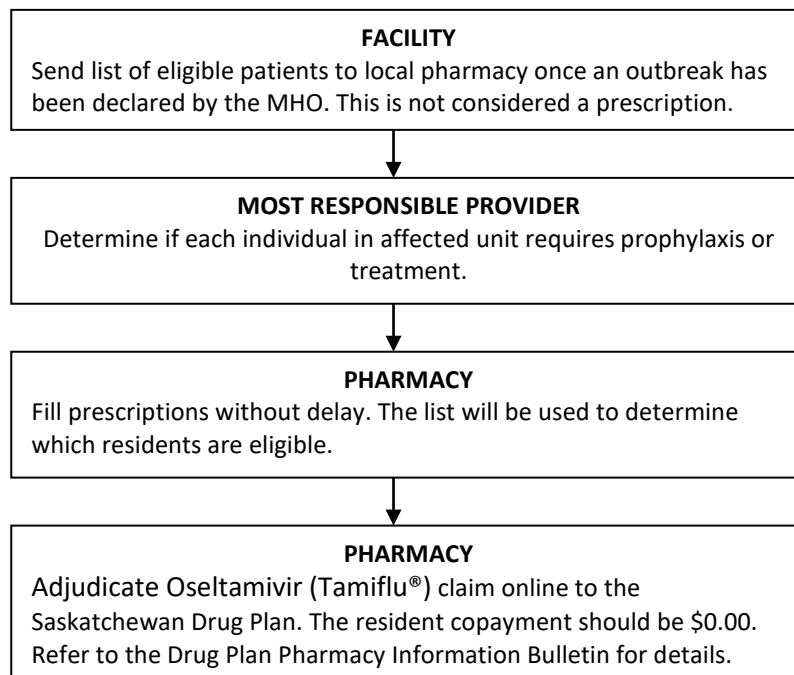
The Ministry of Health will reimburse a pharmacy for the full amount of individuals' prescription of oseltamivir when used for an influenza outbreak declared by the Local Medical Health Officer (MHO) in a Special Care Home and when used within the following parameters:

- Prophylaxis for residents in affected units/wards.
- Treatment for symptomatic residents in affected units/wards if started within 48 hours of symptom onset.

EXCLUSIONS

The Ministry of Health will not reimburse pharmacies for oseltamivir prescriptions for:

- Employees in the affected facilities.
- Patients in hospitals including long-term care residents in hospitals.
- Institutions in First Nations communities, as these are the responsibility of Health Canada.
- Patients who are eligible for coverage by Veterans' Affairs Canada (VAC). These should be billed directly through VAC.



Repeat prescriptions will only be approved for payment if the local MHO determines that a longer duration is required. NOTE: All extensions are subject to audit for appropriateness of use.

Complete this form when Tamiflu has been authorized by the Medical Health Officer for use in an Influenza Outbreak in a Special Care Home.

E-mail the completed form to: dpeb@health.gov.sk.ca

Subject Line: Tamiflu Approved for Use

Details

Outbreak Number:	_____
Special Care Home Facility Number:	_____
Special Care Home Name:	_____
Wing or Unit:	_____
City of Special Care Home:	_____
Name of Pharmacy:	_____
Date Oseltamivir Started:	_____
Number of beds in Special Care Home's outbreak unit:	_____

Medical Health Officer Authorizing Tamiflu Use:	_____
Medical Health Officer Phone Number:	_____

Date of Request for Tamiflu Extension:	_____
Reason for Tamiflu Extension:	_____

Approved by:	Date Approved:
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