

MEDICAL UPDATES

H1N1 Flu

The H1N1 ("swine") flu is widespread in North Carolina and we are definitely seeing lots of it at GMA.

H1N1 is a novel strain of influenza first believed to have originated from pigs, hence the initial title of "swine flu". Further testing has shown this new strain to be very different from strains that circulate in pigs. In fact, it behaves very similarly to typical "seasonal influenza" with four exceptions-

1. *The timing of the H1N1 outbreak has been unusual.* Typical "seasonal flu" strikes in the winter months. On the other hand, H1N1 has been increasing in incidence since the initial cases in mid-April. 99% of influenza-like-illnesses occurring currently are due to H1N1.

2. *In general, H1N1 appears to be a milder influenza illness.* The most common symptoms are fever (above 100°) AND cough or sore throat. Muscle aches, fatigue, and nausea/vomiting are other, less common, symptoms. Symptoms typically improve within 5-7 days with or without treatment. Less than 1,000 deaths have been attributed to H1N1 (not all cases confirmed by laboratory testing). This pales in comparison to the 36,000 seasonal influenza-related deaths each year. The majority of H1N1 deaths have occurred in patients with underlying medical issues (including pregnancy).

3. *H1N1 tends to affect younger people.* 90% of seasonal flu deaths occur in people 65 and older. On the contrary, less than 10% of H1N1 deaths have occurred in people over the age of 65. Most cases have occurred in the 5-24 year old age group. One theory suggests that people over the age of 65 have acquired immunity to this strain from prior influenza exposure, including the "swine flu" outbreak in 1976.

4. *Rapid flu testing is not accurate.* The CDC only recommends testing for H1N1 in hospitalized patients. Consequently, the number of "reported cases" described by the media are based on the number of influenza-like-illnesses. This may have resulted in an overestimation of the actual prevalence of H1N1.

H1N1 Flu Vaccine

Based on our experience thus far with H1N1, the CDC is recommending vaccination for H1N1 for the following high-risk groups:

- pregnant women
- people who live with or care for children younger than 6 months of age
- healthcare personnel
- persons between the ages of 6 months and 24 years
- people between the ages of 25 and 64 years who are at higher risk for H1N1 because of chronic health disorders or compromised immune systems

Guilford Medical Associates anticipates that we will begin administering the H1N1 vaccine in mid-October. The vaccine will be very similar to the annual flu vaccine which targets the 3 most common seasonal strains. Since production of the seasonal flu shots began before the initial cases of H1N1, this strain must be covered by a separate vaccination. Given its similarity to the seasonal flu shot, the CDC does not anticipate any new safety concerns with this vaccine. Adverse events will certainly be monitored closely. If you are in the target group for vaccination and would like to get the H1N1 vaccine, call your physician's nurse or medical assistant after October 15.

Realizing that the seasonal flu is much more severe for most people, we strongly encourage all patients, particularly those over the age of 50 and those with underlying medical issues to get your seasonal flu vaccine as soon as possible. GMA will conduct flu shot clinics October 8 and October 14 from 8:30 to 11:30. Additionally, you can get your shot on any Tuesday, Wednesday, or Thursday from 9:00 until 11:00 and 2:00 until 4:00. We will NOT be administering the H1N1 vaccine at those times.

For more information on H1N1 influenza, treatment, and prevention visit www.cdc.gov/h1n1flu.



