

## What YOU Need to KNOW about the H1N1 (SWINE FLU) and Seasonal FLU\*

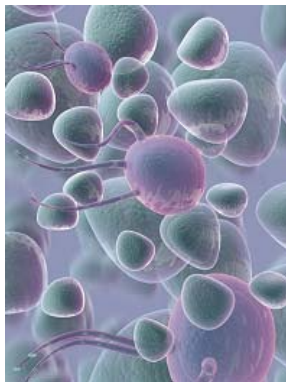
Novel influenza A (H1N1) is a new virus of swine origin that first caused illness in Mexico and the United States in March and April, 2009. The virus is believed to spread in the same way as the seasonal influenza viruses spread, mainly through the coughs and sneezes of people who are sick with the virus, and by touching infected objects and then touching your nose or mouth.

On June 11, 2009, the World Health Organization (WHO) signaled that a global pandemic of novel influenza A (H1N1) was underway by raising the worldwide pandemic alert level to Phase 6. This action was a reflection of the *spread of the new H1N1 virus, not the severity of illness* caused by the virus. At the time, more than 70 countries had reported cases of novel influenza A (H1N1) infection and there were ongoing community level outbreaks of novel H1N1 in multiple parts of the world.

Since the WHO declaration of a pandemic, the new H1N1 virus has continued to spread, with the number of countries reporting cases of novel H1N1 nearly doubling. The United States continues to report the largest number of novel H1N1 cases of any country worldwide, however, most people who have become ill have recovered without requiring medical treatment.

### FAQs

#### How long can a virus like novel H1N1 live on a surface outside its host?



The H1N1 virus is new. Research is being conducted to better understand its characteristics. Studies have shown that flu viruses can survive on hard surfaces and can infect a person for up to 2 to 8 hours after being left on items like cafeteria tables, doorknobs, and desks. **Frequent hand washing** will help you reduce the chance of getting contamination from these common surfaces. Flu viruses may be spread when a person touches droplets left by coughs and sneezes on hard surfaces (such as desks or door knobs) or objects (such as keyboards or pens) and then touches his or her mouth or nose. But, routine cleaning will kill these germs.

#### What is the incubation period of the H1N1 (swine) flu?

The estimated incubation period is unknown and could range from 1 to 7 days, and more likely 1 to 4 days. Persons with novel H1N1 flu virus infection should be considered potentially contagious for up to 7 days after onset. Persons who continue to be ill longer than 7 days should be considered potentially contagious until symptoms have resolved. **Children, especially younger children, might be contagious for longer periods. People with influenza-like illness should stay home for at least 24 hours after their fever is gone (without the use of fever-reducing medicine).** A fever is defined as having a temperature of 100 degrees Fahrenheit or 37.8 degrees Celsius or greater.

**If you are sick, stay home from work or school to monitor your health. If you do have symptoms where you think you need urgent care, contact your doctor right away.**

#### Here are the statistics on who is most vulnerable to the novel H1N1 flu:

The infection rate was progressively lower in adults as their age increased.

For people 5-24 years of age = 26.7 per 100,000.

For people 25-49 years of age = 6.9/100,000.

For people 50-64 years of age = 3.9/100,000.

For people 65 years and older = 1.3/100,000 (or twenty times lower than in those 5-24 years age group).

#### What are the implications of H1N1 for the elderly?

Current studies show that the risk for novel H1N1 infection among people age 65 or older is less than the risk for younger age groups. However, even though people age 65 and older are not at high risk of infection with H1N1, they are at *high risk for seasonal influenza (flu)*. So, they should get the seasonal flu vaccine as soon as it becomes available in their area.

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

The symptoms of novel H1N1 flu in people are expected to be similar to the symptoms of regular human seasonal flu infection. They include: **fever, lethargy (lack of energy) , lack of appetite, and coughing.** Some people with novel H1N1 flu have also reported: **runny nose, sore throat, nausea, vomiting, and diarrhea.**

Like seasonal flu, novel H1N1 flu in people can vary in severity from mild to severe. Severe disease with pneumonia (a lung infection), respiratory failure, and even death is possible with novel H1N1 flu infection. Certain groups might be more likely to develop a severe illness from novel H1N1 flu infection, such as persons with chronic medical conditions. Sometimes bacterial infections may occur at the same time as or after infection with flu viruses and lead to pneumonia, ear infections, or sinus infections.

Ill people should also check with their healthcare provider about whether they should take antiviral medications (drugs that fight viruses). Flu can lead to, or occur with, bacterial infections. Therefore, some people will also need to take antibiotics (drugs that kill bacteria) if they have:

More severe or prolonged illness; or  
An illness that seems to get better but then gets worse again.

People with novel H1N1 flu who are cared for at home should check with their healthcare provider about any special care they might need, especially if they are pregnant or have a health condition such as diabetes, heart disease, asthma, or emphysema.

