



The Children's Hospital

Influenza

(Seasonal Flu and H1N1 Flu)

You may hear about seasonal flu (or "regular flu") and H1N1 flu (or "swine flu"). Both are types of influenza and their symptoms and treatment are the same.

Remember that the best way to protect yourself and your family is to take basic preventive measures such as washing your hands, covering your cough and getting your family vaccinated for seasonal flu and H1N1 flu.

Definition

Influenza, commonly known as "the flu," is a viral infection of the nose, throat, windpipe and bronchi. The flu is often confused with the common cold, but flu symptoms tend to develop quickly and are usually more severe than the typical sneezing and congestion of a cold. The main symptoms are a cough, sore throat, fever and runny nose. Usually there's more muscle pain, headache and chills than with the common cold. Nausea is common.

Cause

Flu is caused by influenza viruses. Flu viruses change yearly, which is why people can get the flu every year. It spreads rapidly because the incubation period is only two days. H1N1 is a type of flu virus that started in March 2009 and by June had spread to most of the world (a pandemic). After H1N1 exposure (close contact), 20% of people come down with symptoms in four to six days.

Diagnosis: How to know if your child has the flu

If the flu is widespread in your community and your child has flu symptoms with a fever, then he or she probably has the flu. You don't need to get any special tests. You don't need to call or see your child's doctor, unless your child is HIGH-RISK (see that list) or develops a possible complication of the flu (see the "Call your child's doctor" section). If your child has the flu and may have exposed a HIGH-RISK person or child to their illness, recommend that they contact their primary care provider.

How to treat the flu

The treatment of the flu depends on your child's main symptoms. It's no different from treating symptoms of the common cold. Bed rest is not necessary. Antibiotics are not helpful.

1. Fever or aches

Give Tylenol (acetaminophen) or Advil (ibuprofen) for fever over 102°F (39°C) or for any pain. Children and adolescents who have influenza should NEVER take aspirin.

2. Cough

For children over age six, give cough drops. If your child is over one year of age, give honey (1/2 to 1 teaspoon as needed). Never give honey to babies. If honey is not available, you can use corn syrup. Drugstore cough medicines are not as helpful as honey. According to the Food and Drug Administration (FDA), cough medicines are not approved for children under four years old.

3. Sore throat

Tylenol or ibuprofen is very helpful for throat pain. Children over six years old can suck on hard candy. Children who are at least one year old can sip warm chicken broth or other warm liquids.

4. Stuffy or blocked nose

Warm-water (or saline) nose drops followed by nose blowing (or suction) will open most blocked noses. Use these "nasal washes" whenever your child can't breathe through the nose. You can buy saline spray without a prescription. Saline nose drops can also be made by adding 1/2 teaspoon (2 ml) of table salt to 1 cup (8 oz or 240 ml) of warm water. Use two or three drops at a time.

5. Fluids

Encourage your child to drink plenty of fluids to prevent dehydration.

6. Antiviral medicine (such as Tamiflu)

The American Academy of Pediatrics (AAP) and the Centers for Disease Control and Prevention (CDC) recommend antiviral medicines be prescribed for all HIGH-RISK children (see that list) who come down with flu symptoms (seasonal or H1N1). Most LOW-RISK children with the

flu do not need antiviral medicine unless they develop serious symptoms, such as pneumonia. Antiviral medicines must be started within 48 hours of the start of flu symptoms to have an effect. They usually reduce the time your child is sick by one or two days. They improve the symptoms but do not eliminate them. If you have other questions about antiviral medicine, talk with your healthcare provider.

7. Children at HIGH-RISK for complications

The following children are at higher risk for complications from the flu, including those with lung disease (such as asthma), heart disease (such as a congenital heart disease), weak immune system (such as cancer), diabetes, sickle cell disease, kidney disease, diseases requiring long-term aspirin therapy, other chronic diseases, pregnant teens or children under two years old.

8. Expected course

The fever lasts two to three days, the runny or stuffy nose one to two weeks, and the cough two to three weeks. Complications are uncommon.

Prevention of the flu

- **Seasonal flu vaccinations:** Yearly flu vaccinations are the best way to prevent influenza and are recommended for all children over six months of age.
- **H1N1 flu vaccination:** The H1N1 vaccine is available, but the supply is limited. Therefore, follow the CDC guidelines on who should receive it. The highest priorities are pregnant women and the parents and siblings of infants under 6 months of age and HIGH-RISK children.
- You will need separate vaccinations for seasonal flu and H1N1 because vaccine manufacturers did not include the H1N1 strain in the 2009 influenza vaccine when they produced it in January 2009.
- **Preventing spread to others:** The virus is spread by sneezing, coughing and hand contact. Cover the nose and mouth with a tissue when coughing or sneezing. Wash the hands frequently. Stay home when sick. Your child may return to child care or school after the fever is gone for at least 24 hours. (CDC)

Call your child's doctor now (night or day) if:

- Your child looks or acts very sick
- Breathing becomes difficult, fast, or causes retractions (sucking in between the ribs)
- Dehydration occurs (no urine in 12 hours, dry mouth, no tears)
- Your child is difficult to awaken or not alert when awake

Call your child's doctor during the day if:

- You think your child needs to be seen
- Your child is in the HIGH-RISK group and has flu symptoms (Call first thing in the morning)
- Earache or sinus pain occurs
- Fever lasts more than three days or returns after going away
- Cough lasts more than three weeks
- Your child becomes worse

Additional resources for flu information

- Centers for Disease Control and Prevention
<http://www.cdc.gov/h1n1flu/qa.htm>
- American Academy of Pediatrics
<http://www.aap.org/advocacy/releases/may09swineflu.htm>
- Colorado Department of Health
<http://www.cdphe.state.co.us/>
- The World Health Organization
<http://www.who.int/en/>
- The Children's Hospital
<http://www.thechildrenshospital.org/flu>

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tch11052009

