

INFLUENZA QUESTIONS & ANSWERS

Q. What is 'the flu' and how is it caused?

A. Influenza is a contagious disease caused by a virus. Influenza viruses infect many parts of the body, including lungs. When someone who has influenza sneezes, coughs or even talks, the influenza virus is expelled into the air and may be inhaled by anyone close by.

Q. What are the symptoms of Influenza?

A. Influenza is a highly contagious respiratory viral illness. Influenza A and B are the major types of influenza viruses that cause human disease and affect people of all ages. Persons with influenza may have fever, cough, sore throat, fatigue, muscle aches, headaches, runny nose and watery eyes. Children may experience vomiting and diarrhoea in addition to these symptoms. Although the fever and body aches usually last for 3-5 days, a cough and fatigue may persist for 2 weeks or more.

Q. Who gets Influenza?

A. Anyone can get influenza, especially when it is widespread in the community. People who are not healthy or well to begin with are particularly susceptible to the complications that can follow. For anyone in a high risk category, influenza is a very serious and potentially fatal illness. You may be at high risk if you are over 65 years old or have*:

- Chronic disorders of the pulmonary or circulatory systems
- Congenital heart disease
- Cystic fibrosis
- Severe asthma
- Diabetes mellitus
- Chronic metabolic disorder
- Renal dysfunction

Q. How long is a person with Influenza contagious for?

A. The period between infection and onset of symptoms (incubation period) for influenza is 1-4 days. A person with influenza may be contagious for 3-7 days after the onset of symptoms. Children may be contagious for longer than 7 days.

Q. How can Influenza and its complications be prevented?

A. Influenza can be prevented with a high degree of success when a person receives the current influenza vaccine. This vaccine is made each year so that the vaccine contains the influenza strains that are expected to cause illness in that year.

Q. Is the Influenza vaccine safe?

A. The vaccine does not cause influenza. It does not contain 'live virus'. Generally, people have no reaction to the vaccine. Some people may experience mild side effects such as tenderness and redness at the injection site. These side effects usually clear within a day.

Persons with allergies to eggs or chicken products should not receive influenza vaccine, as it is prepared from influenza viruses grown in eggs.

Q. How effective is the Influenza vaccine?

A. In years in which there is a good match between the vaccine virus and the virus strain causing illness, influenza vaccine is generally considered to be 70%-90% effective in preventing influenza illness in healthy adults.

It is important to know that it takes about 2 weeks after influenza vaccination for a person to develop protection against influenza infection. Also, influenza vaccine does not protect against respiratory illness caused by other viruses.

Q. Can you get Influenza from a vaccination?

A. No, it is absolutely impossible to get influenza from the vaccine. The viruses in the vaccine are inactivated and incapable of causing influenza. Instead, the person is protected from influenza by antibodies that are formed by the immune system's response to the vaccine.

The amount of antibodies in the body is greatest 1 or 2 months after vaccination and then gradually declines. For that reason and because the influenza viruses usually change each year, a high-risk person should be vaccinated each Autumn with the new vaccine.

Q. Is Influenza considered serious?

A. For healthy children and adults, influenza is typically a moderately severe illness. Most people are back on their feet within a week.

For people who are not healthy or well to begin with, influenza can be very severe and even fatal. Symptoms have greater impact on these people, in addition, complications can occur. Most of these complications are bacterial infections because the body can be severely weakened by influenza such that its defences against bacteria are low. Bacterial pneumonia is the most common complication of influenza. Also, the sinuses and inner ears may become inflamed and painful.

Q. Can you have a recurrence of Influenza?

A. A person can have influenza more than once. Here's why: the virus that causes influenza may belong to one of three different influenza virus families, A, B or C. Influenza A and influenza B are the major families.

There are many viral strains within each influenza virus family. Both A and B have strains that cause illnesses of varying severity. But the influenza A family has more virulent strains than the B family.

If you have influenza, your body responds by developing antibodies. The following year a new strain, either from the same or different influenza virus family, may appear. Your antibodies are less effective or ineffective against this unfamiliar strain. If you are exposed to it, you may come down with influenza again.

Patients who have a history of developing Gullain Barre syndrome (GBS) with an onset related in time to receiving influenza vaccination may be prone to developing GBS again if vaccinated.

Q. What are the contraindications to the administration of the vaccine?

A. Always review full product/consumer medicine information before prescribing or receiving influenza vaccine.

Influenza vaccine should NOT be given to persons who are truly allergic (experience anaphylactic reactions) to any component of the vaccine.

1. Fowl proteins (eggs, feathers and chicken meat): the vaccine is produced by cultivating influenza viruses in embryonated hens eggs
2. Neomycin-an antibiotic used to ensure bacteria do not grow in the vaccine.

Anaphylactic reactions (often associated with swelling of the lips and tongue or acute breathing difficulties) are quite different to mild allergic reactions in that they usually occur shortly after the vaccine has been given; may be severe and can result in death. It is important to realise that true anaphylaxis is rare and can be managed with appropriate medical intervention.

Influenza vaccines should also not be given to individuals who are experiencing an acute feverish illness. Vaccination should be delayed until symptoms subside.

Q. Can pregnant women be vaccinated?

A. There is no convincing evidence of risk to pregnant women from receiving influenza vaccine. Since it is inactivated it does not share the theoretical risks associated with live vaccine. Studies have shown that pregnant women, especially during their second and third trimester may be at increased risk of developing influenza-associated complications. These complications could be prevented by receiving influenza vaccination. The Australian NHMRC guidelines (8th edition, 2003) state that "It is (...) recommended that all women who will be in second or third trimester of pregnancy during the influenza season be vaccinated in advance.

SWINE FLU QUESTIONS & ANSWERS

Q. What is Human Swine Flu?

A. Human Swine Flu is a respiratory disease caused by a new influenza virus.

Q. How does Human Swine Flu spread?

A. Spread of Human Swine Flu virus is thought to be happening the same way seasonal flu spreads. Flu viruses are spread mainly from person to person through coughing or sneezing.

Sometimes people may become infected by touching something with flu viruses on it and then touching their mouth or nose.

Human Swine Flu virus is infectious and is capable of spreading from human to human.

Q. What are the signs and symptoms?

A. The symptoms of Human Swine Influenza in people are similar to the symptoms of regular flu and include fever, cough, sore throat, body aches, headache, chills and fatigue. Some people have reported diarrhoea and vomiting associated with Human Swine Flu.

The virus has so far been mild and can be compared to the normal seasonal flu.

Like seasonal flu, Human Swine Flu may cause a worsening of underlying chronic medical conditions.

Q. How can someone with this Influenza infect Someone else?

A. Definitive information regarding the mode of transmission of Human Swine Flu is not yet available, however it seems likely that it shares the same transmission dynamics as seasonal influenza – i.e. it is most commonly spread from person-to-person by inhalation of infectious droplets produced while talking, coughing and sneezing.

