

23 July 2009



Dear Colleague,

NATIONAL PANDEMIC FLU SERVICE

This letter contains:

- An update on how the National Pandemic Flu Service will work
- Information on groups who will still consult their doctor
- Further information on the spread of the new influenza A H1N1v

It should be read in conjunction with my last letter of 2nd July 2009 and with Prof. Lindsey Davies' letter of 17th July 2009.

The National Pandemic Flu Service referred to in the letter from Prof. Lindsey Davies (National Director Pandemic Influenza Preparedness) is now being launched.

Members of the public who believe they have influenza will be able to work through a clinical algorithm on the Internet (www.direct.gov.uk/pandemicflu) or with a telephone operator (0800 1 513 100 or text-phone 0800 1 513 200).

If they fulfil the criteria they will be allocated a unique reference number which enables someone on their behalf (a "flu friend") to collect antiviral drugs. Certain risk groups will be advised to contact their General Practitioner.

One of the intentions of the new system is to encourage self-care for straightforward cases of influenza. This will relieve the burden on NHS services.

As a precaution, public information will advise certain groups to contact their doctor rather than use the National Pandemic Flu Service. This includes those:

- With a serious underlying illness
- Who are pregnant
- Who have a sick child under one year old
- Whose condition or whose child's condition suddenly gets much worse
- Whose condition is still getting worse after 7 days (5 days for a child)

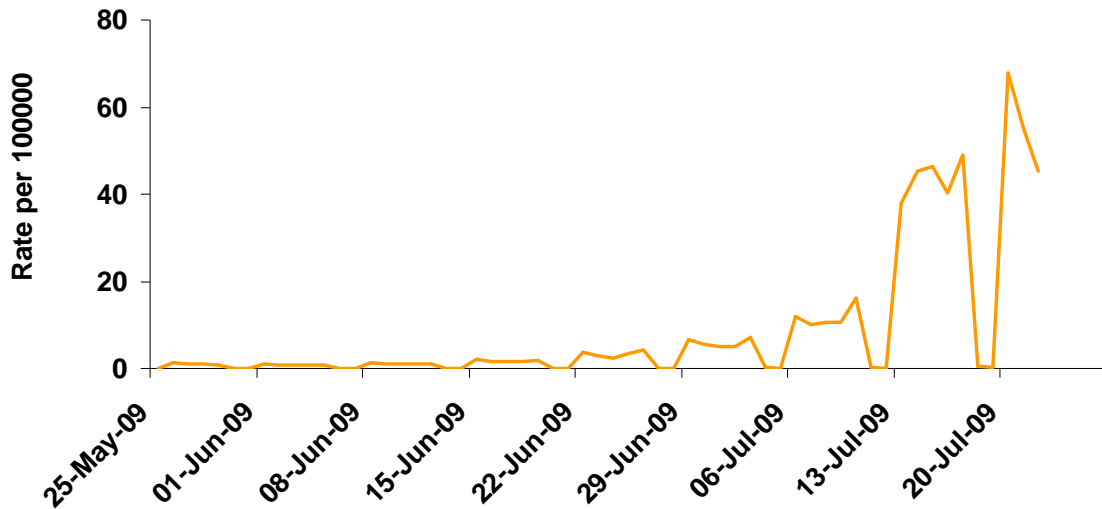
Some of the patients listed above may not notice this advice and use the Internet and telephone service anyway. They will still be able to do so and will be given treatment or advised to contact their doctor as appropriate.

Furthermore, some patients with no underlying risk may continue to contact their doctor. As set out in my letter of 2nd July 2009, doctors are advised to take a precautionary approach and offer antivirals to patients with symptoms strongly suggestive of H1N1v. It is acknowledged that doctors must use their clinical judgement and will not usually choose to offer antivirals in circumstances where there are minor or unrelated respiratory symptoms.

Further information on the pandemic in England

The rate of consultations for influenza like illness has increased rapidly over the last two weeks (see figure 1), but has fallen slightly over the last two days (21st and 22nd July). A level of 26 per 100,000 per day is classified as exceptional influenza activity.

