

CDC Reports on Shipments of H1N1 Vaccine

BY HEIDI SPLETE

Current information about the ordering and distribution of the pandemic influenza A(H1N1) vaccine is available on the Centers for Disease Control and Prevention's Web site, Dr. Anne Schuchat, director of the National Center for Immunization and Respiratory Diseases, said in a teleconference.

Every Friday, data on how many doses of vaccine were available for ordering and how many were shipped to states or large cities will be made available on the CDC Web site, she noted.

Although the CDC recommends against the overuse of antivirals, individuals who have severe illness or who are at high risk for complications, such as pregnant women, "can greatly benefit from antiviral medications," Dr. Schuchat

said. As of Oct. 1, the CDC had confirmed reports of 28 pregnant women in the United States who have died as a result of H1N1 influenza, Dr. Schuchat said. She also noted that Health and Human Services Secretary Kathleen Sebelius had authorized distribution to the states of several thousand courses of liquid Tamiflu for children.

Dr. Schuchat added that the CDC was in the process of updating its guidance on

the use of personal protective equipment for health care workers to protect against influenza.

Data from a study of 221 health care workers published recently online (JAMA 2009 Oct. 1; doi:10.1001/jama.2009.1466) showed that standard surgical masks appeared to be no worse than N95 respirators in preventing the spread of influenza in routine health care settings. ■

Humalog (insulin lispro injection [rDNA origin]) is for use in patients with diabetes mellitus for the control of hyperglycemia. Humalog should be used with longer-acting insulin, except when used in combination with sulfonylureas in patients with type 2 diabetes.

Humalog is contraindicated during episodes of hypoglycemia and in patients sensitive to Humalog or one of its excipients.

Important Safety Information

Humalog differs from regular human insulin by its rapid onset of action as well as a shorter duration of action. Therefore, when used as a mealtime insulin, Humalog should be given within 15 minutes before or immediately after a meal.

Due to the short duration of action of Humalog, patients with type 1 diabetes also require a longer-acting insulin to maintain glucose control (except when using an insulin pump). Glucose monitoring is recommended for all patients with diabetes.

The safety and effectiveness of Humalog in patients less than 3 years of age have not been established. There are no adequate and well-controlled clinical studies of the use of Humalog in pregnant or nursing women.

Starting or changing insulin therapy should be done cautiously and only under medical supervision.

Hypoglycemia

Hypoglycemia is the most common adverse effect associated with insulins, including Humalog. Hypoglycemia can happen suddenly, and symptoms may be different for each person and may change from time to time. Severe hypoglycemia can cause seizures and may be life-threatening.

Other Side Effects

Other potential side effects associated with the use of insulins include: hypokalemia, weight gain, lipodystrophy, and hypersensitivity. Systemic allergy is less common, but may be life-threatening. Because of the difference in action of Humalog, care should be taken in patients in whom hypoglycemia or hypokalemia may be clinically relevant (eg, those who are fasting, have autonomic neuropathy or renal impairment, are using potassium-lowering drugs, or taking drugs sensitive to serum potassium level).

Please see full user manual that accompanies the Pen.

Humalog® is a registered trademark of Eli Lilly and Company and is available by prescription only. Humalog® KwikPen™ is a trademark of Eli Lilly and Company and is available by prescription only.

Reference

1. Data on file, Lilly USA, LLC. KwikPen Design Validation User Study. HUM20071024A.

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