

Flu Q&A

Many people in our community are seeking medical advice about the H1N1 flu. While the H1N1 flu continues to receive a great deal of public attention, it's important to remember that in most cases, symptoms of the H1N1 virus are less severe than those associated with the seasonal flu. Not all patients with suspected H1N1 infection need to be seen by a health care provider. Patients with severe illness and those at high risk should seek medical care. Here are answers to some frequently asked questions.

1. Who is at high risk for complications from the flu?

Those at high risk of serious complications include children under 5, adults 65 and older, pregnant women, and people with chronic medical conditions.

2. If you have flu-like symptoms, will you be tested?

Some people will be tested right away. This includes anyone who is sick enough to be admitted to the hospital, and those who are at high risk of serious complications from infection as listed above.

If you are not high risk or sick enough to go to the hospital, your health care provider will evaluate your condition. Your provider may or may not use a Rapid Flu test or another laboratory flu test. Because our community is seeing an increase in flu cases and we know much more about the health effects of the H1N1 virus, trust your health care provider to determine the best course of diagnosis and treatment for you.

3. If you don't have flu-like symptoms, will you be tested?

No. Until you have symptoms, testing is ineffective. See question 6 below for more information if you're concerned about close contact with people who have symptoms.

4. Who should be treated with antiviral medications?

Health care providers know what treatment is best for each patient. Providers consider antivirals for

1. All hospitalized patients with confirmed, probable or suspected flu.
2. Patients at high risk of serious complications from infection.

Because H1N1 is slightly less severe than the seasonal flu, treating flu symptoms at home is an effective course of treatment for those who are not high risk.

5. Who should receive prophylactic or preventive therapy?

Preventive therapy is recommended for high-risk people who have close contact with confirmed, probable, or suspected flu cases.

6. What is close contact?

Close contact is defined as caring for or living with a person who is a confirmed, probable or suspected case of the flu, or being in a setting where the likelihood of contact with respiratory droplets from a cough, sneeze and/or body fluids of such a person is high.



Close contact typically does not include activities such as walking by an infected person or sitting across from a patient with symptoms in a waiting room or office.

7. What antiviral medications are being used to treat the flu?

Currently, there are two antiviral medications being used: Oseltamivir (Tamiflu) and Zanamivir (Relenza). Typical antibiotics do not treat the flu. These antiviral medications do not completely cure the flu or stop you from being infectious, but they do slow the spread of the illness and reduce the risk of complications.

8. Is there an adequate supply of antiviral medications?

Yes. University of Utah Health Care has an ample supply of antiviral medications and the Utah Department of Health has reported there is not a shortage.

9. Is Tamiflu safe in pregnancy?

Currently, there is no research to answer this question definitively, but there are no reported cases of birth defects associated with Tamiflu. Because pregnancy increases the risk of severe complications from infection, the Centers for Disease Control (CDC) recommends that pregnant women with the flu or those who have close contact with someone who has a confirmed, probable, or suspected case of the flu should be treated.

10. Where can I get more information about the antiviral medications?

The CDC Web site: www.cdc.gov/h1n1.

11. Who should be seen in the emergency room?

If a person is at high risk for complications or is sick enough to need hospital care, they should go to the emergency room. The warning signs indicating a person should go to the emergency room include difficulty breathing, discolored lips, vomiting, signs of dehydration or being less responsive than normal.

12. If someone with the flu is being cared for at home, what should they do?

- Check with their health care provider about any special care they might need if they are pregnant or have a health condition such as diabetes, heart disease, asthma, or emphysema.
- Stay home for 7 days after symptoms begin or until you are symptom-free for 24 hours, whichever is longer.
- Get plenty of rest.
- Drink clear fluids (such as water, broth, sports drinks, electrolyte beverages for infants) to keep from being dehydrated.
- Cover coughs and sneezes. Clean hands with soap and water or an alcohol-based hand gel often and especially after using tissues and after coughing or sneezing into hands.
- Avoid close contact with others. Do not go to work or school while ill.



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