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## ***Health Update***

### **H1N1 (Swine) Influenza in the Philadelphia Metropolitan Area May 6, 2009**

As of Wednesday, May 6<sup>th</sup> 2009 the Centers for Disease Control and Prevention (CDC) has reported a total of 642 confirmed cases of human swine influenza in the United States in 41 states. Included in this number are two deaths. The most recent death was in a 33-year-old woman who was in the third trimester of pregnancy (infant survived). This update provides information on local disease activity and selected recent guidance for the diagnosis and management of novel H1N1 influenza recently issued by the CDC. Further information is available at <http://www.cdc.gov/h1n1flu>, <http://www.state.pa.us> and <https://hip.phila.gov>.

- In Pennsylvania to date, one case has been confirmed and an additional 15 cases are 'probable' cases under investigation. Five of these probable cases are in Philadelphia residents, including one 8 year old child who likely acquired infection from a household visitor who had influenza-like illness upon returning from a trip to Mexico.
- Heightened surveillance for influenza-like illness in the Philadelphia area and around the country has identified that seasonal influenza strains (both H3N2 and H1N1 human strains) continue to circulate and likely still account for much acute febrile respiratory illness. In Philadelphia, nearly 25% of clinical specimens that have been submitted to the Pennsylvania Bureau of Labs for influenza detection since April 20, 2009 were positive for typical seasonal influenza strains.
- While the case count in Pennsylvania and Philadelphia remains relatively low, public health agencies will continue to investigate individual cases to ensure that containment measures are in place and identify epidemiological risk factors for infection. However as cases of novel H1N1 influenza increase, individual case identification will likely decrease and public health agency surveillance will focus on aggregate case counting and community-based control measures. ***At all times however, it is critical that individual healthcare providers counsel their patients with suspected influenza, regarding the necessity for home isolation and prudent home-based infection control measures.*** A fact sheet for patients is being distributed with this health update, and is also available at <https://hip.phila.gov>, along with other documents that are intended for the general public.
- CDC has issued revised guidance regarding schools (K-12) and childcare facilities that have cases of novel H1N1 influenza A infection ([http://www.cdc.gov/h1n1flu/K12\\_dismissal.htm](http://www.cdc.gov/h1n1flu/K12_dismissal.htm)):
  - School closure is not advised for a suspected or confirmed case of novel influenza A (H1N1) and, in general, is not advised unless there is a magnitude of faculty or student absenteeism that interferes with the school's ability to function.
  - Students, faculty, staff with influenza-like illness should stay home and not attend school or go into the community except to seek medical care for at last 7 days even if symptoms resolve sooner.

- Students, faculty and staff who appear to have influenza-like illness during the school day should be separated from others and sent home. Parents should monitor the health of their children closely and not send children to school who have symptoms of influenza.
- School communities should follow cough etiquette and respiratory hygiene practices, and wash hands frequently.
- CDC has issued revised guidance regarding the interpretation of rapid influenza test results ([www.cdc.gov/h1n1flu/guidance/rapid\\_testing.htm](http://www.cdc.gov/h1n1flu/guidance/rapid_testing.htm)):
  - For detection of seasonal influenza viruses, sensitivities of rapid diagnostic tests are approximately 50-70% when compared to viral culture or RT-PCR. Specificities of rapid diagnostic tests for influenza are approximately 90-95%.
  - Testing sensitivity may vary depending on the quality of the specimen and when during the course of illness the specimen was collected. Respiratory specimens for testing should be collected in the first 4-5 days of illness when viral shedding is greatest.
  - Sensitivity and specificity of these tests for the detection of the novel H1N1 virus are unknown.
  - A patient who tests positive for influenza B by rapid diagnostic test likely has been infected with seasonal influenza B virus that is continuing to circulate or is a false-positive result. Such a patient is unlikely to have novel H1N1 virus infection.
  - A patient who tests positive for influenza A by a rapid screening test has one of the following possibilities:
    - The patient may have novel H1N1 infection
    - The patient may have seasonal influenza A virus infection
    - The patient might have a false positive result.

Persons who test positive with rapid tests should be treated with antiviral medication, if clinically indicated. However additional testing with RT-PCR or viral culture is necessary to determine if the test reflects a true positive result and to determine the influenza sub-type. At the present time, PDPH advises that these additional tests be performed for individuals with a strong suspicion of novel H1N1 (swine) influenza or very severe disease.

- Novel H1N1 flu virus infection cannot be excluded when a patient tests negative for influenza A by a rapid antigen test. If the patient has an epidemiologic link to a confirmed case (i.e., had close contact with a confirmed case), or has either traveled to or resides in a community where there are one or more confirmed novel H1N1 cases, further testing and treatment should be based on clinical suspicion, severity of illness, and risk for complications. If there is no epidemiologic link and the patient has mild illness, further testing and treatment are not recommended.

