

Frequently Asked Questions A(H1N1) Influenza (Swine Flu)

What is Swine Flu [A(H1N1) Influenza]?

Swine flu is a respiratory illness caused by the type A flu (H1N1) virus. The current influenza pandemic (commonly known as swine flu) in countries around the world has been caused by a new version (strain) of the virus named as Pandemic (H1N1) 2009 by the World Health Organization (WHO).

How do people become infected with the A(H1N1) virus?

The virus is spread from person-to-person. It is transmitted as easily as the normal seasonal flu and can be passed to other people by exposure to infected droplets expelled by coughing or sneezing that can be inhaled, or that can contaminate hands or surfaces.

These droplets typically spread about one metre. They hang suspended in the air for a while, but then land on surfaces, where the virus can survive for up to two to eight hours.

Anyone who touches these surfaces can spread the virus on further by touching anything else.

Is it possible to catch A(H1N1) twice?

Yes, because the virus can mutate (change). If you become infected with the swine flu virus, your body produces antibodies against it, which will recognize and fight off the virus if the body ever meets it again. However, if the virus mutates, your immune system may not recognize this different strain and you may become ill again, although you may have some protection from having had a similar virus previously.

Should one try and catch A(H1N1) now to build up immunity to more serious strains that may emerge later?

No. Do not try to catch the virus as this may help it spread. Not everything is known yet about the virus, and it is too soon to assume it is only a mild disease. Catching this new strain of flu will not necessarily protect one from strains that may emerge later.

What are the signs and symptoms of the new influenza A(H1N1)?

Signs of A(H1N1) influenza are flu-like, and include a fever, cough, headache, muscle and joint pain, sore throat and runny nose, and sometimes vomiting and diarrhoea. Typical symptoms could manifest in a sudden high fever (38°C/100.4°F or above) and a sudden cough. Other symptoms may include tiredness, chills, aching muscles, or loss of appetite.

How do I protect myself from catching A(H1N1) and reducing the spread of the virus?

You can reduce, but not get rid of, the risk of catching or spreading swine flu by:

- Always covering your nose and mouth with a tissue when coughing or sneezing.
- Disposing of dirty tissues promptly and carefully
- Maintaining good basic hygiene, for example washing hands often with soap and warm water – this helps to reduce the spread of the virus from your hands to face, or to other people
- Cleaning surfaces such as door handles, telephones, workspaces often and thoroughly
- Avoiding close contact with people who might have flu
- Reducing the time spent in crowded settings
- Improving airflow in your home and office by opening windows
- Practising good health habits - get adequate sleep, eat nutritious food, and exercise regularly

How long can influenza virus remain viable on objects (such as books and doorknobs)?

Studies have shown that influenza virus can survive on environmental surfaces and can infect a person for up to 2-8 hours after being deposited on the surface.

Should I wear a facemask?

No. Healthcare workers should wear a facemask if they come into close contact with a person with symptoms (within one metre), to reduce their risk of catching the virus from patients. However, it is not recommended that healthy people wear facemasks to go about their everyday life.

Why are facemasks not recommended?

There is no evidence to suggest that this is a useful preventative measure. The virus is spread by people touching infected surfaces, or by someone coughing or sneezing at very close range. Unless you are standing close to someone with the virus, wearing a facemask will not make a difference.

There are concerns about the risks of not using facemasks correctly. They must be changed regularly as they don't work as well when dampened by a person's breath. People may infect themselves if they touch the outside of their mask, or may infect others by not throwing away old masks safely. Finally, wearing a facemask may encourage complacency. People need to focus on good hand hygiene, staying at home if they are feeling unwell and covering their mouth when they cough or sneeze.

What is seasonal influenza?

Seasonal influenza is an acute viral infection caused by an influenza virus. It occurs every year and, although the viruses change each year, many people have some immunity to the circulating virus which helps limit infections. There are seasonal influenza vaccines to reduce illness and deaths.

What is the difference between seasonal influenza and the new influenza A(H1N1)?

You will **not be able** to tell the difference between seasonal flu and influenza A(H1N1) without medical help. The symptoms of seasonal influenza and the new influenza A(H1N1) are similar.

Does the current seasonal influenza vaccine protect against this new virus?

Available data suggest there will be little or no protection offered by the seasonal vaccine against this new virus.

Why are people so worried about the new influenza A(H1N1)?

The new influenza (A(H1N1)) virus has never before circulated among humans and is not related to previous or current human seasonal influenza viruses. As it is a new virus, most people have no or little immunity and, therefore, this virus could cause more infections than are seen with seasonal flu. According to the WHO, It is as contagious as seasonal influenza and is spreading rapidly, particularly among young people (aged 10 to 45).

How serious is the new influenza A(H1N1)?

