

PATIENT INFORMATION

Influenza

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The flu – every child seems to get it at some time or another. But what is the flu? Can it be prevented? Should my child get a flu shot?

INFLUENZA OR COLD?

Both the flu and colds are caused by viruses and share many symptoms, but there are differences. A child with a common cold usually has a lower fever, a runny nose and only a small amount of coughing. Children with the flu usually feel much sicker, achy and miserable. Also, the flu tends to strike more quickly than a cold. Stomach upsets and vomiting are more common with the flu than with a cold. Children who have colds usually have enough energy to play and keep up with their usual day-to-day routines. The flu, on the other hand, keeps most children in bed for several days.

WHAT IS THE FLU? People call many illnesses, “the flu”. Influenza is an illness caused by a virus. There are three different flu viruses, types A, B, and C. Types A (the most common) and B (usually milder) cause the usual epidemics of the flu. Flu viruses usually strike between December and early April. Because each of the types of flu virus has different strains, every year the flu is slightly different, and can infect people several times during their lifetime.

The flu can last a week or even longer. You feel the worst during the first 2 or 3 days and have any of the following symptoms:

- A sudden high fever
- Chills and shakes with the fever
- Extreme tiredness
- Headache and body aches
- Dry, hacking cough
- Sore throat
- Stuffy, runny noses

There are usually no serious complications from the flu; however an ear infection, a sinus infection or pneumonia may develop. Call the office if your child says that his ear hurts, his cough is getting worse after 4-5 days, or his fever last beyond 3-4 days.

HOW IS THE FLU SPREAD?

The flu is spread from person to person in the following ways:

- Direct hand-to-hand contact
- Indirect contact (for example, if your child touches an infected surface like a toy or door knob and then puts her hand to her own eyes, nose, or mouth)
- Virus droplets being passed through the air from coughing or sneezing.

The flu spreads very easily, especially in preschool and school-age children. The virus usually is transmitted in the first several days of the illness.

TREATMENT

In children older than 1 year of age, type A influenza can be treated with antiviral agents if given in the first day or two of the illness. This can speed recovery. Under some circumstances, antiviral

agents can be taken before exposure to the flu and can prevent illness. This is particularly important for children with serious problems who have not had the flu shot. **ANTIBIOTICS HAVE NO EFFECT ON VIRUSES, INCLUDING THE INFLUENZA VIRUS.** Extra bed rest, extra fluids, and light, easy-to-digest meals can also help your child feel better. If your child is uncomfortable because of fever, acetaminophen in proper doses for age and weight will help him feel better. Do not give aspirin to your child for the flu. An increased risk of developing Reye syndrome (an illness that can seriously affect the liver and the brain) is associated with aspirin use during bouts of the flu and many other diseases caused by viruses.

PREVENTION

Good hygiene is the best way to prevent the flu from spreading to other family members. If your child has the flu, the following will help prevent its spread:

- Teach your child to cover her mouth and nose with a tissue or her sleeve, but not with her hands, when coughing or sneezing.
- Make sure everyone washes their hand before and after being in public places.
- Wash dishes and utensils in hot, soapy water or in the dishwasher.
- Do not let children share pacifiers, cups, utensils, washcloths, or towels. Never share toothbrushes.
- Use disposable paper cups in the bathroom and kitchen.
- Disinfect. Viruses can live for more than 30 minutes on doorknobs, toilet handles, countertops, even on toys. Use a disinfectant or soap and hot water to keep these areas clean.
- Do not smoke around your child. Children who are exposed to tobacco smoke cough and wheeze more and have a harder time getting over the flu.

INFLUENZA VACCINE

There are safe and effective vaccines to protect against the flu. They are specifically recommended for children with the following.

- Heart disease
- Lung disease, including asthma
- Immune problems, such as human immunodeficiency virus (HIV) infection
- Cancer
- Chronic kidney disease
- Metabolic diseases, such as diabetes
- Long-term aspirin therapy, such as with rheumatoid arthritis
- Children 6-23 months should have a flu shot each fall, as should everyone in that household.

For children younger than 9 years of age, the vaccine requires two injections, given 1 month apart the first year it is given. Then only one dose is needed. The best time to get the flu vaccine is in October to early December before the flu season starts.

Because the strains of flu are different every year, a new flu vaccine is developed each year as well. The vaccine is made from killed flu viruses and helps the immune system fight the flu. Most children are immune within 2 weeks of getting the vaccine. Side effects are almost always minor and may include soreness at the site of the injection and a low grade fever. The flu shot cannot cause influenza.

Important note: Even though there are few side effects to the vaccine, production of the vaccine involves the use of eggs. If your child has had a serious allergic reaction to eggs or egg products, he

should be skin tested before getting the vaccine. If skin testing confirms, hypersensitivity, the vaccine usually should not be given.

WHEN TO CALL THE PEDIATRICIAN:

If your child experiences any of the following

- Blue lips or nails
- Difficulty breathing
- A cough that just will not go away (for more than 1 week), or worsens
- Pain in the ear
- Continues or new onset of fever after 3 to 4 days of illness