



Nebraska Department of Health and Human Services
HEALTH ALERT NETWORK
Update

NEBRASKA
Good Life. Great Mission.
DEPT. OF HEALTH AND HUMAN SERVICES

TO: Hospitals, Labs, Primary Care Providers, Infectious Disease, and Public Health

FROM: Derek Julian, MPH Robin Williams, MPH Mike Reh
Epidemiologist Influenza Surveillance Coordinator Public Health Associate
PHONE: 402-471-1376 PHONE: 402-471-0935 PHONE: 402-471-0590

Matthew Donahue, M.D. Gary Anthonie, M.D.
State Epidemiologist Director/CMO Public Health
PHONE: 402-471-8566 PHONE: 402-471-2937

RE: Non-COVID-19 respiratory disease updates: monitoring for MERS-CoV & Influenza

DATE: July 20, 2022

COVID-19 continues to account for most respiratory infections resulting in hospitalization and death at this time, but other respiratory diseases should still be considered.

Middle East Respiratory Syndrome Coronavirus (MERS-CoV) & Hajj 2022

The annual Hajj or pilgrimage to Mecca, Saudi Arabia will have taken place in 2022 from approximately July 7 to July 12. In previous years, state and local health departments have seen an increase in patients under investigation (PUIs) for MERS-CoV 2-3 weeks following the completion of Hajj as travelers return to the US. Healthcare providers should routinely ask patients about their travel history and evaluate patients for MERS-CoV infection if they have both clinical features and an epidemiologic risk. Providers should immediately contact their state or local health department (www.dhhs.ne.gov/lhd) if evaluating a patient who meets PUI criteria (<https://www.cdc.gov/coronavirus/mers/interim-guidance.html>). COVID-19 should be ruled out AND the patient must meet one of the three criteria listed below to be considered a MERS-CoV PUI:

- A. Fever AND pneumonia or acute respiratory distress syndrome (based on clinical or radiologic evidence) AND EITHER:
- history of travel from countries in or near the Arabian Peninsula within 14 days before symptom onset, OR
 - close contact with a symptomatic traveler who developed fever and acute respiratory illness (not necessarily pneumonia) within 14 days after traveling from countries in or near the Arabian Peninsula, OR
 - a member of a cluster of patients with severe acute respiratory illness (e.g., fever and pneumonia requiring hospitalization) of unknown etiology in which MERS-CoV is being evaluated, in consultation with state and local health departments,
- OR**
- B. Fever AND symptoms of respiratory illness (not necessarily pneumonia; e.g., cough, shortness of breath) AND being in a healthcare facility (as a patient, worker, or visitor) within 14 days before symptom onset in a country or territory in or near the Arabian Peninsula in which recent healthcare-

associated cases of MERS-CoV have been identified.

OR

- C. Fever OR symptoms of respiratory illness (not necessarily pneumonia; e.g., cough, shortness of breath) AND close contact with a confirmed MERS-CoV case while the case was ill.

CDC's reporting guidelines for a MERS-CoV PUI can be viewed [here](#). Additional information for travelers can be obtained from CDC – Travelers' Health

<https://wwwnc.cdc.gov/travel/yellowbook/2020/popular-itineraries/saudi-arabia-hajjumph-pilgrimage>

Summertime Influenza Recommendations

While lab-confirmed influenza decreased in Nebraska in the late spring, it has not completely disappeared as happens in most other years. Despite decreasing lab-confirmed cases, summertime influenza transmission at agricultural fairs and swine exhibitions remains a concern

(<https://www.cdc.gov/flu/swineflu/interim-guidance-variant-flu.htm>). Pigs can be infected with human, swine, and avian origin influenza A viruses. While uncommon, influenza A viruses can spread from pigs to people and from people to pigs. This usually requires close contact between pigs and people. When people are infected with swine-origin influenza A viruses, it is termed a “variant” virus infection and denoted with a “v” after the subtype (e.g., H3N2v). For the 2021-2022 season, there have been detections of H1N2v, H3N2v, H1v, and H5 across the country. For educational resources, please visit:

<https://www.unmc.edu/publichealth/yia/index.html>

An additional concern surrounding summertime influenza is influenza transmission from birds to humans. With the current Highly Pathogenic Avian Influenza (HPAI) outbreak (H5N1), there has been one detection of H5N1 in humans in 2022. However, this HPAI outbreak still poses a low risk to the public.

For additional information on HPAI, please visit: <https://www.cdc.gov/flu/avianflu/avian-flu-summary.htm>

We advise the medical community to consider influenza in persons with influenza-like illness (ILI), defined as fever (temperature of 100°F [37.8°C] or greater) plus a cough and/or a sore throat. Antiviral medication is indicated for those who present with ILI and who test positive or patients who show clinical illness compatible with influenza in the presence of an outbreak where other patients have been lab-confirmed. Recommended infection control measures including handwashing, staying home when ill (self-isolation), and covering the mouth and nose when coughing.

Rapid influenza testing should be performed in patients who present with ILI and no other known cause of illness. If the test is positive for influenza A or the patient is highly suspect of influenza but tests negative, a second nasopharyngeal swab/washing should be obtained for PCR at the Nebraska Public Health Laboratory (NPHL). During the summer months, any Nebraska laboratory can send specimens to the NPHL. Please notify your [local public health department](http://dhhs.ne.gov/Pages/Community-Health-and-Performance-Management.aspx) (<http://dhhs.ne.gov/Pages/Community-Health-and-Performance-Management.aspx>) or NE DHHS [Office of Epidemiology](https://dhhs.ne.gov/Pages/Epidemiology.aspx#) (<https://dhhs.ne.gov/Pages/Epidemiology.aspx#>) of any suspect cases of influenza to arrange for submission of specimens to the NPHL. It is important to collect epidemiologic data on these cases including travel history, exposure to animals, occupation, and vaccination status. To submit an influenza specimen to NPHL for testing at public health expense, specimens must be ordered in [NUIrt](https://nulirt.nebraskamed.com/login) (<https://nulirt.nebraskamed.com/login>). For individuals who need access to become users of NUIrt, please visit <http://www.nphl.org/phlip.cfm> for instructions on how to obtain credentials to become a user of the NUIrt system. Specimen collection guidance is located here: <http://dhhs.ne.gov/Flu%20Documents/Flu%20Collection%20Transport.pdf>.