The severity of the disease ranges from very mild symptoms to severe illnesses that can result in death. The majority of people who contract the virus experience the milder disease and recover fully within a week without antiviral treatment or medical care. Most people recover from infection without the need for hospitalization or medical care.

Why are people dying from the new influenza A(H1N1) virus?

Hundreds of thousands of people die every year from seasonal flu epidemics, and the new influenza A(H1N1) virus will be no different. Most cases of death generally occur as a result of complications or an opportunistic (secondary) infection, like pneumonia. There are certain factors that put some groups at increased risk of severe or fatal illness.

Who are the high risk groups?

The high risk groups include: pregnant women, people with underlying medical conditions (most notably chronic lung disease - including asthma), cardiovascular disease, cancer, diabetes, and those with weak immune systems. The WHO reports that some preliminary studies suggest that obesity, and especially extreme obesity, may also be a risk factor for more severe disease.

The WHO reports: Within this largely reassuring picture, a small number of otherwise healthy people, usually under the age of 50 years, experience very rapid progression to severe and often fatal illness, characterized by severe pneumonia that destroys the lung tissue, and the failure of multiple organs. No factors that can predict this pattern of severe disease have yet been identified, though studies are under way.

When should someone seek medical care?

A person should seek medical care if they experience shortness of breath or difficulty breathing, their lips turn blue, have bloody or coloured sputum, experience chest pains, experience an altered mental status, low blood pressure, or if a high fever persists beyond three days. In children, danger signs include fast or difficult breathing, lack of alertness, difficulty in waking up, and little or no desire to play, continuing fever or convulsions (seizures).

What medication is used to treat the A(H1N1) Influenza?

The antiviral agents Oseltamivir (Tamiflu®) are drugs currently recommended for treatment in South Africa. As the majority of patients experience mild symptoms and make a rapid and full recovery, often in the absence of any form of medical treatment, antiviral treatment is only needed if you have been diagnosed with A(H1N1) Influenza or if a doctor or healthcare provider decides that you are at serious risk of developing severe illness. Clinical benefits associated with antiviral treatment include a reduced risk of pneumonia (one of the most frequently reported causes of death in infected people) and a reduced need for hospitalization.

What do antivirals do?

Antivirals are not a cure, but they help you to recover by relieving some of the symptoms, reducing the length of time you are ill by around one day, and reducing the potential for serious complications, such as pneumonia.

Should I take an antiviral now just in case I catch the new virus?

No. You should only take an antiviral if your healthcare provider advises you to do so. Individuals should not buy medicines to prevent or fight this new influenza without a prescription, and they should exercise caution in buying antivirals over the internet.

Should I go to work or school if I have the flu but am feeling OK?

No. Whether you have influenza A(H1N1) or a seasonal influenza, you should stay home and away from work through the duration of your symptoms. This is a precaution that can protect your work colleagues and others.

Should I go to work or school if I have been in contact with someone who I know has swine flu?

Yes, as long as you do not have flu-like symptoms. If you are feeling well, you should go about your normal activities, including going to school or work. It can take up to seven days (normally two to five days) after infection for swine flu symptoms to develop. If you develop symptoms, stay at home and follow the general advice.

What is the incubation period for A(H1N1)?

The incubation period between infection and appearance of symptoms is not known with total certainty at this stage, but it is assumed to be between two and five days.

When are people most infectious?

People are most infectious from one day before they develop symptoms to up to seven days after they get sick, although they continue to shed the virus (for example, in coughs and sneezes) for up to five days (seven days in children). People become less infectious as their symptoms subside, and once their symptoms are gone they are no longer considered infectious to others. Children, especially younger children, might potentially be contagious for longer periods. It is therefore important for people to stay at home for at least seven days when they have symptoms to reduce spread to other people.

How long can an infected person spread this virus to others?

At the current time it is believed that this virus has the same properties in terms of spread as seasonal flu viruses. With seasonal flu, studies have shown that children, especially younger children, might potentially be contagious for longer periods. It is therefore important for people to stay at home for at least 7 days when they have symptoms to reduce spread to other people.

Do we have tests available in SA for influenza A(H1N1)?

Yes. The National Influenza Centre at the National Health Laboratory service at the National Institute for Communicable Diseases and Virology Laboratory at University of Stellenbosch are currently providing the testing for the virus where indicated. It is likely that additional laboratories will be providing testing in the coming weeks.

Is there a vaccine available for A(H1N1)?

No vaccine is currently available. Manufacturers are in the process of developing a vaccine.

PREGNANT WOMEN**Why are pregnant women at heightened risk?**

Pregnant women are more susceptible to all infections because their immune system is naturally suppressed in pregnancy. They are especially vulnerable to swine flu, as this virus is affecting younger age groups than that seen during seasonal epidemics. Reduce your risk of infection by avoiding unnecessary travel and avoiding crowds where possible. Pregnant women should also follow the general hygiene advice.