# H1N1 (Swine) Flu: Caring for yourself or a family member



If you or someone in your home is sick with H1N1 (swine) flu, there are important things you can do to keep the infection from spreading to people in your house and others, and to feel better faster.

## **What is swine flu and how does it spread?**

The symptoms of H1N1 flu are like regular (seasonal) flu. It is spread from person to person in the same way: a person with the flu spreads the germ by cough or sneeze. The flu virus can also get on hands, and then spread to others who touch the same objects or surfaces. People who are sick can spread germs as early as 1 day before they feel sick, and up to 7 to 10 days afterwards.

## **What should you do if you might be sick with the H1N1 (swine) flu?**

- Stay home from work or school until you are well. Sick adults should not go out for 7 days after they first show symptoms. Sick children should not go out for 10 days after they first show symptoms.
- If you need to leave the house for medical care, make sure to cover your nose and mouth with a facemask, scarf or hankie. Do not take public transportation: have a friend or family member drive you or take a taxi.
- Cover coughs and sneezes. Wash your hands with soap and water or an alcohol-based hand rub.
- Throw away tissues and other disposable items in the trash. Wash your hands after touching them.
- Get lots of rest and drink lots of clear liquids.

## **What about medicines?**

- Certain over-the-counter drugs can be used to help the sick person feel better. These drugs will **not** prevent the flu from spreading. Fever and aches can be treated with acetaminophen (Tylenol<sup>®</sup>) or ibuprofen (Advil<sup>®</sup> or Motrin<sup>®</sup>). You should not give aspirin to children or teens. Over-the-counter cold and flu medicines can help with cough and congestion.
- The sick person or certain people in the house may be asked to take special medicines called antivirals (Tamiflu<sup>®</sup> or Relenza<sup>®</sup>) that you can only get with a prescription. The Health Department has information about antiviral medications. Be sure to take all the medicine as it was prescribed.
- There is no vaccine to prevent swine flu at this time.

## **How can I keep swine flu from spreading in my house?**

- Try to have only one adult be the caregiver for the ill person. It is best if that person is not pregnant, elderly, or someone with a chronic medical condition, since these people are at higher risk of getting the flu. Others in the household should try to avoid or have less contact with the sick person.
- Close contacts, especially caregivers, should consider wearing a facemask or respirator when they are close to the ill person.

- Try to have sick persons use their own bathroom. Clean this bathroom every day with a disinfectant or use a chlorine bleach solution made by adding 1 tablespoon of bleach to one quart (4 cups) of water.
- Keep the sick person in a room away from common areas of the house, and keep the door closed.
- Sick people should not have visitors while they have the flu. If anyone who does not live in the house must enter the home, they should try to avoid close contact with the ill person.

### **Are there special cleaning recommendations?**

- Use a regular household disinfectant that kills germs in the areas of the house that are frequently used. Clean frequently touched surfaces such as door knobs, bedside tables, bathroom surfaces, and children's toys.
- If surfaces are visibly dirty, use a regular household cleaner first, then a disinfectant. Read the label to be sure that the disinfectant kills viruses.
- Carefully wash any sheets, dishes and eating utensils used by the sick person with hot water and soap.
- If you are doing laundry for the sick person, try to avoid 'hugging' the laundry prior to washing it to prevent self-contamination. Clean hands right after handling dirty laundry.

### **What can household members do to stay healthy?**

- Everyone in the house should wash their hands often with soap and water, or with alcohol-based hand sanitizer. Hands should be washed after touching the sick person or objects they may have touched.
- Avoid sharing personal items such as toothbrushes, cups, eating utensils and towels with the ill person.
- Avoid close contact with the sick person. Try to stay at least 6 feet away. You may want to wear a facemask if you must be close. Facemasks and respirators can be purchased at most pharmacies and hardware stores.
- Close contacts, especially people living in the household, should monitor their own health for signs of the infection. Try to limit going out into the community. Call your doctor if anyone else in the house shows signs of flu.

### **What to do if your symptoms get worse?**

- Get medical care right away if you have difficulty breathing, chest pain, or any other medical emergency. If you dial 911, let the call taker know that you have flu symptoms, and let the ambulance crew know when they arrive.
- If your symptoms worsen, or do not improve after several days, you may need to see your doctor. Call your doctor's office before you arrive so that he or she knows you are coming and can make sure you are in a private room while you wait to see the doctor.

For more information, call your doctor or visit the following websites that have information about H1N1 (swine) flu: [www.cdc.gov](http://www.cdc.gov) or [www.phila.gov/health](http://www.phila.gov/health) or [www.state.pa.us](http://www.state.pa.us).