



*A Union of Professionals*

## H1N1 Pandemic Flu and You

### What college employees need to know to stay well and protect yourselves against the new H1N1 flu

#### For higher education members

No doubt you've heard that this fall, H1N1 influenza A is expected to reappear in many of our communities. No one can predict the severity or duration of a new H1N1 outbreak—or, for that matter, the unfortunate communities it will hit hardest. If we're lucky, it will be a mild or moderate outbreak. Any flu outbreak, however, will pose a burden on schools, workplaces and communities since we also will be dealing with seasonal influenza. Preparation is key.

#### The Basics

##### What is pandemic flu?

A pandemic is a global disease outbreak. A flu pandemic occurs when a new virus emerges for which there is little or no immunity in the human population. Once international spread begins, pandemics are considered unstoppable, and even a mild pandemic flu can ultimately cause millions of deaths worldwide. Last June 2009, the World Health Organization declared that the new, H1N1 virus had become a pandemic flu. More than 70 countries and all 50 states have reported human cases of H1N1 flu.

##### What are the symptoms of pandemic flu?

The symptoms of the H1N1 flu are similar to seasonal flu:

- fever—usually over 100 F
- headache
- fatigue
- cough
- sore throat
- runny or stuffy nose
- muscle aches
- nausea, vomiting and diarrhea (for some people)

Most people who have become ill with the virus in the United States have had a mild illness and have recovered without medical treatment. But flu viruses are constantly changing, and little is certain about this new virus. The CDC believes the H1N1 virus could cause a number of illnesses and deaths during the yearly influenza season.

##### What makes H1N1 special?

It's new, so humans have no resistance to it. Pandemic flu strains are often new viruses that develop when an animal or bird virus mixes with a human virus.

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The H1N1 virus originally was referred to as “swine flu” because early laboratory tests showed that many of the genes in this virus were similar to those that infect pigs. It turns out that while the H1N1 strain has two genes from flu viruses that circulate in pigs in Europe and Asia, it also contains bird flu genes and human genes. H1N1 is now a human flu virus causing widespread illness.

### **Who is at risk and which groups of people may be hardest hit?**

Everyone is at risk of catching pandemic flu because there is little or no natural immunity to a new virus. During past pandemics, rates of illness reached 25 to 35 percent of the total population.

So far, the H1N1 virus has caused the most cases of flu in school-age children and young adults. As you know, there were outbreaks in many schools last spring. The age groups at greatest risk of infection and flu-related complications from the pandemic virus are not yet known. The CDC is conducting studies to see if some people might have natural immunity to this virus, depending on their age.

The CDC has identified populations that may have additional vulnerability. These include:

- pregnant women,
- people with chronic respiratory diseases such as asthma, and
- people with compromised immune systems.

### **How is influenza transmitted?**

Flu viruses are spread primarily by coughs and sneezes from a person infected with the virus. This happens when droplets from the infected person’s cough or sneeze travel through the air and make their way to the mouth or nose of someone nearby. Droplets may land directly on your nose or mouth, but more likely, they will settle on the hands of people who touch your hands. Or they will land on smooth surfaces you touch, like door handles, grab bars on buses, or desks. If you touch these surfaces within 24 to 48 hours, the virus will pass to your hand, and when you touch your face, nose or mouth, bingo—the virus gets into your bloodstream, where it begins reproducing.

Recent research indicates that influenza also may be an airborne disease. The virus may travel on small particles for longer distances through the air than previously believed.

### **Is there a vaccine to prevent H1N1 flu?**

The U.S. government is planning to purchase up to 600 million doses of vaccine for H1N1. However, not all the vaccine will be available at the onset of the influenza season in late October; in fact, the Food and Drug Administration (FDA) and the CDC estimate that only 15 million doses will be available by then. Therefore, the CDC is recommending that high-risk groups and children between the ages of 5 and 18 get priority for vaccination.

The CDC also recommends that, when supplies are adequate, everyone (unless advised not to by a physician) receive the H1N1 vaccination, as well as the vaccination for seasonal influenza. Vaccination for H1N1 will not convey immunity to the seasonal flu, and seasonal flu vaccine will not protect anyone against H1N1.

### **Preventive Treatment**

Two antiviral drugs may be prescribed by a doctor to lessen the severity of H1N1 flu or, possibly, to prevent it. These drugs must be started within 48 hours of the first symptoms:

- Oseltamivir (brand name Tamiflu ®), approved to both treat and prevent influenza A and B virus infections in people age 1 and older.

- Zanamivir (brand name Relenza ®), approved to treat influenza A and B virus infection in people age 7 and older, and to prevent influenza A and B virus infection in people age 5 and older.

The CDC recommends doctors prescribe these drugs only to people at high risk of severe complications associated with all influenza. These are older individuals, patients in hospitals and nursing homes, very young children, pregnant women, and people with chronic illnesses or suppressed immune systems due to treatment for HIV, cancer or other medical conditions.

### **How do I protect myself against pandemic influenza?**

Wash your hands.

- The best thing anyone can do to avoid a case of the flu—seasonal or pandemic—is to wash your hands. It sounds simple, but nearly obsessive hand washing dramatically reduces the spread of this airborne virus.
- Use warm or hot water if you can. Lather up, and rub not just your fingers and palms, but also under your fingernails, around your wrists and between your fingers, for as long as it takes to sing “Happy Birthday” twice. Then rinse.
- If you wash your hands in a public restroom, at school or elsewhere, try to use a paper towel or tissue on the door handle to keep your hands clean.

