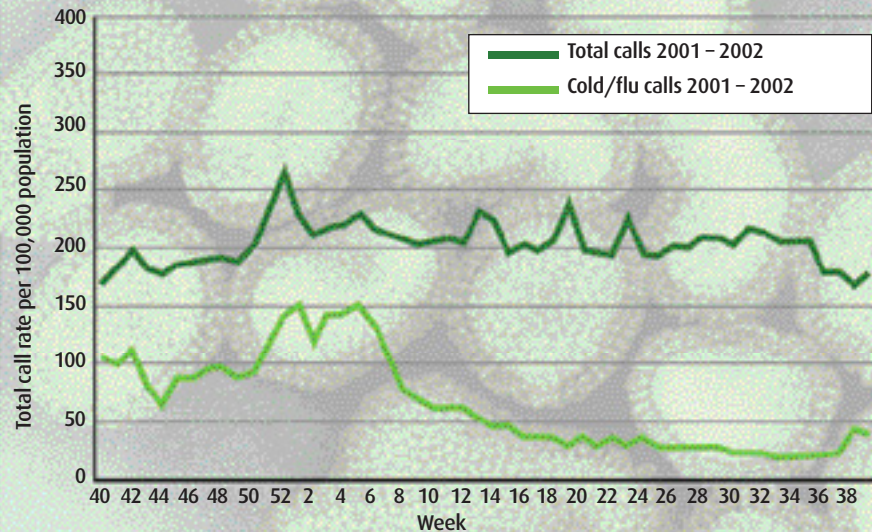


What you need to know about...

INFLUENZA

Graph showing NHS Direct's total call rate and the proportion of calls concerning colds/flu (2001–2002), against a background of the flu virus



Health Protection Agency

WHAT IS IT?

- Influenza, or flu, is caused by the influenza virus.
- The influenza virus was first identified in 1933.
- There are two main types: influenza A and influenza B.
- Influenza A usually causes a more severe illness than influenza B.

SIGNS AND SYMPTOMS

There is sudden onset of symptoms. These include:

- Fever;
- Headache;
- Tiredness;
- Dry cough;
- Sore throat;
- Nasal congestion;
- Aches and pains.

TRANSMISSION

- Flu is spread from person to person by droplet infection dispersed by coughing, sneezing or talking.
- A single infected person can transmit the virus to a large number of susceptible individuals.

TREATMENT

- Rest.
- Drink plenty of liquids.
- Paracetamol or aspirin.
- Chlorpheniramine at night for congestion.
- Pseudoephedrine (if not hypertensive) for nasal congestion.
- Steam inhalations.
- Saline nose drops for babies (Johnson et al, 2003).
- Antiviral medicines are available on prescription and should be started within 48 hours of the onset of symptoms. They are not a substitute for immunisation (National Institute for Clinical Excellence, 2001).

INFLUENZA IMMUNISATION

- Each autumn, there is a national campaign offering flu vaccination to people who are at risk of serious illness should they catch flu. These include all patients who:
 - Are over 65 years old;
 - Have chronic respiratory disease;
 - Have chronic heart disease;
 - Have chronic renal failure;
 - Have diabetes mellitus;
 - Have suppressed immunity.
- Since 2000 flu vaccination has also been offered to all health care workers as a means of protecting patients from nosocomial infection (Harrison and Abbott, 2002).

IMMUNISATION COMPOSITION

- On 14 March 2003, the World Health Organization announced the composition of the 2003–2004 (Northern Hemisphere winter) immunisation. The vaccine will contain:
 - An A/New Caledonia/20/99 (H1N1)-like virus;
 - An A/Moscow/10/99 (H3N2)-like virus (the widely used vaccine strain is A/Panama/2007/99);
 - A B/Hong Kong/330/2001 – a B Victoria-like virus;
 - The H1N1 and H3N2 components are unchanged and are considered to provide good protection against the new influenza A H1N2 subtype.

COMPLICATIONS

- Most people who get flu will recover in one to two weeks, but some people will develop life-threatening complications.
- Pneumonia, bronchitis, sinus and ear infections can all be complications from flu.
- Flu infection can make chronic health problems worse.

DIFFERENTIAL DIAGNOSIS

- Mastitis in breastfeeding women even with only minimal symptoms.
- Malaria, especially with overseas travel in the last year.
- Meningitis, tell patients to return if symptoms worsen.

REFERENCES

Harrison, J., Abbott, P. (2002) Vaccination against influenza: UK health care workers not on-message. *Occupational Medicine (London)*; 52: 5, 277–279.

Johnson, G. et al (2003) *The Minor Illness Manual*. Abingdon: Radcliffe Medical Press.

National Institute for Clinical Excellence (2001) Final scope for appraisal of amantadine, oseltamivir and review of zanamavir in the treatment and prevention of influenza. From: www.nice.org.uk/advanced-search

WEBSITES

Health Protection Agency: www.hpa.org.uk/infections

The information given serves as a general reference. Nurses should consult their individual trust policies on clinical procedures.