FACT SHEET

Influenza Antiviral Treatment

Purpose
This document outlines the use of antiviral medications, oseltamivir and zanamivir, for influenza treatment.

Key Messages

- Treatment with antiviral medications decreases the duration of influenza symptoms and can help prevent the complications of influenza, such as hospital admissions and potentially deaths.¹
- When influenza is circulating in the community, antiviral medications are recommended to treat:
  - patients with influenza-like illness at high risk for complications, OR
  - patients with moderate or severe influenza-like illness (e.g., hospitalized patients).²
- Antiviral medications work best if administered within 48 hours of symptom onset, but should be used beyond that time period in severely ill individuals (such as hospitalized patients) and can be considered for use beyond that time period in those at high risk for influenza complications.²
- When influenza is circulating in your community, treatment should be started as soon as possible², therefore laboratory confirmation of influenza is not required to initiate antiviral treatment.
- See Table 1 for information on when to use antiviral medication and Table 2 for a quick reference on how to use antiviral medications for treatment.

Table 1. When to use antiviral medications for treatment

Antiviral medications are recommended if you answer “yes” to all three questions (1, 2 and 3a or 3b).

<table>
<thead>
<tr>
<th>Questions</th>
<th>Additional Information and/or Sources of Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Is influenza circulating in your community?</td>
<td>Consult Public Health Ontario’s Ontario Respiratory Pathogen Bulletin³ or your local public health unit⁴.</td>
</tr>
<tr>
<td>2) Does your patient have symptoms compatible with influenza?</td>
<td>Symptoms can include: fever, cough, headache, sore throat, muscle aches and fatigue. Note: Fever may be absent in the elderly.</td>
</tr>
<tr>
<td>3a) Is your patient at high risk for the complications of influenza? OR</td>
<td>Those at high risk for complications include adults 65 years of age and over, pregnant women and women up to four weeks post-partum, and those with underlying medical conditions. See Appendix A of Antiviral medication for influenza, Information for health care providers for additional details on high risk individuals.¹</td>
</tr>
<tr>
<td>3b) Does your patient have moderate, progressive, severe or complicated influenza, such as individuals who are hospitalized with influenza-like illness?</td>
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</tbody>
</table>

### Table 2. How to use antiviral medication

<table>
<thead>
<tr>
<th>Product specifics</th>
<th>Oseltamivir (oral)</th>
<th>Zanamivir (5 mg per inhalation)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Dosage for treatment</strong></td>
<td>75 mg twice daily for 5 days for adults (or longer if clinically indicated).</td>
<td>10 mg (or two inhalations) twice daily (approximately 12 hours apart) for 5 days (or longer if clinically indicated) for children 7 years of age and older and adults.</td>
</tr>
<tr>
<td><strong>Side effects</strong></td>
<td>Nausea, vomiting. Taking with food may increase tolerability.</td>
<td>Allergy-like reactions: oropharyngeal or facial edema, bronchospasm, especially in those with underlying airway disease; sinusitis; or dizziness.</td>
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<tr>
<td></td>
<td>Post-marketing reports of serious skin reactions and sporadic, transient neuropsychiatric events, including self-injury or delirium, particularly among children</td>
<td>Post-marketing reports of serious skin reactions, and sporadic, transient neuropsychiatric events, including self-injury and delirium, particularly in Japan.</td>
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<tr>
<td></td>
<td>See product monographs for additional details.</td>
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</tr>
<tr>
<td><strong>Contraindications</strong></td>
<td>None. Preferred for use in pregnancy.</td>
<td>Severe underlying airway conditions, e.g., chronic obstructive pulmonary disease or asthma.</td>
</tr>
<tr>
<td></td>
<td>See product monographs for additional details.</td>
<td>Allergy to milk protein.</td>
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<td>See product monograph for additional details.</td>
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<table>
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<tr>
<th><strong>Product monographs</strong></th>
<th>Oseltamivir product monographs</th>
<th>Relenza® product monograph</th>
</tr>
</thead>
</table>

**Notes:**

If patients without risk factors for complications and without serious illness present within 48 hours of symptom onset, antiviral treatment can be used: on a case-by-case basis for those less than 1 year of age; can be considered, but is not routinely recommended for those 1 to 5 years of age; and can be considered in those 18 to 64 years of age. See [Use of antiviral drugs for seasonal influenza: Foundation document for practitioners – Update 2019](#).  

a. Checking creatinine clearance and dose adjustments are not required for those not known to have renal impairment.  

b. For those with known renal impairment, alternative dosing based on creatinine clearance is provided in Table 3 of the [Use of antiviral drugs for seasonal influenza: Foundation document for practitioners – Update 2019](#).  

c. A second dose of zanamivir (10 mg, which is two inhalations) should be taken on the first day of treatment whenever possible, provided there is at least two hours between the initial dose and the second dose (based on the product monograph for Relenza®).  

For additional information, please see [Antiviral Medication for Seasonal Influenza, Information for Health Care Providers, 2019](#).
References


Citation


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