NHS National Institute for Health and Clinical Excellence

Understanding NICE guidance

Information for people who use NHS services

Oseltamivir, amantadine and zanamivir to prevent influenza

NICE 'technology appraisal guidance' advises on when and how drugs and other treatments should be used in the NHS. This leaflet is about when **oseltamivir, amantadine and zanamivir** should be used to prevent influenza (flu) in the NHS in England and Wales. It explains guidance (advice) from NICE (the National Institute for Health and Clinical Excellence). It is written for people who have been in contact with someone they live with who has had recent symptoms of flu, but it may also be useful for their families or carers or anyone with an interest in the condition.

It does not describe influenza or the treatments in detail – your GP should discuss these with you. Some sources of further information are on the back page.

Information about NICE technology appraisal guidance 158 Issue date: September 2008



Corporate member of Plain English Campaign. 197 Committed to clearer communication These may not be the only drugs to prevent flu. Your healthcare team should talk to you about whether it is suitable for you and about other options available.

What has NICE said?

NICE has said that its recommendations about oseltamivir and zanamivir should not reduce efforts to give vaccination (also called the flu jab) to people for whom it is recommended in national guidelines.

The guidance does not cover widespread epidemics.

Oseltamivir and zanamivir are recommended to prevent flu if **all** of the following apply.

- The amount of flu virus going around is enough that if someone has a flu-like illness it is likely that it has been caused by the flu virus.
- The person is in an at-risk group (see page 3).
- The person has been in contact with someone with a flu-like illness and can start treatment within 36 hours (for zanamivir) or within 48 hours (for oseltamivir).
- The person has not been effectively protected by vaccination.

People who are not effectively protected by vaccination include:

- Those who have not been vaccinated since the previous winter.
- Those who cannot be vaccinated or who have been vaccinated but it hasn't taken effect yet.
- Those who have been vaccinated for a different form of flu virus.

If there is an outbreak of flu in a residential or nursing home, oseltamivir and zanamivir may be offered to people at risk if they have been in contact with someone with flu, as long as it is sure that it really was flu. This is because these homes are closed places in which flu can spread quickly. This could happen even if the people have been vaccinated, and even if the flu virus is not going around in the wider community outside the home.

Healthcare professionals should discuss with the person being offered the drug whether to choose oseltamivir or zanamivir. The decision should take into account the person's preferences and any potential adverse effects. If all else is equal, the cheapest drug should be used.

Oseltamivir and zanamivir are not recommended to prevent flu when it is going around if people have not been in contact with someone with flu.

Amantadine is not recommended to prevent flu in any situation.

Who is at risk?

People considered to be at risk are people who have one or more of:

- chronic disease (a chronic condition is one that lasts for a long time) of the lungs (including some people with asthma)
- chronic heart disease
- chronic kidney disease
- chronic liver disease
- chronic disease of the nervous system (which includes the brain)
- an immune system that does not work well
- diabetes.

People who are aged 65 years or older are also defined as at risk.

Influenza

Influenza (or flu, as it is usually called) is an infection of the air passages, including the lungs. It is caused by a virus. The symptoms include fever, cough, sore throat, muscle pains and headache. Nausea, vomiting and diarrhoea are also common. Many other viruses can cause symptoms like those of flu, so doctors commonly diagnose a 'flu-like illness'. Although flu is sometimes confused with the common cold it is caused by a different type of virus.

Flu is easily spread from person to person by sneezing and coughing. It is most common between December and March. Most people with flu get better within 1–2 weeks, but some people develop problems such as chest infections that may be serious. Vaccination is the main way to prevent flu. Drugs called 'antivirals' are also used to prevent flu.

Oseltamivir, amantadine and zanamivir

Oseltamivir, amantadine and zanamivir are three antiviral drugs that are marketed to prevent flu. They work by stopping the flu virus from multiplying in the body. They work in a different way from vaccination. They are also different from medicines such as painkillers that are used to treat the symptoms of flu.

What does this mean for me?

When NICE recommends a treatment, the NHS must ensure it is available to those people it could help, normally within 3 months of the guidance being issued. So, if you have been in contact with someone with flu, and your doctor thinks that **oseltamivir** or **zanamivir** is the right treatment for you, you should be able to have the treatment on the NHS. Please see

www.nice.org.uk/aboutguidance if you appear to be eligible for the treatment but it is not available.

NICE looks at how well treatments work and also at how well they work in relation to how much they cost the NHS.

Amantadine was not shown to be effective in preventing flu and therefore it was not shown to represent value for money. This means that for the time being it should not be prescribed routinely on the NHS to prevent flu. Your doctor should talk to you about other options available to you.

More information

NHS Direct online (www.nhsdirect.nhs.uk) may be a good starting point for finding out more. Your local Patient Advice and Liaison Service (PALS) may also be able to give you further advice and support.

About NICE

NICE produces guidance (advice) for the NHS about preventing, diagnosing and treating different medical conditions. The guidance is written by independent experts including healthcare professionals and people representing patients and carers. They consider all the research on the disease or treatment, talk to people affected by it, and consider the costs involved. Staff working in the NHS are expected to follow this guidance.

To find out more about NICE, its work and how it reaches decisions, see www.nice.org.uk/aboutguidance

This leaflet and other versions of the guidance aimed at healthcare professionals are available at www.nice.org.uk/TA158

You can order printed copies of this leaflet from NICE publications (phone 0845 003 7783 or email publications@nice.org.uk and quote reference N1691).

We encourage NHS and voluntary sector organisations to use text from this booklet in their own information about preventing flu.

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