

Tamiflu® Treatment and Prophylaxis Information per CDC Recommendations



Tamiflu Standard Dosing Information for Treatment:

Antiviral Agent	Activity Against	Use	Recommended For	Not Recommended for Use in	Children	Adults	Duration	Adverse Events
Oral Tamiflu (oseltamivir)	Influenza A and B	Treatment (5 days)	Any age	N/A	<p>If younger than 1 year old:</p> <ul style="list-style-type: none"> 3 mg/kg/dose twice daily <p>If 1 year or older, dose varies by child's weight:</p> <ul style="list-style-type: none"> 15 kg or less, the dose is 30 mg twice a day >15 to 23 kg, the dose is 45 mg twice a day >23 to 40 kg, the dose is 60 mg twice a day >40 kg, the dose is 75 mg twice a day 	75 mg twice daily	Recommended duration for antiviral treatment is 5 days for oseltamivir	Adverse events: nausea, vomiting

Persons at higher risk for influenza complications recommended for antiviral treatment include¹:

- Children aged younger than two years.
- Adults aged 65 years and older.
- Persons with chronic pulmonary (including asthma), cardiovascular (except hypertension alone), renal, hepatic, hematological (including sickle cell disease), and metabolic disorders (including diabetes mellitus), or neurologic and neurodevelopment conditions (including disorders of the brain, spinal cord, peripheral nerve, and muscle, such as cerebral palsy, epilepsy [seizure disorders], stroke, intellectual disability [mental retardation], moderate to severe developmental delay, muscular dystrophy, or spinal cord injury).
- Persons with immunosuppression, including that caused by medications or by HIV infection.
- Women who are pregnant or postpartum (within 2 weeks after delivery).
- Persons aged younger than 19 years who are receiving long-term aspirin therapy.
- American Indians/Alaska Natives.
- Persons who are morbidly obese (i.e., body mass index is equal to or greater than 40).
- Residents of nursing homes and other chronic care facilities.

Tamiflu Prophylaxis Information

Antiviral Agent	Activity Against	Use	Recommended For	Not Recommended for Use in	Children	Adults	Duration	Adverse Events
Oral Tamiflu (oseltamivir)	Influenza A and B	Prophylaxis	3 months and older	N/A	<p>If child is younger than 3 months old,</p> <ul style="list-style-type: none"> Use of oseltamivir for chemoprophylaxis is not recommended unless situation is judged critical due to limited data in this age group. <p>If child is 3 months or older and younger than 1 year old</p> <ul style="list-style-type: none"> 3 mg/kg/dose once daily <p>If 1 year or older, dose varies by child's weight:</p> <ul style="list-style-type: none"> 15 kg or less, the dose is 30 mg once a day 15 to 23 kg, the dose is 45 mg once a day 23 to 40 kg, the dose is 60 mg once a day >40 kg, the dose is 75 mg once a day 	75 mg once daily	<p>Recommended duration is 7 days (after last known exposure).</p> <p>For control of outbreaks in institutional settings (e.g. long-term care facilities for elderly persons and children) and hospitals, CDC recommends antiviral chemoprophylaxis for a minimum of 2 weeks, and continuing up to 1 week after the last known case was identified. Antiviral chemoprophylaxis is recommended for all residents, including those who have received influenza vaccination, and for unvaccinated institutional employees.</p>	Adverse events: nausea, vomiting

Reminders Regarding Antiviral Prophylaxis of Influenza¹:

- Annual influenza vaccination is the best way to prevent influenza because vaccination can be given well before influenza virus exposures occur, and can provide safe and effective immunity throughout the influenza season.
- Antiviral medications are approximately 70% to 90% effective in preventing influenza and are useful adjuncts to influenza vaccination.
- The Centers for Disease Control (CDC) does not recommend widespread or routine use of antiviral medications for chemoprophylaxis so as to limit the possibilities that antiviral resistant viruses could emerge. Indiscriminate use of chemoprophylaxis might promote resistance to antiviral medications, or reduce antiviral medication availability for treatment of persons at higher risk for influenza complications or those who are severely ill.
- In general, CDC does not recommend seasonal or pre-exposure antiviral chemoprophylaxis, but antiviral medications can be considered for chemoprophylaxis in certain situations.
- The following are examples of situations where antiviral medications can be considered for chemoprophylaxis to prevent influenza:
 - Prevention of influenza in persons at high risk of influenza complications during the first two weeks following vaccination after exposure to an infectious person.
 - Prevention for people with severe immune deficiencies or others who might not respond to influenza vaccination, such as persons receiving immunosuppressive medications, after exposure to an infectious person.
 - Prevention for people at high risk for complications from influenza who cannot receive influenza vaccine due to a contraindication after exposure to an infectious person.
 - Prevention of influenza among residents of institutions, such as long-term care facilities, during influenza outbreaks in the institution. For more information, see [IDSA Guidelines](#) website.
- An emphasis on close monitoring and early initiation of antiviral treatment if fever and/or respiratory symptoms develop is an alternative to chemoprophylaxis after a suspected exposure for some persons.
- To be effective as chemoprophylaxis, an antiviral medication must be taken each day for the duration of potential exposure to a person with influenza and continued for seven days after the last known exposure. For persons taking antiviral chemoprophylaxis after inactivated influenza vaccination, the recommended duration is until immunity after vaccination develops (antibody development after vaccination takes about two weeks in adults and can take longer in children depending on age and vaccination history).
- Antiviral chemoprophylaxis generally is not recommended if more than 48 hours have elapsed since the first exposure to an infectious person.
- Patients receiving antiviral chemoprophylaxis should be encouraged to seek medical evaluation as soon as they develop a febrile respiratory illness that might indicate influenza.

References:

1. Centers for Disease Control and Prevention. About Flu. 2017. <https://www.cdc.gov/flu/about/index.html>. Accessed 9/18/17.