Figure 1: Influenza like illness consultation rates in the UK



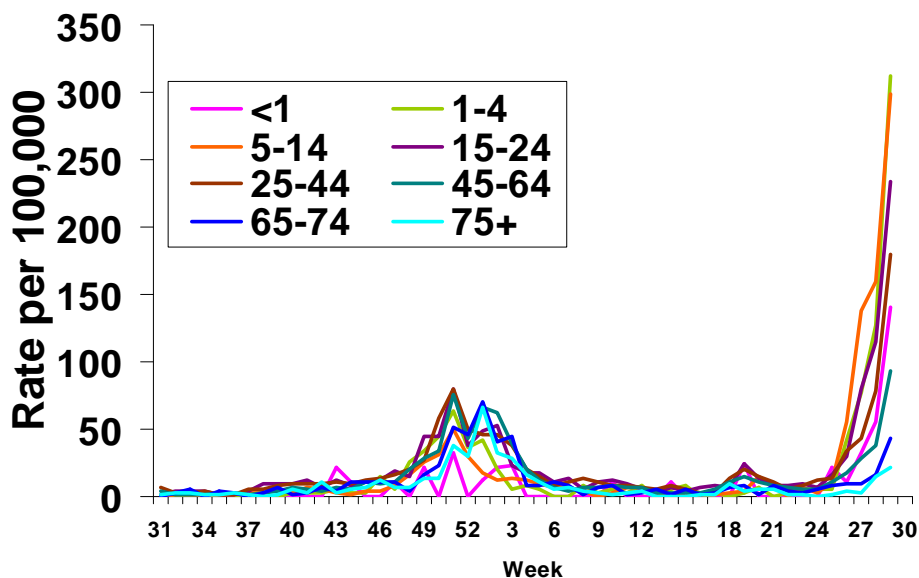
Source: Qsurveillance

The Health Protection Agency estimates that there were 100,000 new cases of H1N1v in the week up to 22nd July.

While the outbreaks were initially localised in certain parts of the country (London and the West Midlands in particular) influenza activity has now increased in every Strategic Health Authority. These figures suggest exceptional levels of influenza like illness in all regions of the country.

The age profile of influenza like illness consultations shows higher levels of infection in the younger age groups. Particularly in the age ranges of 1-4 years and 5-14 years (see figure 2).

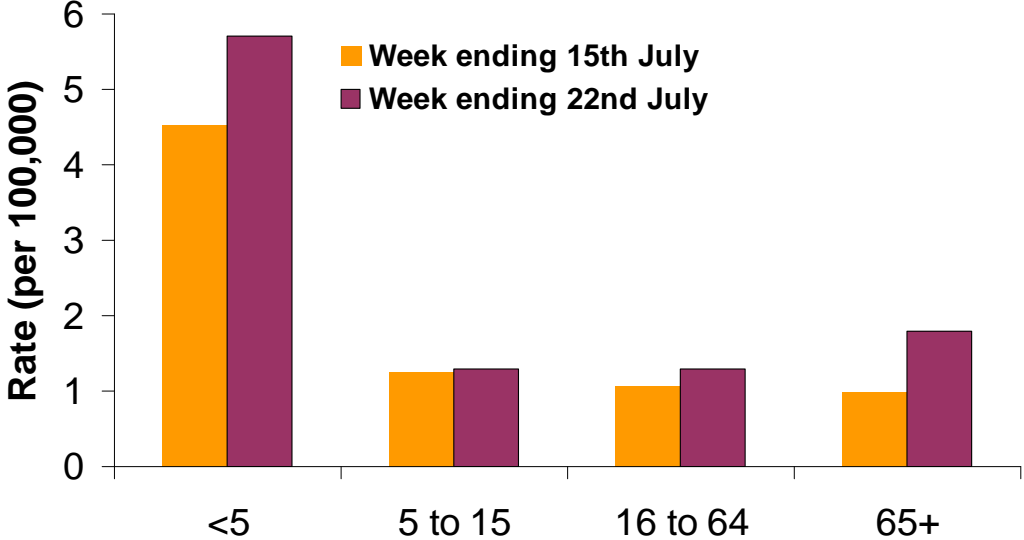
Figure 2: Weekly Influenza like illness consultation rates by age band



Source: RCGP

Figures on 22nd July showed that there were 840 patients in England hospitalized with H1N1v, and of those 63 required critical care beds. Of the 840, 169 were <5 years, 87 were 5-15 years, 435 were 16-64 years and 149 were 65 years or more. Hospitalization ratios demonstrate higher levels in the younger age groups (figure 3).

Figure 3: Hospitalization ratios by age group



Thank you again for all the excellent work you are doing to combat this disease.
Yours sincerely,

Sir Liam Donaldson
Chief Medical Officer