

TOP 10 QUESTIONS PARENTS ARE ASKING KAPI'OLANI MEDICAL CENTER PEDIATRICIANS ABOUT H1N1

- 1. What is the difference between seasonal flu and H1N1 flu?**
The symptoms for all flu, including H1N1, are the same. However H1N1 is a new influenza virus that infects a higher number of children and pregnant women than seasonal flu. Because H1N1 is a relatively recent infection, it was not included in the vaccine for seasonal flu. A separate vaccine has been made available and is recommended for children age 18 and under.
- 2. How do I know if my child has H1N1 flu? Should they be tested?**
Symptoms include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills and fatigue. Some people may have vomiting and diarrhea. If your child has flu symptoms and H1N1 is widespread in the community, he or she probably has H1N1. No special tests are needed to reach this conclusion; however, your doctor will decide whether to test and/or treat for the H1N1 virus depending on your personal history and symptoms.
- 3. How can I make my child feel better?**
Treatment depends on your child's main symptoms. To open a blocked nose, use a nasal wash with saline. For a cough, use one to two teaspoons of honey (do not use for children under one year old). Ibuprofen will help a sore throat. To prevent dehydration, encourage extra fluids.
- 4. Does my child need to see a doctor?**
For mild symptoms in a child not at risk of severe disease, you don't need to seek medical attention unless persistent fever and associated symptoms worsen. For serious symptoms such as trouble breathing, bluish or gray skin color, not waking up or interacting, extreme irritability or sudden mental or behavioral changes, severe or persistent vomiting, fever with a rash, rapid breathing or dehydration; bring your child to the doctor immediately. Most healthy children with H1N1 do not develop any of these complications and can easily be treated at home.
- 5. How long is my child contagious?**
Flu germs can start spreading up to a day before symptoms start and for up to 7 days after getting sick. Children may be contagious longer than adults, and they may have more difficulty containing their coughs and sneezes.
- 6. If I have a child home sick with 2009 H1N1 flu, should I go to work?**
Parents or caregivers who are well but who have an ill family member at home with 2009 H1N1 flu can go to work as usual. Be prepared to go home promptly if flu symptoms begin, to reduce the spread of illness to coworkers.
- 7. Should my family wear facemasks?**
Masks do little to protect the wearer from contracting the flu virus. They can, however, potentially limit the spread of influenza if the sick person is wearing it. The best prevention is to clean your hands often with soap and water or alcohol based hand rub; avoid touching the eyes, nose or mouth; and cover the mouth and nose with a tissue when coughing or sneezing.
- 8. Does my child need an antiviral drug?**
The CDC recommends the antiviral medicines Tamiflu and Relenza for those who develop severe symptoms or for high risk children with any flu symptoms (those with underlying chronic health problems or all children under age 2). They do not "cure" the flu. Health officials have asked people not to hoard or overuse antiviral medication. Most people with 2009 H1N1 have had mild illness and have not needed medical care or antiviral drugs. If your child is healthy and over age 2, he or she should do fine without Tamiflu. Antibiotics will also not help to treat the flu. Antibiotics kill bacteria, but they do not kill any viruses, including viruses that cause flu or colds.
- 9. How should I treat a fever?**
Fever (defined as 100.4° F or greater) are not harmful and may help the body fight off infection by suppressing the growth of germs and activating the immune system. (However, infants under 3 months with fever should be seen by a doctor.) The main goal in managing fever is to provide comfort and help your child feel better. Acetaminophen or ibuprofen are recommended; do not give aspirin to your child or teen to treat a fever. Fever caused by the H1N1 virus normally lasts two or three days, then disappears when the immune system starts producing antibodies. If the fever lasts more than three days, or if it goes away for more than 24 hours, then returns, call your doctor. The cough can linger for several weeks due to a damaged lining of the throat and windpipe; fatigue can also last several weeks.
- 10. My child is vomiting, is that normal with H1N1?**
H1N1 sometimes causes vomiting. Allow the stomach to rest a full half hour after vomiting, then offer sips of clear fluids every 10-15 minutes. If your child becomes dehydrated or if isolated vomiting without diarrhea lasts more than 48 hours, your child should see a doctor. Keeping children's small bodies hydrated is important as they fight this illness. Water or watered-down juice are ideal; avoid colas or caffeinated beverages, which rob the system of fluids.

H1N1 and pregnant moms – what you should know

Pregnant women can get sicker than other people who get 2009 H1N1 flu. If you are pregnant and have symptoms of the flu, take it very seriously. Flu can cause early labor, pneumonia and even death in pregnant women.

- 1. What should I do if I develop flu symptoms?**
Call your doctor right away to see if treatment with an antiviral medicine is needed. The medicine is most helpful if it is started soon after the pregnant woman becomes sick.
- 2. How can I protect myself and my baby?**
Getting a flu shot is the single best way to protect against the flu. Flu shots have not been shown to cause harm to pregnant women or their babies. And of course wash hands frequently, avoid close contact with sick people, and avoid touching your nose, mouth or eyes.