Cover your mouth when you cough or sneeze.

- Cover that cough! Cover that sneeze! A single sneeze expels 100,000 droplets into the air at a speed of 90 mph. Individual droplets land on door handles, walls, light switches and areas constantly touched by you and people you know.
- If you don’t have a tissue, experts recommend the classic shoulder or crook-of-the elbow sneeze—clothing will absorb more virus, and transfer less to others. Plus, flu viruses do not live long on porous surfaces like cloth. Wash your hands after you sneeze.

Surgical face masks were worn by many in Mexico and elsewhere last spring. But there is little evidence showing they prevent illness. The CDC does not recommend face masks for daily use for most people. The masks may prevent a sick person from spreading the virus to others. But there is little data showing that the masks prevent well people from getting sick.

Don’t touch your face.

- It’s really hard to keep your hands out of your eyes, nose and mouth, but these are the direct routes influenza viruses take to your bloodstream. Wash your hands before you touch your face.

Get a seasonal flu shot.

- It’s best to be as protected as possible against any type of influenza. Seasonal flu can still be serious—it kills an average of 36,000 people yearly.

Avoid sick people.

- It seems simple to avoid close contact with sick people, if they stay home. But in public places, you are likely to encounter people infected with pandemic flu who don’t know it. The virus is contagious for 24 to 48 hours before respiratory symptoms appear, so it can easily be passed along unknowingly. Frequent hand-washing and use of hand-sanitizer gels or wipes will reduce the amount of virus your hands pick up in public places.

In fact, avoid close contact with all people—during flu season.

- If pandemic flu is widespread in your area, you might want to practice “social distancing.” Social distancing means avoiding shaking hands when you meet someone, kissing friends, and joining crowds or large gatherings, such as concerts, church services or conferences. The CDC advises anyone at high risk of complications from flu to consider staying away from gatherings when flu is widespread.

If you can't avoid crowds, take precautions.

- For faculty and staff, large gatherings, and sporting events, may require your attendance. Assemblies are an excellent place for teachers, student leaders and school officials to reinforce the key messages needed to protect against flu: Cover your cough or sneeze. Wash your hands. If you are sick, stay home until you are well.
- Be aware that if you work with money in any setting, coins are a good transmission device for flu virus. Likewise, crowded transportation vehicles, such as subways, airplanes and school buses, increase your risk of exposure. A passenger sneezing into a crowded subway car can infect 150 people within five minutes.

If you get the flu, stay home.

- If you are sick, stay home. With the H1N1 flu, you need to stay home seven days after your respiratory symptoms appear. If you are still sick after seven days, then you need to stay home for 24 hours after all your symptoms disappear.
- If you are home sick, wash your hands after you use tissues so you don't reinfect everything and everyone you touch. Remember, no returning to work when you start to feel a little better. You can still infect others.

If you live with a sick person, take precautions.

- When your children are sick, it's pretty difficult to avoid being exposed to their droplets. Wash your hands often, particularly after handling their tissues, bedding, glasses or items they touch. Ask your doctor about taking an antiviral medication or any special precautions you need based on your medical history.
- Droplets can settle on objects like door knobs, light switches, windows, countertops, phones or toys. Flu viruses are easily transferred from a smooth surface, such as a TV remote, where they can live for 24 to 48 hours. A soft or porous surface like a towel is less effective in transferring virus, and the virus lives only eight to 12 hours on a porous surface.

Clean up after the flu.

- Washing smooth surfaces, household items, appliances and laundry with soap and water works well. An alcohol-based hand sanitizer could be wiped on surfaces and electronic items touched most by everyone in the house.
- A very weak disinfectant solution made from one tablespoon of chlorine bleach to a full quart of water and applied to high-traffic, smooth surfaces like the bathroom and kitchen sinks may reduce viral spread. After cleaning, leave the chlorinated water on the surface you are disinfecting for five minutes before rinsing or wiping with clean water. Wear gloves when using bleach. Don't breathe the fumes, and ventilate the area well.

## Special information for faculty and staff:

Know your campus' pandemic influenza policy. Your campus should have a plan that includes the following:

- A check list for early identification of students with active respiratory symptoms.
- A method for sending students with respiratory symptoms to the health center for assessment.
- A protocol for isolating sick students from the general campus community. This could include restricting students to their dorms or, if possible, having them travel home.
- A plan to communicate to the whole campus community about the need to stay at home when sick. With the H1N1 virus, the Centers for Disease Control and Prevention recommends those who are infected stay at home for seven days after the symptoms begin, and for 24 hours after all symptoms are gone.
- It's especially important that the union does not allow ANY incentives to encourage faculty and staff to work while sick or return to work while still contagious. Working sick is irresponsible and dangerous.
- An effective pandemic education program for the entire campus on how to avoid the flu. Posters, announcements, articles in school publications, and on the school Web site should feature "covering your cough and sneeze," and washing your hands at every opportunity. Hand washing should be incorporated into everyone's daily routines.
- Promotion of vaccinations against both seasonal flu and the H1N1 virus, when a vaccine becomes available—expected mid-October.

Stay in touch with your union leadership for advice on your campus' plan. The AFT will be posting other helpful tips during the flu season. You can download them at <http://www.aft.org/topics/h1n1>.

**For information on H1N1 Influenza,  
visit [www.aft.org/topics/h1n1](http://www.aft.org/topics/h1n1).**



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