### **Could you tell me the symptoms of swine flu in babies?**

If you or someone you know has a baby that may be sick, it is very important to take the baby for medical assessment. The symptoms of novel H1N1 flu in babies are the same as in adults. In children, emergency warning signs that need urgent medical attention include : *Fast breathing or trouble breathing, Bluish or gray skin color, Not drinking enough fluids, Severe or persistent vomiting, Not waking up or not interacting, being so irritable that the child does not want to be held. Flu-like symptoms improve, but then return with fever and worse cough*

### **How do we get it cured ?**

If you are sick with H1N1 flu,



**Stay home for at least 24 hours after the fever is gone (without the use of fever-reducing medicine).**

**Get plenty of rest;**

**Drink clear fluids (such as water, broth, sports drinks, electrolyte beverages for infants) to keep from getting dehydrated (loosing too much fluid);**

**Cover when coughing and/or sneezing;**

**Clean hands with soap and water or an alcohol-based hand rub often, especially after using tissues and after coughing or sneezing into hands;**

**Avoid close contact with others, including staying home from work or school; and**

**Be watchful for emergency warning signs that might indicate you need to seek medical attention**

### **What can I take if I have a fever with the flu or flu like symptoms?**

If you have flu-like symptoms, you can purchase the following medications, which are available at your local drug store or pharmacy. These generic drugs are commonly identified by their brand or over-the-counter name:

Acetaminophen, a brand name is Tylenol;

Ibuprofen, brand names include Advil, Motrin or Nuprin; and

Naproxen, a brand name is Aleve.

Ill people should also check with their health care provider about whether they should take antiviral medications (drugs that fight viruses).

People with novel H1N1 flu who are cared for at home should check with their health care provider about any special care they might need, especially if they are pregnant or have a health condition such as diabetes, heart disease, asthma, or emphysema.

**What are Antivirals?**

Antiviral drugs are prescription medicines (pills, liquid or an inhaler) that can be used to treat H1N1 (Swine) flu, or to prevent infection with H1N1 (Swine) flu viruses. These medications must be prescribed by a health care professional. If you get sick, antiviral drugs can make your illness milder and make you feel better faster. They may also prevent serious influenza complications. The sooner a sick person is treated with an antiviral, the greater effect it will have on the patient’s recovery.

Influenza antiviral drugs also can be used to prevent influenza when they are given to a person who is not ill, but who has been or may be near a person with swine influenza. When used to prevent the flu, antiviral drugs are about 70% to 90% effective. The CDC recommends that only people in high risk groups get antiviral medicine. **Please check with your physician.**

There are four influenza antiviral drugs approved for use in the United States (oseltamivir, zanamivir, amantadine and rimantadine). Only two, oseltamivir (**TAMIFLU®**) and zanamivir (**RELENZA®**) are effective in treating H1N1 (Swine) flu.

**Oseltamivir (TAMIFLU®)**

**Zanamivir (RELENZA®).**

Approved to both treat and prevent influenza A and B virus infection.	Approved to treat and, in some cases, prevent influenza A and B virus infection
Effective in people 1 year of age and older.	Effective in people 7 years and older and can prevent influenza A and B virus infection in people 5 years and older
Comes in capsule form and in liquid form that can be measured for proper dosage.	Packaged in a medicine disk called a Rotadisk® and is inhaled by mouth using a delivery device called a Diskhaler®.
Most common side effects are nausea and vomiting. These are not usually severe and usually happen in the first 2 days of treatment.	Risk of increased difficulty breathing, especially among people with a history of underlying breathing problems. If patients have increased difficulty breathing, they should stop Relenza and get medical attention right away.
 <p><b>Tamiflu®</b> Oseltamivir 75 mg</p>	

**Will the new H1N1 vaccine be safe, even for children? Is it being tested?**

CDC's Advisory Committee on Immunization Practices (ACIP) recommends that all children between 6 months and 18 years of age get the novel H1N1 vaccine. This is because there have been many cases of novel H1N1 influenza (flu) in children. They are also in close contact with each other in school and day care settings, which increases the likelihood of spreading the disease.

Please note: ***The H1N1 vaccine is not a replacement for the seasonal flu vaccine.*** It's important that your child also gets the seasonal flu vaccine. The H1N1 vaccine is to be used with the seasonal flu vaccine.

Vaccines, like any medication, can have side effects. But, in general, it's more dangerous to get sick with the virus than it is to get the vaccine. If you have any questions or concerns about whether you, or someone you know, should get the novel H1N1 vaccine, you should talk to a doctor.

***My daughter will be breast feeding this fall. Should she take the H1N1 flu vaccine?***

When vaccine is first available, the Advisory Committee on Immunization Practices (ACIP) recommends that providers try to vaccinate pregnant women, and people who live with or care for children younger than 6 months of age (e.g. new mothers). It is also recommended for persons between the ages of 6 months through 24 years of age.

