



## PEDIATRIC INFECTIOUS DISEASE SOCIETY OF THE PHILIPPINES (PIDSP)

### CLINICAL ADVISORY on the RISING INFLUENZA ACTIVITY in the PHILIPPINES

13 October 2025

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#### I. SITUATIONAL OVERVIEW

The Pediatric Infectious Disease Society of the Philippines (PIDSP) has received reports of increasing cases of influenza-like illness (ILI) and laboratory-confirmed influenza among children in various regions. This pattern aligns with the expected seasonal rise in influenza activity during the latter months of the year.

According to WHO FluNet surveillance (Weeks 1–38, 2025), 3,634 specimens were processed nationwide, with 498 confirmed influenza cases as of 8 October 2025. These figures should be interpreted with caution due to potential underreporting and reporting delays.

In light of these observations, this advisory provides **unified, evidence-based guidance** for clinicians to assist in patient counseling, case management, and reinforcing preventive measures.

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#### II. KEY RECOMMENDATIONS FOR CLINICIANS

##### A. Strengthen Communication on Influenza and Vaccination

###### 1. Reinforce the value of influenza vaccination

- Vaccination remains the most effective means of preventing severe disease, hospitalization, and complications.
- While infection may still occur, vaccination markedly reduces illness severity and duration.
- Breakthrough infections may result from strain mismatch, waning immunity, or high exposure levels.

###### 2. Explain annual vaccine formulation

- Influenza vaccines are updated each year to align with WHO-recommended strains.
- Even with partial mismatch, vaccines still offer cross-protection and mitigate severe outcomes.

###### 3. Continue annual vaccination for all eligible individuals (≥6 months old)

- Prioritize high-risk groups:
  - Children with chronic conditions (e.g., asthma, cardiac or neurologic disorders, immunocompromised states)

- Pregnant women
- Caregivers of infants under 6 months

**4. Maintain vaccine confidence**

- Emphasize benefits rather than focusing on breakthrough cases.
- Reassure parents that vaccination helps children recover faster and avoid complications.
- Use calm, factual, and consistent communication when addressing concerns.

**B. Enhance Case Detection and Clinical Management**

- Encourage early consultation for febrile respiratory illness.
- Test symptomatic patients as per local protocols (e.g., rapid antigen or PCR), particularly in severe or clustered cases.
- Consider antiviral therapy (e.g., oseltamivir) for high-risk patients presenting within 48 hours of onset, following national and institutional guidelines.
- Track and report ILI trends within your institution and coordinate with local health authorities for specimen submission and surveillance support.

**C. Reinforce Infection Prevention and Control (IPC) Measures**

- Advise masking for symptomatic patients, especially in clinics, schools, and crowded indoor spaces.
- Encourage staying home when ill to prevent spread.
- Promote frequent handwashing, respiratory etiquette (covering coughs/sneezes), and adequate ventilation.
- Regularly disinfect high-touch surfaces such as doorknobs, tables, and toys.

These IPC measures complement vaccination and remain essential in reducing community transmission.

**D. Counseling Families: Suggested Clinician Responses**

Common Question	Recommended Clinician Response
<i>“Why did my child get influenza after vaccination?”</i>	No vaccine offers 100% protection. The flu shot strengthens the immune system, leading to milder symptoms and faster recovery if infection occurs.
<i>“Does this mean the vaccine didn’t work?”</i>	The vaccine worked by priming the immune system. It may not prevent every infection but protects against serious complications such as pneumonia or hospitalization.
<i>“Should we still vaccinate next year?”</i>	Yes. Flu strains change annually, and yearly vaccination provides the best protection. It also strengthens community immunity.
<i>“What else can we do to avoid getting sick?”</i>	Wash hands frequently, cover coughs and sneezes, ensure proper ventilation, and keep sick children home from school.

Common Question	Recommended Clinician Response
“When should we seek medical care?”	Seek immediate medical attention for difficulty breathing, persistent high fever, poor feeding, or unusual lethargy—especially in young or high-risk children.

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### III. KEY TAKEAWAYS

- **Influenza activity is expected to rise seasonally.** Vaccination and preventive practices remain the most effective tools.
- **Breakthrough cases do not indicate vaccine failure.** Vaccinated children retain strong protection against severe illness and complications.
- **Consistent, calm, and evidence-based communication** from clinicians strengthens public trust and sustains vaccine confidence.

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### IV. REFERENCES

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