



## *NEWS RELEASE*

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### **2009 H1N1 (swine flu)**

Influenza is circulating unusually early this year with cases in all 50 states. Almost all cases of flu have been identified as the pandemic 2009 H1N1 (swine flu) variety. According to the U.S. Centers for Disease Control and Prevention (CDC), the H1N1 influenza virus broke out in the spring and never went away. After lingering around through the summer, a second wave of infections from the H1N1 virus have confirmed what was identified in the spring's first wave - that children and young adults seem to be bearing the brunt of the disease.

Thus far, the swine flu strain - the 2009 H1N1 flu - isn't any deadlier than typical winter flu. Most people that catch it are mildly ill and recover without treatment. Another important characteristic of this new flu strain is that the scientists tracking the genetic makeup of the virus report no mutations.

"What we know is that it's a brand-new flu strain and no one really has immunity to this disease," says U.S. Health and Human Services Secretary Kathleen Sebelius. "That's why it is called a pandemic flu strain - it has the potential to infect most everyone worldwide."

From a global perspective as of the end of October, the World Health Organization (WHO) reported over 441,661 cases and at least 5,712 deaths in over 190 countries. Many countries report continued sharp increases in reported influenza like illnesses (ILI).

As of the end of October in the U.S., the CDC reported 25,985 hospitalizations and 2,916 deaths attributable to influenza and pneumonia. Hospitalizations continued to increase. Since April 26, 2009, there have been 127 flu-associated pediatric deaths, 114 from H1N1. In North Carolina, the Division of Public Health reported 807 hospitalizations and 48 deaths attributed to influenza and pneumonia.

The sad but usual 36,000 deaths and 200,000 hospitalizations each year from seasonal flu are yet to arrive. This presents a big unknown about how bad this flu season will be when the seasonal flu arrives and the H1N1 flu is also circulating in our communities. Older persons who remain at higher risk for seasonal flu and its complications seem to have some

resistance to the H1N1 flu. CDC reports that this could be due to flu exposure decades ago to viruses similar to the new one. Deaths from H1N1 are occurring mainly among persons in their 20s, 30s and 40s, ages when influenza usually is regarded as a nuisance.

Especially at risk for H1N1 flu are pregnant women. People also at risk are those with chronic conditions such as asthma, diabetes, heart disease, and neuromuscular diseases, including muscular dystrophy. The WHO has reported increased deaths from H1N1 among persons who are obese, while some of the people who have died did not have any obvious health risks.

While all the experts agree that getting vaccinated against both the seasonal flu and H1N1 flu is the best way to protect yourself and those living around you, until the vaccine arrives in your community remember to wash your hands, sneeze into your elbow, and stay home so you don't spread illness when you are sick. Follow your doctor's advice if you think you have the flu. Symptoms of the flu include fever, cough, sore throat, body aches, chills, fatigue. Seek emergency medical care if you or your child has any of the following: difficulty breathing or shortness of breath; pain or pressure in the chest or abdomen; sudden dizziness; confusion; severe or persistent vomiting; flu-like symptoms that improve but then return with fever and worse cough; and, in babies, bluish or gray skin color; lack of responsiveness; or extreme irritation.

Vaccines for both the seasonal flu and the H1N1 flu are becoming more readily available in the Toe River Health District (Avery, Mitchell, and Yancey Counties) week by week. As of November 6th, 2009, there were approximately 4,000 doses of H1N1 vaccine available in most doctors' offices, hospitals, and health departments in the three county area. "Vaccine shipments to area providers have trickled in weekly for the past five weeks with small amounts of vaccine going to different providers each week," said Jesse Greene, Health Director for the Toe River Health District. CDC reports that the amounts of vaccine will continue to increase in each week's shipments and that there will be enough vaccine for everyone.

For now, however, because of the limited supply of available vaccine, it is very important for providers to focus on ensuring access to the vaccine for the priority groups identified by the Advisory Committee on Immunization Practices: pregnant women, caretakers of infants less than 6 months of age, health care workers, children and adults with health conditions such as asthma or diabetes, and people under the age of 25. "These are the people who are most vulnerable to 2009 H1N1 influenza, and it's our job to do everything we can to keep them safe this flu season," says Thomas Frieden, M.D., M.P.H., CDC Director.

“We are thankful to have vaccine in such a short period of time since the H1N1 virus was discovered, and that the vaccine is an excellent match to the circulating virus,” says Greene. The health departments will continue to offer both the seasonal and H1N1 influenza vaccines and will work with local radio stations to help get the word out about the vaccine supply availability that can change day-to-day. It is also a good idea to check with your doctor’s office about the availability of influenza vaccines.

For more information about influenza contact your county health department: Avery (828) 733-6031; Mitchell (828) 688-2371; Yancey (828) 682-6118 or call N.C. CARE-LINE at 1-800-662-7030 (TTY 1-877-452-2514) or H1N1 Public Information Line at CDC 1-800-232-4636 or visit [www.flu.nc.gov](http://www.flu.nc.gov).

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