

Influenza

[VIDEO TRANSCRIPT]

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Hello my name is doctor Anne Dabrow Woods and I am the chief nurse of Wolters Kluwer and this is from the desk of the chief nurse. Today we're going to talk about influenza, or the flu as it is commonly known and it certainly is a problem not only in the United States but globally today. Well what is the flu? The flu is defined as a contagious respiratory illness that comes on suddenly and is caused by the Influenza virus. It normally affects the nose, the throat, and sometimes the lungs and the most common signs and symptoms you're gonna see in a patient who has a flu is going to be chills, cough, sore throat, rhinorrhea, muscle aches, headache, fatigue and sometimes vomiting. But vomiting is more likely to occur in children but it also can occur in adults as well. Now let's talk about fever for a second. So fever does not always have to occur with the flu. Some people never spike a fever but fever is commonly seen in patients who have the flu. The thing to remember with the flu is that symptoms can be very very mild to moderate to very severe and the flu can even cause death so it's something that we need to take very very seriously. So how is the flu spread? The flu is spread by droplet transmission and what that means is that when a person coughs, sneezes or even talks, they can spray droplets of the flu virus out and they can land on other people and it can land on other surfaces. Now when is a person contagious? You are contagious up to three to four days after you become sick with the flu. Some people actually can affect others 24 hours before they even show signs of having the flu at all. So that's really important to think about. Commonly the flu lasts about five to seven days. The average onset of symptoms is going to be within 48 hours of being exposed to the flu virus but in some people they can be affected within the first 24 hours and up to four days after exposure. So who's at risk for developing the flu? Well the frank truth is everyone's at risk. We see the people who are most at risk are those that are very young



and those who are older, and when I mean older it's those over the age of 65 years of age. Patients who have asthma, chronic obstructive pulmonary disease, heart disease and diabetes are also at risk. And we do know that pregnant women are also at risk of developing the flu. Complications can occur due to the flu virus infection and they include such things as a secondary bacterial pneumonia, otitis media, sinusitis, a worsening of chronic conditions such as asthma, COPD, heart failure, and diabetes. So how do we actually diagnose the flu in a person who presents with symptoms? There are two tests that are most commonly used and the first test is the rapid influenza diagnostic test. The great thing about this test is that you can get results back within 10 to 15 minutes. However, I caution you sometimes this test can deliver a false negative. What that means is the person can truly have the flu but the test is going to show that they don't. There's another test that is commonly used and that's a rapid molecular assay and you can receive results back on that test within 15 to 20 minutes and it's actually more accurate than the rapid influenza diagnostic test. So how do we treat a person with the flu? Well the key thing is, first we have to have early recognition, spot that the person does have the flu, and then we need to get them treated very quickly with antiviral medications. And antiviral medications work best if they are started within one to two days of symptom onset. What do these drugs do? They actually decrease the risk of complications of the flu and they will actually shorten the flu duration by one to two days. There are three drugs that are commonly used to combat flu. Tamiflu is available in a liquid form as well as in a pill form. For a person who's diagnosed with the flu the dose is 75 milligrams twice a day for five days. If a person is exposed to another who has the flu virus, the dose is 75 milligrams once a day for 10 days. The great thing about Tamiflu is that is can be used in children who over two weeks of age and that dosing needs to be adjusted based on their weight. And we also need to remember that the dose of Tamiflu will need to be adjusted if the patient has renal impairment and the other thing to recognize is that Tamiflu is safe to use in pregnant women. One of the other drugs we see used for the flu is Relenza and Relenza is a nasally inhaled medication. Now the problem with Relenza we need to be very careful with it that it's not used in patients who have asthma or COPD. There's one other drug that's available to us in



treating the flu symptoms and that's Rapivab and Rapivab is given as an intravenous infusion and it takes 15 to 30 minutes to complete that infusion. So that would certainly be given in an inpatient hospital setting. What can we do to prevent the flu? There are two things that you can do right off the bat that will help. Number one, get the flu vaccine. Not only are you protecting yourself but you're protecting others as well. And secondly, make sure that you're using good hand washing technique and when you cough or you sneeze cover your mouth. Remember that the flu strain we're seeing today is the h3n2 strain which is associated with higher hospital admission rates as well as deaths. So it's really important that when we see this patient who is ill and appears to have the flu that we have early diagnosis and get them treated the way they need to be treated. Flu is a very serious business and here at Wolters Kluwer we have provided many resources for you that will help update your practice on how to manage patients who have the flu. Thank you very much.

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