

2-22-13 Is it the flu and what to do?

While influenza, otherwise known as the flu, is now somewhat on the wane, it has not left and it is not too late to be vaccinated for this illness. It usually persists through March and if you have chronic diseases such as diabetes, congestive heart failure or asthma, or are over the age of 65 or are very young, say, under six years old, or are pregnant, then you are at greater risk for serious complications of the flu.

If you have not personally been touched by one of those “serious complications”, then it is easy to forget the potential of this virus. According to CDC (Centers for Disease Control and Prevention), each year more than 200,000 people in the U.S.A. are hospitalized with influenza and the death rates vary from year to year, between 3,000 and 49,000.

With an illness that serious, we might as well understand it with some accuracy and not confuse it or blend it with other illnesses. I was recently reminded of the common misunderstanding that a “stomach bug” is the “stomach flu”. I was visiting a friend when she told me her husband was in bed with the stomach flu. I couldn’t help it; I had to tell her that it was unlikely that he had the flu. Did he have muscle aches? No. A headache? Well, no not really, just from the vomiting. Did he have a fever? No. Was he coughing? No. So, the main symptom is that he is throwing up? Yes. Then he does have a stomach bug but not the flu; the flu is a respiratory illness accompanied by muscle aches, usually a fever, but rarely vomiting. In fact, we were always taught that vomiting did not accompany the flu. That changed with H1N1, when vomiting, especially with children, was added to the list of symptoms, as a possibility.

She was accepting of this idea but supposed I might not want to stay because her husband was in bed with this illness. (Now, mind you, her husband was in the master bedroom, which has its own bathroom.) She seemed a bit surprised when I said that I did not mind but I added that I was going to be careful to avoid touching things. She wanted to know what I meant.

I explained that, in the case of the flu, the virus doesn’t just float around in the air, to be breathed in later by others. The germs are coughed out in heavy droplets where they soon hit the floor. If the sick people were not careful to use cough etiquette, by coughing into their elbow and washing hands frequently, then items they touch such as door knobs do, for a while become repositories for germs.

In the case of her husband, he had some sort of “stomach bug”, possibly the norovirus, a highly contagious intestinal virus that begins to multiply within your gut with only a few particles to start. Where are these particles picked up? For the most part, the norovirus is spread by insufficiently washed hands leaving the germs on surfaces, where they are touched by another. That other person, whose hands have just become contaminated, goes on to scratch his nose or begins to prepare food without washing his hands and then the food he touches becomes

a vehicle, delivering the virus into the stomach of whoever eats that food. These germs are invisible and their favorite environment for growth is exactly what we provide: dark, moist and warm, in fact 98.6 suits them just fine!

You can see how even when we know just what we have, a stomach bug or the respiratory illness of influenza, the prevention of spread to others, is pretty much the same. Cough etiquette: don't cough into hands, cough into the elbow and away from people. Wash hands frequently and sufficiently, especially after coughing and use of the bathroom. Sanitize frequently touched surfaces such as doorknobs, faucets and phones when a household has a sick person and in places frequented by the public. Three examples of places where hygiene might not be the best and, therefore, could use extra sanitizing of surfaces are at the two ends of the age spectrum: childcare settings, homes of the elderly and health care settings because there are sick people who are having difficulty taking care of themselves and the staff may be insufficient and pressed for time.

After hand washing and sanitizing, use of barriers also prevent the spread of disease. If working close to someone with the flu and you are not vaccinated, use a face mask. If you can keep your distance, more than four feet, you don't need a mask. If someone in the house has the "stomach bug", using gloves (on washed hands) for food preparation, especially those foods that are ready to eat, will go a long way to prevent the spread of that illness.

For the flu and more, these universal precautions are the thing to do, to protect your loved ones and you!

Cathleen Drinan is the health agent for Halifax, MA. She can be reached at 781 293 6768 or cdrinan@town.halifax.ma.us