



H1N1 Influenza Virus- School Update

What is it? Novel influenza (H1N1) is a new flu virus of swine origin that first caused illness in Mexico and the United States in March and April, 2009. It's thought that novel influenza A (H1N1) flu spreads in the same way that regular seasonal influenza viruses spread, mainly through the coughs and sneezes of people who are sick with the virus, but it may also be spread by touching infected objects and then touching your nose or mouth.

How is it transmitted? H1N1 is spread from person to person when an infected person sneezes, coughs, or talks into the air and the other person inhales the virus. The virus enters the nose, throat or lungs of that person, begins to multiply and symptoms develop. For some individuals, these symptoms show up in 24 hours; while others take up to seven days. Once symptoms show, a person is still contagious for up to seven *more* days.

What are the symptoms?

Novel H1N1 infection has been reported to cause a wide range of flu-like symptoms, including fever, cough, sore throat, body aches, headache, chills and fatigue. In addition, many people also have reported nausea, vomiting and/or diarrhea.

Vaccination:

For H1N1 virus the CDC's Advisory Committee on Immunization Practices (ACIP) has recommended that certain groups of the population receive the novel H1N1 vaccine when it first becomes available. These key populations include pregnant women, people who live with or care for children younger than 6 months of age, healthcare and emergency medical services personnel, persons between the ages of 6 months and 24 years old, and people ages of 25 through 64 years of age who are at higher risk for novel H1N1 because of chronic health disorders or compromised immune systems.

Treatment: Treatment consists of resting in bed, drinking plenty of fluids, and taking fever reducing medications such as acetaminophen. Antibiotics are not effective in treating influenza. Moreover, children with flu *should not* take aspirin as it isn't a safe treatment for combating a viral infection and can result in Reyes syndrome: a neurological disorder occurring almost exclusively in children.

Preventing Influenza:

- Educate students on respiratory etiquette- ongoing reminders about covering coughs and sneezes (sneeze in your sleeve).
- Model and practice good hand hygiene and provide time and supplies to wash hands as needed.
- Provide easy access to tissues, running water and soap, or alcohol-based cleaners.
- Send sick students and staff home. They should stay home until at least 24 hours after they no longer have a fever or signs of a fever (this should be determined without the use of fever reducing medications).
- If students or faculty become sick at school, move them to a separate room until they can be sent home. Limit the number of staff who take care of an ill child and provide a surgical mask for the sick person to wear (if they can tolerate it).
- Have Personal Protective Equipment such as masks available and ensure it is worn by school nurses and other staff caring for sick individuals as school.
- Clean surfaces and items that have frequent hand contact. These are usually doorknobs, computer keyboards, toys, etc.
- Encourage sick students and staff at higher risk for complications from flu to get a medical evaluation as soon as possible
- Consider dismissing school if a large proportion of staff is at higher risk of flu-related complications. This strategy would be applicable to very few schools nationwide. This strategy would be more appropriate in schools for pregnant women and schools with many medically fragile children.

Information for this fact sheet from: Centers for Disease Control and Prevention
<http://www.cdc.gov/h1n1flu/guidance/#statelocal>

Contact:
Pamela Sook, Coordinator
Health, Safety & Drug Education
(989) 667-3262
Fact sheet updated August 2009