

What to do about the FLU

A patient guide to the prevention and treatment of influenza

Fall, 2000

Influenza is a common and very contagious respiratory tract infection caused by Influenza A or B viruses. Every winter, influenza will affect about 25% of Canada's population. People of all ages can be affected but "the flu" is more dangerous in the very young, the elderly and people in poor health due to chronic illness or disability. Antibiotics are not effective since the infection is caused by a virus and not by bacteria. People living in close contact with others such as nursing home residents are particularly at risk since the virus spreads through person-to-person contact, airborne droplets, and contaminated objects. **Vaccination is the most effective way to gain protection from "the flu".**

Symptoms - is it the flu or just a cold???

Influenza has a 48-hour incubation period followed by sudden onset of fever, chills, aches and pains, headache and extreme fatigue. Symptoms similar to a cold such as a runny nose, sore throat and cough also occur. The differences between a cold and influenza are compared in Table 1. Infected adults can spread the virus for 3-5 days after the onset of illness; in children this infectious stage can last up to 7 days. Most symptoms disappear within 7-10 days but cough and fatigue may last several weeks.

Table 1: COMMON COLD versus INFLUENZA

Symptoms	Common COLD	the FLU
♦Fever	Rare; mild	Common; 39-40 ^o C
♦Aches & pains; ♦Fatigue	Mild	Common and often severe with fatigue
♦Headache	Rare except with sinus congestion	Common and can be severe
*Runny nose	Common along with congestion	Can occur but rarely causes congestion
*Sore throat	Common	Occasional; mild
*Cough	Common; mild-moderate	Common; can be severe

♦ Classic symptoms of the flu (influenza)

* Classic symptoms of the common cold

Symptom relief: the comfort of your own home

If you have the flu or suspect you may be coming down with it, stay at home, get plenty of rest and drink lots of fluids. Acetaminophen (e.g. Tylenol®), ibuprofen (e.g. Advil®, Motrin-IB®) or ASA (Aspirin®) may help relieve fever and aches and pains. **ASA should not be used in children and teenagers due to the risk of Reye's Syndrome.** Heating pads and humidified air can also provide some relief.

The Do's:

- ♦ Rest in bed as much as possible; continue for 2-3 days after fever disappears.
- ♦ Increase fluid intake to at least 8 glasses daily. Fluids help thin nasal and lung secretions.
- ♦ Keep your germs to yourself...
 - limit visitors and close contact with other family members
 - wash your hands frequently and encourage those who have contact with you to wash theirs as well

The Don'ts:

- ♦ Don't go to work or school - you need rest and going out will only spread the virus to others
- ♦ Don't share drinking glasses or eating utensils
- ♦ Don't give ASA (Aspirin®) to children younger than 18 years of age

Call your doctor if:

- ♦ Your fever or cough gets worse instead of better after 2-3 days
- ♦ You develop shortness of breath or chest pain
- ♦ You have a thick discharge from ears or sinuses along with pain
- ♦ You have neck pain or stiffness along with unusual drowsiness, confusion, or difficulty concentrating

An Ounce of Prevention...vaccination

Immunization is the best way of preventing influenza. The vaccine will prevent the illness in **70-90%** of people who are immunized. Immunization must be repeated every fall since the antibodies to previous vaccine do not last more than a few months and new strains of influenza viruses develop every year. In Saskatchewan, **immunization is provided free of charge through doctors' offices, community health centres, and public immunization programs to "high risk" groups** (see chart below).

If you think you qualify for free immunization, contact your family doctor or local health centre. **The best time to be immunized is September through early November.** If you do not have any of the qualifying conditions but would still like to be immunized, you can do so at your own expense (~\$15.00) through your doctor's office or local health centre.

How safe is the vaccine? The vaccine does not contain live virus and will not give you influenza. The most common complaint is mild soreness at the injection site for up to 2 days. In children, fever and achiness may occur within 6-12 hours of vaccination and last 1-2 days; treatment with acetaminophen (Tylenol®) may be helpful. **People who have had allergic reactions to eggs or previous flu shots should not receive the vaccine.**

...vaccination is still the most effective way to beat the flu.

A Pound of Cure...drug treatment

If you have not been immunized but have been exposed to influenza or suspect you may be catching it, medication is available to help *prevent* influenza.

Consult your doctor as soon as possible as this prevention is more successful when started early.

Three prescription drugs are available for *treatment* of influenza. Two of these, Tamiflu® and Relenza® are new drugs that have been widely promoted by the manufacturers. These drugs may be beneficial in some patients but are quite costly and of limited value in others. They offer no benefit if started 48 hours or more after symptoms of the flu appear.

How well do the new "flu" drugs work?

As these drugs have not been on the market too long, our knowledge about them is limited. They may help some people feel better about one day earlier than if they did not get the prescription. **They are not approved for use in children.** The cost for these newer drugs is about \$50.00 or more for a 5-day course.

While these drugs may be of value, vaccination is still the most effective way to beat the flu. Vaccination not only protects you from getting the flu, it prevents you from spreading the flu to others.

Primary References:

1. Health Protection Branch. Flu Information, 2000.
2. National Advisory Committee on Immunization. Statement on Influenza Vaccination for the 2000-2001 Season. Health Protection Branch - Laboratory Centre for Disease Control, Ottawa, Vol 26, June 1, 2000.
3. Mosby's Information for Patients Online, 1998.
4. Jefferson T, Demicheli V, Deeks J et al. Neuraminidase inhibitors for preventing and treating influenza in healthy adults (Cochrane Review). In *The Cochrane Library*, Issue 3, 2000. Oxford: Update Software.

Table 2: Influenza Vaccination - Recommendations and Cost

Immunization	Provided free of charge*	Paid at own expense (~ \$15.00)
Strongly Recommended →	High risk individuals <ul style="list-style-type: none"> ◆all adults ≥ 65 years old ◆people living in nursing homes or other long term care facilities ◆adults or children ≥ 6 months old with lung, heart, kidney, or immune system problems or diabetes ◆children ≥ 6 months - 18 years who must take aspirin regularly Health district personnel	Caregivers and household members of people at high risk Health care providers not covered by the Health District (check with employer regarding coverage)
May be considered →		<ul style="list-style-type: none"> ◆essential service workers ◆students living in dormitories ◆pregnant women ◆travelers to foreign destinations** ◆anyone else wanting flu protection

*influenza vaccination available through doctors' offices, community health centres, public health immunization drives

**check with Public Health

