

## **INFLUENZA**

"The flu" is a general term that is often used for an illness that is more severe than the common cold and less severe than pneumonia. To some of us, "the flu", may be an intestinal illness, with nausea, vomiting, diarrhea and fever. To others, our "flu" is a sore throat, dry cough, and fever. However, **influenza** is a specific, severe, lower respiratory illness caused by a handful of similar viruses.

What exactly is influenza? Influenza is a severe viral illness that often occurs in epidemic proportions in the late fall and winter months. One to four days after coming into contact with the virus (usually by inhaling it from another infected person), the patient characteristically has an abrupt onset of high fever, chills, headache, muscle aches, cough, runny nose and occasional nausea. The illness tends to run its course in 7 to 10 days, and **antibiotics are not effective** (unless the person gets a second, superimposed bacterial infection such as bronchitis or pneumonia). Influenza is very dangerous for the elderly, small children and chronically ill people (asthmatics, diabetics, or people with heart disease, emphysema, cancer, or AIDS), since these people are the most likely to get these superimposed serious infections.

Each year, a "best estimate" **influenza vaccine** is created against the specific strains of virus that will likely prevail in the coming flu season. Vaccination is recommended in the fall for elders, children, persons with chronic illnesses and impaired immunity, and health care workers. The vaccine is usually very effective. However, the virus can often change (or mutate) to another strain later in the season, leaving vaccinated people with incomplete protection. For example, this scenario occurred with a vengeance in 1984-1985, and the result was the largest influenza epidemic in over a decade. In addition, the influenza vaccine protects only against influenza, not against colds and "the flu."

Should you miss the chance to be vaccinated and you get influenza, the next best alternative may be one of the antiviral medications for Influenza A and B, such as **oseltamivir (Tamiflu)**. The older anti-influenza medications (rimantadine or amantadine) are only effective against influenza type A. The newer medications can help make the illness less severe, but must be started within 72 hours of onset of illness to be effective. Under certain circumstances, these medications can be prescribed as prevention/prophylaxis in the face of an outbreak of influenza. Be sure to talk to your healthcare provider about the risks and benefits of these medications, including potential side effects.

There is an important special note about influenza and aspirin. Influenza and chicken pox are the two illnesses that have been linked with aspirin as a possible cause of **Reye's Syndrome**, a severe and often fatal illness with liver inflammation and coma. Reye's syndrome has most commonly been described in small children, but there have been cases in patients as old as 21 years.

Therefore, if you are a teenager and you have a respiratory illness, it's a good idea to use an aspirin substitute.

If you have influenza, stay in bed, drink lots of fluids and take Tylenol or other non-aspirin medications for fever and pain. Try not to spread the illness to friends, family or classmates by covering your cough and washing your hands frequently. You should be seen by Student Health Services (or your family physician), if you need medications (such as Tamiflu), or if you think you may have developed a secondary bacterial infection (such as an ear infection or pneumonia).

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## Helpful Links:

American Academy of Family Physicians patient information web site (familydoctor.org), at <u>http://familydoctor.org/477.xml</u>.

Emory University Student Health Service flu shot cost and availability: influenza\_2006-2007.

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