WHO strongly recommends that, in areas where infection with the H1N1 virus is widespread, pregnant women, and the clinicians treating them, be alert to symptoms of influenza-like illness.

What complications might occur during a pregnancy?

Possible complications are pneumonia (an infection of the lungs), difficulty breathing and dehydration, which are more likely to happen in the second and third trimester.

There is a small chance that these complications could lead to premature labour or miscarriage. There is not yet enough information to know precisely how likely these birth risks are.

Should I stop breastfeeding if I am ill?

No, not unless your healthcare provider advises it. Studies on other influenza infections show that breastfeeding is most likely protective for babies - it passes on helpful maternal immunities and lowers the risk of respiratory disease. Breastfeeding provides the best overall nutrition for babies and increases their defence factors to fight illness.

Can I take antiviral drugs if I am pregnant?

Yes, on the advice of your doctor or healthcare provider.

CHILDREN UNDER THE AGE OF FIVE

Incidences of seasonal influenza are often highest in young children and more severe illness leading to hospitalization occurs more commonly in this group than in older children or adults. High mortality rates have been seen in very young children (less than one year) in previous pandemics.

In the US, the Centers for Disease Control interim guidance on A(H1N1) antiviral use, based on its guidance on seasonal flu, is that children younger than five years old should be considered as a high risk group for A(H1N1), noting that children younger than two years have the greater risk for severe complications from seasonal flu. It appears that this experience is being reflected with A(H1N1), with about 9% of US hospitalizations having been said to be in patients under the age of two.

How do I tell if my child has A(H1N1) Influenza?

Contact your doctor or healthcare provider immediately if your child has any of the following symptoms:

- tiredness
- headache
- runny nose and sneezing
- sore throat
- shortness of breath
- loss of appetite
- vomiting and diarrhoea
- aching muscles, limb and joint pain
- temperature of 38°C or above
- feverish, feels hot or is having convulsions (seizures)

How do I treat my child who has A(H1N1) Influenza?

Keep your child at home and follow the treatment you would normally give for any cold or flu. Make sure they drink plenty of liquids, get lots of rest and eat nutritious

food. Prescribed or over-the-counter cold and flu remedies may be taken to help control temperature and flu/cold symptoms.

Can children take antivirals?

Yes, on the advice of your doctor or healthcare provider

Can babies under the age of one take antivirals?

Your doctor or healthcare provider will be able to advise you on a treatment regimen for your baby. The first line of protection for babies aged under one is respiratory and hand hygiene and frequent cleaning of surfaces, toys and equipment.

If you are at all worried about your child, always call your doctor or healthcare provider for advice immediately

PEOPLE OVER THE AGE OF 65

Although at present the risk of becoming infected in this age group appears to be lower than in other age groups, not much is known of the risk of more serious illness if the over 65 is infected. It would be appropriate to consider people over the age of 65 as at risk on a precautionary basis. Over 65s with mild disease have not been recommended as a target group for antiviral treatment by WHO.

If someone with HIV or Aids gets A(H1N1) Influenza, are they more likely to suffer complications?

People with underlying medical conditions are at heightened risk of becoming seriously ill or suffering complications like pneumonia if they get A(H1N1).

Is it safe to eat pork and pork products?

Yes. Influenza A(H1N1) has not been shown to be transmissible to people through eating properly handled and prepared pork (pig meat) or other products derived from pigs. The influenza A(H1N1) virus is killed by cooking temperatures of 160°F/70°C, corresponding to the general guidance for the preparation of pork and other meat.

Can my pet catch swine flu?

There is currently no evidence that pets could get this new strain of flu. The swine flu virus appears to be passing only from person to person or from human to swine. In general, flu viruses commonly infect just one species; for example, dogs and cats do not get seasonal flu from their owners.

Who may I contact for further information?

Answers to most questions are available on the following websites:

- NICD Website: www.nicd.ac.za
- World Health Organisation Website: www.who.int/csr/disease/swineflu/en/
- Centers for Disease Control and Prevention (CDC, Atlanta): www.cdc.gov/h1n1flu/

Telephonic enquiries can be made to:

- Daytime NICD Influenza Hotline (8am to 5pm Monday to Friday) - 082 477 8026
 - After-hours, weekends and public holidays – NICD Hotline - 082 883 9920
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Adapted from:

- WHO:
http://www.who.int/csr/disease/swineflu/frequently_asked_questions/en/index.html.
Accessed 6 August 2009
- Centers for Disease Control and Prevention:
http://www.cdc.gov/h1n1flu/swineflu_you.htm. Accessed 6 August 2009
- National Institute for Communicable Diseases (NICD)
<http://www.nicd.ac.za/>