



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Information and medical advice about influenza A(H1N1) for people with specific medical conditions

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What is influenza A(H1N1)?

Influenza A(H1N1) is different from the ordinary or seasonal flu that occurs every winter.

- It has spread rapidly in the Americas.
- It could be highly infectious
- It may affect large numbers of people
- It may cause more severe illness than ordinary flu
- It may cause more deaths than ordinary flu
- It may occur in two or more waves several months apart – with each wave possibly lasting weeks or months

Are there people at higher risk of complications?

Some people are at higher risk of complications from flu. They may require additional treatment or monitoring.

This group includes people with chronic heart or lung disease, diabetes, liver and kidney disease, people receiving cancer treatment, and whose immune system is impaired due to disease or treatment (immunocompromised). It also includes children under 3 years and pregnant women.

What can people do to protect themselves from influenza A(H1N1)?

Preventing the spread of germs is the single most effective way to slow the spread of influenza.

1. Wash your hands often with soap and water, and especially after coughing and sneezing and before eating. Alcohol-based hand cleaners (minimum 60% alcohol) are also effective
2. Avoid unnecessary close contact with people who have influenza
3. Avoid touching your eyes, nose or mouth with your hands – germs spread this way
4. Cover your mouth and nose with a tissue when you cough or sneeze and put your used tissue in a wastebasket.



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

How will I know if I have got influenza A(H1N1)?

You will have the same symptoms as if you had ordinary flu but they will probably be sudden, and may be severe. They may include:

- Temperature over 38°C/100.4°F and some of the following
- Dry cough
- Headache
- Severe weakness and fatigue
- Aching muscles and joints
- Sore throat
- Runny nose
- Vomiting / diarrhoea

These can lead to complications some of which may be severe.

What should people do if they think they may have influenza A(H1N1)?

Anyone with a chronic disease, or who is immunocompromised, pregnant or is a child under 3 years needs to have an urgent assessment by their doctor.

- Contact your GP by phone and follow his or her instructions.
- Discourage any visitors
- Take medicines such as paracetamol to reduce the symptoms
- Drink plenty of fluids
- Most people with flu will recover within a few days.
- Stay at home for up to 7 days or until you fully recover (whichever is the longer)
- If you need to go to a doctor's office or to an emergency room, please telephone before you go and tell them that you think you might have influenza A(H1N1). When you are there cover your mouth and nose with a facemask or a cloth; make yourself known to staff. Do not sit in the waiting area with other patients.

When should a person get emergency medical care?

Contact your doctor by phone or the Flu Information Line if you notice:

- Shortness of breath at rest or while doing very little
- Painful or difficult breathing
- Coughing up bloody sputum
- Drowsiness, disorientation or confusion
- Fever for 4-5 days and not starting to get better (or getting worse)
- Starting to feel better then developing high fever and feeling unwell again



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Is there a vaccine against influenza A(H1N1)?

No. There is currently no vaccine for influenza A(H1N1). The vaccine given for seasonal flu does not protect against influenza A(H1N1).

Is there treatment against influenza A(H1N1)?

Yes. The influenza A(H1N1) virus is sensitive to antiviral drugs. These medicines may reduce the severity of the illness. Treatment is most effective if started within 48 hours of symptom onset, but may also be given to very sick or high risk people (like pregnant women) even after 48 hours.

How else should people with medical conditions prepare for the possibility of spread of the influenza A(H1N1) virus?

Consult your doctor and make sure all your vaccinations are up-to-date, including the pneumococcal vaccine (against bacterial pneumonia caused by the *Streptococcus pneumoniae*). This type of bacterial pneumonia can be a problem particularly for immunocompromised individuals and can also cause complications for people who have the flu. Seasonal influenza vaccine should be used as advised and when available.

I'm on immunosuppressants. Am I more at risk than other people from influenza A(H1N1)?

Yes. If you take immunosuppressant treatment you have a greater risk of becoming infected with any virus, including flu, and will be less able to fight it off once you have it.

Can I take antivirals if I'm on immunosuppressants?

Yes, it is safe for you to take antivirals.

Can I take antivirals if I have mild to moderate kidney disease?

Yes, you will be treated as any other person would be. This means you can take antivirals, if necessary.

Can I take antivirals if I have severe kidney disease?

Usually Yes. However your doctor will make this decision.



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Are people with asthma or other respiratory problems more at risk from influenza A(H1N1)?

You are no more likely to catch influenza A(H1N1) than anyone else. However, if you do catch a respiratory infection, including influenza A(H1N1), it will add to the breathing difficulties you may have.

What advice is there for people with asthma or other respiratory problems?

If you get influenza A(H1N1), you are at greater risk of a more severe illness. It is therefore very important that you follow good hygiene practices to protect against flu (see above) and take appropriate actions if you develop flu-like symptoms (see above). See the advice on the HPSC website (www.hpsc.ie) "Taking care of a sick person with Flu", particularly if you are using a nebuliser.

Can I take antivirals if I have asthma or other respiratory problems?

Yes - however your doctor will advise you as some antivirals are more suitable for those with asthma or other respiratory problems.

I have diabetes. Am I at more at risk from influenza A(H1N1)?

You are no more likely to catch influenza A(H1N1) than anyone else. However, if you do catch it, your blood glucose may increase and your diabetes treatment may need to be adjusted accordingly.

What should I do if my blood glucose increases?

If you find your blood glucose has increased, or you develop thirst and are urinating more often, call your GP. If you are on insulin and testing your own blood glucose, you may be advised to do this more often so you can adjust your dose according to the results. If you start to vomit or become increasingly unwell, call your GP as soon as possible.

Is there any advice for people with liver disease?

If you have liver disease you are no more likely to catch influenza A(H1N1) than anyone else. If you do catch it, antivirals are safe to take – there is no



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

interaction between these and antivirals you may already be taking to treat hepatitis. However the type and dose of antiviral will be decided by your doctor.

Can I take antivirals if I am on epilepsy treatment?

Yes. There is no evidence that antiviral treatments affect medicines taken to control epilepsy.

Telephone

Further information is available from the HSE Flu Information Line. The Flu Information Line is available 24 hours a day and is your primary source of information on influenza A(H1N1).

Freephone 1800 94 11 00

Websites

The HSE Website will be kept updated every day with latest information and advice. Check it often.

Health Service Executive

www.hse.ie

Department of Health and Children

www.dohc.ie

Information for Health Professionals will be on

www.hpsc.ie