



# Protecting Your Family Against the Flu

## Information About the H1N1 and Seasonal Flu

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At Esse Health, we have talked with many concerned parents about both types of influenza this year and we have already seen many patients in the office with the H1N1 influenza illness. It will not be long before seasonal influenza will hit our community as well. We have been working with county health officials, on a voluntary basis, to help vaccinate non-school age children who are at high risk for becoming ill with the H1N1 virus. This effort is going on while we continue to immunize against seasonal influenza. However, despite best efforts, there will still be large numbers of susceptible children and adults and this will result in a particularly difficult influenza season. Accordingly, we feel it is important to educate our patients about influenza and what they can do to help prevent the spread.

### What are the symptoms of influenza?

- A sudden fever, possibly with chills and sweats
- Congestion and cough

### Older children may additionally complain of:

- Sore throats
- Muscle aches and discomfort
- Headaches

Although influenza is primarily a respiratory illness, some patients might also experience diarrhea and vomiting.

### What is 2009 H1N1 and why are we so worried about it?

The 2009 H1N1 flu is a new influenza A virus first discovered in April 2009. Usually the circulating influenza viruses change each year, but they are often fairly similar to strains of the recent past or to those in recent years' vaccines. This is not the case with the H1N1 strain. It is quite different from influenza that has circulated in the United States for some time. Therefore, we are already seeing many more cases of influenza this year. To date, most of the cases we have seen in our office have been quite mild; however, it

is inevitable that there will be severe cases nationally resulting in hospitalization and even death. The virus seems to be especially hard on pregnant women, and occasionally, on children and young adults.

### How is the influenza spread?

- Through the air when an infected person coughs or sneezes
- By touching contaminated surfaces or objects like furniture and toys and then touching one's nose or mouth
- By young children touching each other with hands that are contaminated with their own respiratory secretions

### What can we all do to reduce the spread of influenza?

- Make sure everyone washes their hands often
- Keep sick children at home and limit contact with others
- Keep your child home from school or child care until their fever is gone for at least 24 hours without taking fever-reducing medicine (Note - Normal body temperature is different for each child and may range from 97°F to 100.3°F. Consider a temperature of 100.4° or higher a fever.)
- Get yourself and your children immunized to protect against seasonal influenza and H1N1

### Please call us if your child...

- Is younger than three months and has a fever (Rectal temperature greater than 100.4)
- Is sick with flu-like symptoms and has a serious chronic health condition, including lung or heart problems, asthma, diabetes, kidney problems, a weakened immune system, or a serious neurologic or neuromuscular condition
- Is more sleepy than usual or not acting normally
- Has little or no energy to play or keep up with daily activities

- Is not drinking enough fluids to make urine
- Has trouble breathing, is breathing fast, or has poor color (blue or gray)
- Is very irritable and cannot be comforted

### **How should you treat a child with suspected or confirmed influenza?**

- For fever or body aches, we suggest acetaminophen or ibuprofen  
(Note - NEVER give your child aspirin because of the association between influenza, aspirin use and Reye’s syndrome, a potentially fatal disease of the liver.)
- Encourage fluids
- For patients who are at high risk of complications, antiviral medicines like Tamiflu may be necessary  
(Note - Patients who are at high risk of complications include children younger than two years of age, pregnant adolescents and young women, children and adolescents with chronic medical or immunosuppressive conditions, and children who are receiving long-term aspirin therapy. Children two through four years of age without high risk conditions and with mild illness do not necessarily need antiviral medications.)

of medications like Tamiflu will ensure that supplies of antiviral medications remain adequate for those who do need such medicine. There are also concerns that overuse of antiviral medications might contribute to resistant strains of influenza. Lastly, there are reports of neuropsychiatric side effects with antiviral medications, though these are rare.

For more information or questions about influenza, please contact your health care provider.

[www.essehealth.com](http://www.essehealth.com)

### **How can you help us at Esse Health meet your needs during this challenging influenza season?**

Visit our website at [www.essehealth.com](http://www.essehealth.com) for the latest information from the Center for Disease Control and for updates about seasonal and H1N1 vaccine availability.

We try to see only those patients with influenza who are more ill and may be suffering from complications of influenza. We may also need to see those with chronic diseases who have contracted influenza. Most of our Pediatricians’ offices have a “sick room” or a back door to separate sick children from those who are coming in for regular visits or non influenza-related issues.

Tamiflu is not indicated for most patients with influenza. Please understand that the judicious use