



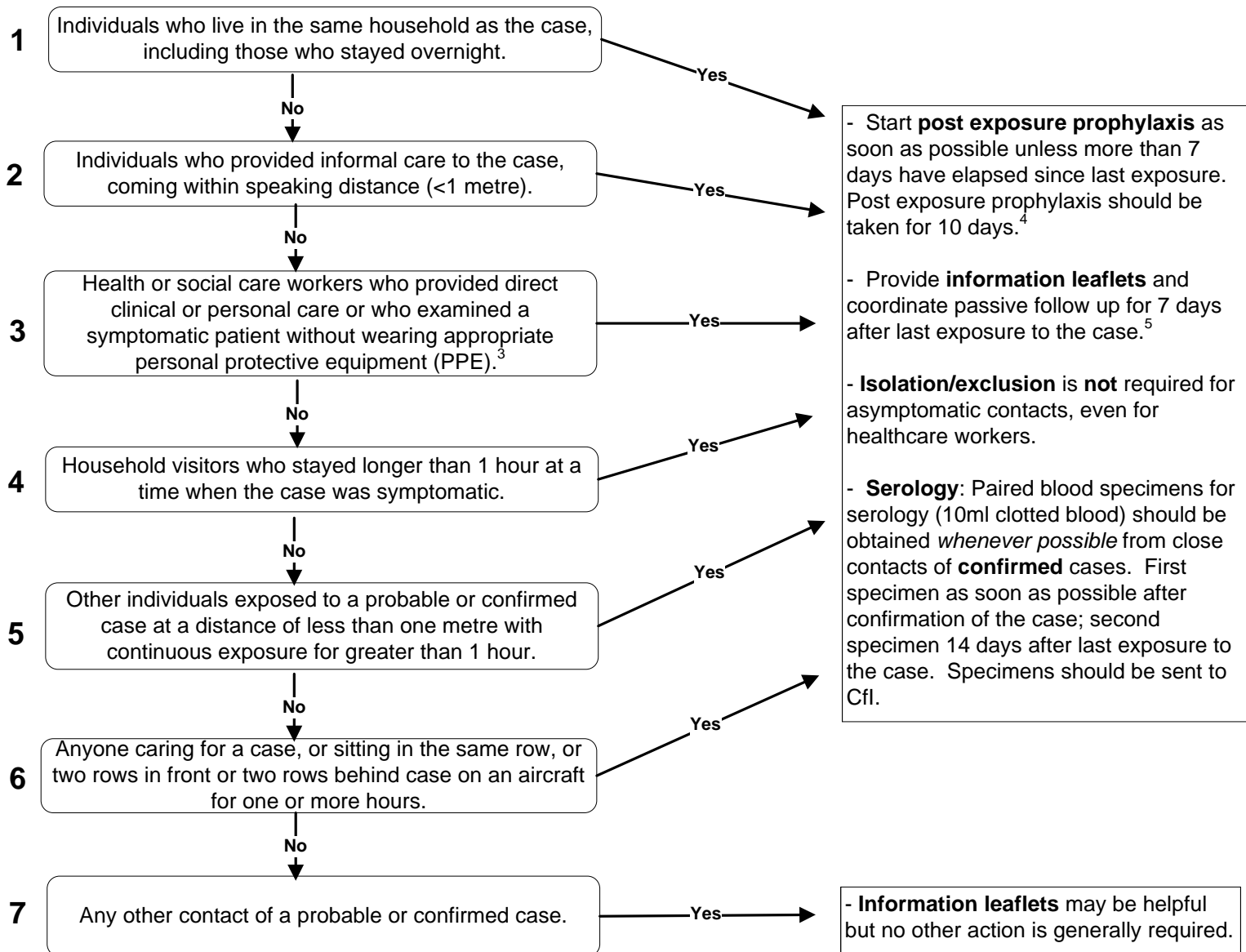
WHO PANDEMIC ALERT PHASE 5: Actions and post exposure prophylaxis for close contacts of probable¹ or confirmed² human case(s) of swine influenza A/H1

Post exposure prophylaxis for close contacts of probable and confirmed cases is a control measure to be applied before there is widespread sustained transmission within the UK. Therefore this policy may be modified as the situation changes.

Post exposure prophylaxis is indicated for close contacts who were exposed to a probable or confirmed case during the period when the case was symptomatic **AND** the contact's last exposure occurred no more than **seven** days previously.

Category of Contact

Actions



Contacts of confirmed cases who are identified **more than 7 days after last exposure**: check their current health status and arrange for a blood sample for serology to be taken 14 or more days after last exposure.

If a contact becomes unwell, follow the same approach as the recommended management of a febrile illness in returning travellers (Algorithm S5).

Footnotes:

1. Probable case: Any person meeting the clinical and epidemiological criteria AND with a positive test for influenza A (see Algorithm S4).
2. Confirmed case: Any person with laboratory confirmation of swine influenza A/H1N1.
3. Please refer to your organisation's guidelines and plans for the appropriate PPE requirements.
4. Standard prophylaxis dose of oseltamivir in adults (age >13 years old) is 75mg od for 10 days. Standard prophylaxis dose of zanamivir is 10mg od for 10 days. (<http://www.bnf.org/bnf/bnf/current/119743.htm>) Follow guidelines unless expert advice is to increase dose.
5. Passive follow up: provision of information to individual (or responsible carer) and request that any febrile respiratory or other unexplained illness within 7 days of last contact be reported (24 hour reporting).

In case of uncertainty, discuss with local Health Protection Unit.