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To: Wisconsin Clinicians, Infection Preventionists, Local Health Departments, and Tribal Health

Agencies

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Updated Guidance on E-cigarette or Vaping Associated Lung Injury (EVALI) for Healthcare Providers as Influenza Activity Increases in Wisconsin

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The following updates are adapted from current Centers for Disease Control and Prevention guidance.

As of December 2019, the number of EVALI cases has declined in Wisconsin since peaking in September, but the Wisconsin Department of Health Services continues to receive reports of patients with suspected EVALI.

Influenza activity is increasing in Wisconsin. There are currently three strains of influenza identified in the state (A/H1, A/H3 and Flu B) affecting patients in all age groups.

Influenza cannot be distinguished from EVALI by signs, symptoms, or clinical features at presentation. Acute respiratory illness in a patient with a history of vaping could be caused by influenza viruses, other respiratory infections, EVALI, or all of the above. If EVALI is suspected, clinicians are encouraged to:

- Take a thorough vaping history, including the specific names, sources, and amounts of
 products used. Special attention should be given to a history of vaping THC
 products.
- Consider hospital admission if EVALI is suspected for persons:
 - In respiratory distress;
 - With SpO2<95% on Room Air;
 - With comorbidities (e.g., CVD, lung disease); or
 - Who are unable to follow up within 24-48 hours with a clinician.
- Test patients for influenza, particularly those in whom EVALI is suspected. RT-PCR is the preferred test method but rapid influenza diagnostic tests can also be used.

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Persons with suspected influenza who are at high risk for influenza complications, those with severe or progressive illness, and hospitalized patients are recommended for prompt administration of antiviral treatment.

Antiviral treatment also can be considered for any previously healthy, symptomatic outpatient not at high risk for influenza complications, who is diagnosed with confirmed or suspected influenza, on the basis of clinical judgment. Optimally, treatment will be initiated within 48 hours of illness onset.

Encourage patients to stop vaping. The use of e-cigarettes is unsafe for all ages, but particularly for <u>youth and young adults</u>. Patients who are using e-cigarettes in order to quit cigarette smoking should not return to smoking. <u>FDA-approved medications</u> for nicotine cessation should be considered. Youth addicted to marijuana should be referred to <u>substance abuse and mental health services</u>. Patients can also call 1-800-QUIT NOW (1-800-784-8669), a free service to help people quit smoking, vaping or other tobacco use. Additional information can be found on the Department of Health Services webpage, <u>Tobacco Prevention and Control</u>.

The Department of Health Services has clinical fact sheets and web pages for EVALI (Lung Disease and Vaping Investigation).

EVALI Fact Sheet EVALI Webpage Influenza Fact Sheet Influenza webpage