***What are the after effects of the swine flu? How long will they last?***

It is expected that most people will recover without needing medical care. If you have severe illness or you are at high risk for flu complications, contact your health care provider or seek medical care. Your health care provider will determine whether flu testing or treatment is needed.

***If I've already had the H1N1 flu this year, can I get it again?***

Remember that the H1N1 virus is new and research is being conducted to better understand its characteristics. In addition, although data on H1N1 are scarce and this illness is still being studied, it is also important to know that flu viruses undergo frequent changes during an outbreak.

In general, exposure to a particular strain of flu virus will protect you against that strain in the future. However, **it will not protect you from infection by other flu virus strains.**

Please also note that it is possible for a person to be infected with the seasonal influenza (flu) virus more than one time in a season, because several strains of flu virus circulate each year.

***Can I use an N95 mask for more than one day?***

N95 respirators should be worn only once and then thrown away in the trash.

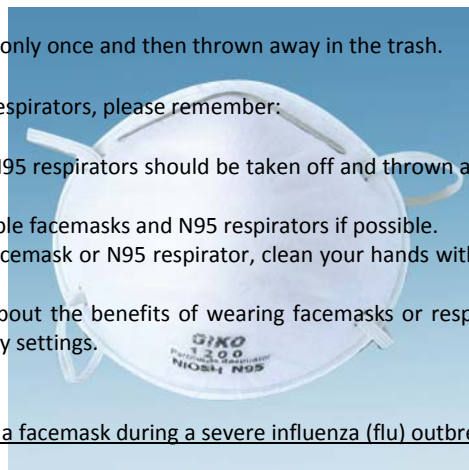
When using facemasks or N95 respirators, please remember:

Used facemasks and N95 respirators should be taken off and thrown away in the regular trash so they don't touch anything else.

Avoid reusing disposable facemasks and N95 respirators if possible.

After you take off a facemask or N95 respirator, clean your hands with soap and water or an alcohol-based hand rub.

Very little is known about the benefits of wearing facemasks or respirators to help control the spread of influenza in community settings.



People should consider wearing a facemask during a severe influenza (flu) outbreak if:

They are sick with the flu and think they might have close contact with other people (within about 3 feet);  
They live with someone who has flu symptoms (and therefore might be in the early stages of infection);  
They will be spending time in a crowded public place and thus may be in close contact with infected people;  
or

They are well and do not expect to be in close contact with a sick person but need to be in a crowded place.

During a severe flu outbreak, people should limit the amount of time they spend in crowded places. They should also consider wearing a facemask while in crowded areas.

People should consider wearing a respirator during a flu pandemic if:

They are well, but expect to be in close contact with people who are known (or believed) to be sick with flu;  
or

They are taking care of a sick person at home.

In these situations, people should limit the amount of time they are in close contact with those who are ill, and should consider wearing a respirator. If a respirator is unavailable, the use of a mask should be considered.

You should be medically cleared, fit-tested, and trained for respirator use, including: proper fit-testing and use of respirators, safe removal and disposal, and medical contraindications to respirator use.

**Can LYSOL brand disinfectant protect against the flu virus?**

Influenza virus, or the flu virus, is destroyed by exposure to heat of 167 to 212 degrees

Fahrenheit (75 to 100 degrees Centigrade). There are also several chemical germicides (substances that kill disease-causing germs) that are effective against flu viruses, such as: chlorine, hydrogen peroxide, detergents or soaps, iodine-based antiseptics (substances that stop the growth of germs), and alcohol.

These products are effective if the right amount is used, for the right period of time. For example, wipes or gels with alcohol in them can be used to clean hands. The gels should be rubbed in until they are dry.

**Does hand washing work if there is no hot running water in any of the bathrooms?**

The CDC recommends that you wash your hands thoroughly with clean, running water and soap. Use warm water if it's available. If clean, running water is not available use an alcohol-based hand sanitizer.



**When should I get my seasonal flu shot?**

Yearly flu vaccination should begin in September or as soon as the flu vaccine is available. Vaccination should continue throughout the flu season, into December, January, and beyond. This is because the timing and duration (length) of the flu season varies. While flu outbreaks can happen as early as October, most of the time, influenza activity peaks in January or later.

Children under 9 years of age will need 2 doses of the vaccine the first year they are vaccinated. The first dose would ideally be given in September or as soon as the vaccine is available. The second dose should be given at least 28 days (4 weeks) after the first dose. If a child needs 2 doses, it is best to begin the process early so that the child is protected before flu season starts circulating in his or her community.

