

## FLU FACTS

### *What is flu?*

Flu is a viral infection of the respiratory tract (nose, throat, lungs). Every year seasonal flu appears in our community. There are many strains of the flu virus.

### *What are the symptoms of flu?*

The main symptoms are fever (usually over 100.5°F) and cough, sore throat, runny nose. Other common symptoms are feeling tired, muscle aches and pains, headaches, drop in appetite and activity level, and some people have vomiting and diarrhea. The fever can last 3 to 5 days, the runny nose 1 to 2 weeks and cough 2 to 3 weeks.

### *What is the difference between the flu and a cold?*

Both flu and a cold can cause runny nose and cough; however, fever is always present with the flu, the onset of symptoms is more abrupt, and symptoms are more severe. The fever with the flu can last 3 to 5 days. Usually a fever with a cold (less than 100.5°F) will go away in a day or two.

### *What is H1N1 (Swine Flu)?*

H1N1 is a new strain of flu that presented in the spring of 2009. Currently, this strain causes the same symptoms as the regular “seasonal” flu strains.

### *How is flu spread and how can I protect myself?*

The flu virus (seasonal and H1N1) is spread mainly from person to person through coughing or sneezing. Sometimes people may become infected by touching something with flu viruses on it and then touching their mouth or nose.

Covering your cough and sneezes, frequently washing your hands with soap and water, keeping your hands away from your eyes, nose and mouth, and avoiding contact with sick people are the best ways to prevent the spread of the virus.

A person is contagious from 1 day prior to 7 days after the fever starts. After exposure, a person will likely come down with the seasonal flu in 1 to 3 days and the H1N1 flu in 4 to 6 days.

### *Who is “high risk”?*

In general, people are mildly ill with the flu for 5 to 7 days and get better on their own; however, for some people the flu virus can cause more severe illness. Complications can include pneumonia, respiratory distress, dehydration, Reye’s syndrome, myositis (muscle pain), encephalitis (brain infection), myocarditis (heart infection), and in rare cases death.

**Seasonal flu** – infants and children under 5 years of age and elderly over 65, and pregnant women are at higher risk for complications from the flu. Other high risk patients include those with heart problems, asthma, diabetes, chronic lung disease, neurologic diseases, muscle diseases, sickle cell disease, kidney disease, cancer, immunosuppression, HIV and diseases requiring long term aspirin therapy such as Rheumatoid arthritis or Kawasaki disease.

**H1N1** – This strain appears to be affecting younger patients (under 24 years old). In addition, pregnant women, infants and children under age 2 are more susceptible to it. Other high risk patients are the same as for seasonal flu.

*Which children should get the flu vaccine? What about the H1N1 vaccine?*

Seasonal Flu Vaccine – all children aged 6 months to 18 years  
(Exceptions: egg allergic or have had a prior reaction to the vaccine.)

H1N1 Vaccine – When available children and young adults 6 months to 24 years of age. Household contacts and out-of-home caregivers of children less than 6 months of age should be vaccinated as well. Pregnant women, and children and adults who are considered high risk should receive the vaccine also. (Exceptions: egg allergic or have had a prior reaction to the vaccine.)

*How is flu treated? Do antibiotics work?*

Since the flu is a virus, antibiotics will **not** cure the flu or shorten the course of the illness, nor will they prevent the complications of the flu. Antibiotics are only used for patients who have secondary bacterial infections. Antiviral medications (i.e. Tamiflu, Relenza, Amantadine, Rimantadine) are indicated for treatment and prevention of flu in **HIGH-RISK patients** only (see above). For best results, it needs to be started within 48 hours of the onset of fever. These medicines are not used for everyone because they can have side effects, and overuse of them will cause resistance. Some resistance to H1N1 has already been reported.

Symptomatic treatment – push fluids, acetaminophen (Tylenol) or ibuprofen (Motrin, Advil) for fever and aches/pains. Cold medications are not recommended. Use of saline (salt water – ½ tsp. salt in 8 oz. water) nasal wash and suction may help. For children over age 5, throat lozenges may be used.

*When should my child be seen?*

Most children will tolerate the flu very well. However, your child should be seen if your child has the following symptoms:

**All HIGH-RISK patients** who have symptoms of flu should be seen

Fever of 100.5°F or greater if under 4 months of age

Fever of 101.0°F or greater if 4 to 12 months of age

Fever of 104.0°F or greater if 1 year of age or older

Fever that goes away over 24 hours and then returns

Fever that lasts more than 3 days

Ear pain or ear discharge

Fast or difficult breathing

Severe cough or wheezing

Nasal discharge lasting more than 2 weeks

Cough lasting more than 3 weeks

If you are worried by how the child looks or acts

*When can my child return to day care or school?*

Stay home from day care, school, or work for at least 24 hours after the fever is gone.

FOR MORE INFORMATION ABOUT THE FLU

[www.CDC.gov](http://www.CDC.gov)