Certain groups of people may benefit from vaccination as late as April or May. This is true even if flu viruses are no longer circulating in the U.S. These groups include:

People who will travel to the Southern Hemisphere where flu viruses may be circulating before the following year's vaccine is available; and

Children younger than 9 who were vaccinated for the first time and still have not received their second dose.

The vaccine should continue to be offered to unvaccinated people throughout the flu season, as long as it is available.

### **What is the difference between the Seasonal Flu Vaccine and the H1N1 (Swine) Flu Vaccine?**

The seasonal flu vaccine and the H1N1 (Swine) flu vaccine are separate vaccinations. A seasonal vaccine is distributed routinely every year, the H1N1 (Swine) flu vaccine was recently developed and is being distributed by the federal government to provider locations. ***The seasonal vaccine is not expected to protect against the H1N1 (Swine) flu and the H1N1 (Swine) flu vaccine is not intended to replace the seasonal flu vaccine. Each protects against a different virus and is intended to be used along-side the other.***

It is anticipated that seasonal flu and H1N1 (Swine) flu vaccines may be administered on the same day. Early clinical studies have shown that the H1N1 (Swine) flu vaccine will require one injection per individual to ensure the appropriate immune response. The usual seasonal flu is still expected to cause illness this fall and winter. Individuals are encouraged to get their seasonal flu vaccine as soon as it is available in early fall.

### **Who should receive the H1N1 (Swine) Flu Vaccine?**

The CDC's Advisory Committee on Immunization Practices (ACIP), a panel made up of medical and public health experts, recommends the following groups :

Pregnant women because they are at higher risk of complications and can potentially provide protection to infants who cannot be vaccinated.

Household contacts and caregivers for children younger than 6 months of age because younger infants are at higher risk of influenza-related complications and cannot be vaccinated.

Healthcare and emergency medical services personnel because infections among healthcare workers have been reported and this can be a potential source of infection for vulnerable patients. Also, increased absenteeism among healthcare professionals could reduce healthcare system capacity.

Children from 6 months through 18 years of age because there have been many cases of H1N1 (Swine) flu in children and they are in close contact with each other in school and day care settings, which increases the likelihood of disease spread.

Young adults 19 through 24 years of age because there have been many cases of H1N1 (Swine) flu in these healthy young adults and they often live, work, and study in close proximity, and they are a frequently mobile population.

Persons aged 25 through 64 years who have health conditions associated with higher risk of medical complications from influenza.

In addition to the priority groups outlined above, the CDC has the following recommendations for adults certain medical conditions such as cancer, blood disorders, chronic lung disease, diabetes and several others.

The CDC does not expect that there will be a shortage of H1N1 (Swine) flu vaccine, but vaccine availability and demand can be unpredictable. It is likely that initially, the vaccine will be available in limited quantities.

### **What are the rules for health care workers who have family members diagnosed with H1N1 or whose family members have tested positive by nasal swab?**

Hospitals and clinics should ask sick staff to stay home. All personnel should self monitor daily for signs and symptoms of febrile respiratory illness. Staff who develop these symptoms should be instructed not to report to work, or if at work, should cease patient care activities and notify their supervisor.

### **Do you have special recommendations for air conditioned buildings?**



The CDC indicates that the odds of transmission of the 2009-H1N1 influenza over significant distances through heating, ventilation, and air conditioning (HVAC) systems is extremely remote and special cleaning of air ducts is not required.

**Are there any precautions to take at church? For example surfaces of contact, Pews, hymnals, etc.**

You should clean surfaces and items that are more likely to have frequent hand contact with cleaning agents that are usually used in these areas. Influenza (flu) viruses may be spread when a person touches droplets left by coughs and sneezes on hard surfaces or objects and then touches his or her mouth or nose. But, it's not necessary to disinfect these surfaces beyond routine cleaning

The CDC recommends that faith-based and community organizations contact your state department of health and your organization's leadership for guidance on developing policies to prevent the spread of novel H1N1 in your area.

**Will Atlantis cover my flu shots?**

***Atlantis Health Plan covers flu shots for seasonal influenza. Make an appointment with your PCP right away. You may also check your local Walgreen's and CVS ; some of these pharmacies are administering flu shots in their sites. In order to be reimbursed for pharmacy provided flu shots , please send proof of payment and immunization record and send these documentation to Atlantis Health Plan, Suite 300 , 45 Broadway New York, NY 10006; Attention : Claims-Flu campaign. You will be fully reimbursed for this pharmacy claim.***

***Additionally, the federal government has started distributing H1N1 vaccines to physician offices and health care facilities. Please contact your provider's office to schedule your vaccination if you fall under the high risk groups.***

**For real time answers to other flu questions, please dial our 24 -7 MD hotline 347.537.8789.**



\*Excerpted from [cdc.gov/h1n1flu/](http://cdc.gov/h1n1flu/); [www.flu.gov/](http://www.flu.gov/)