What is swine flu?

Swine influenza is a disease in pigs. The virus currently transmitting among people is now generally referred to as swine flu, although the origin of the disease is still under investigation. There is no evidence of this strain of the disease circulating in pigs in the UK.

There are regular outbreaks of swine influenza in pigs worldwide. It does not normally infect humans, although this occasionally does occur - usually in people who have had close contact with pigs.

Swine influenza viruses are usually of the H1N1 subtype. The swine flu that has spread to humans is a version of this virus.

Why is swine flu affecting humans?

Because the swine flu virus has mutated (changed) and is now able to infect humans and transmit between them.

Which people are most vulnerable from swine flu?

Those who are more at risk from becoming seriously ill with swine flu are:

- people with chronic lung disease, including people who have had drug treatment for their asthma within the past three years,
- people with chronic heart disease,
- people with chronic kidney disease,
- people with chronic liver disease,
- people with chronic neurological disease (neurological disorders include motor neurone disease, Parkinson's disease and multiple sclerosis),
- people with suppressed immune systems (whether caused by disease or treatment),
- people with diabetes,
- pregnant women,
- people aged 65 years and older, and
- young children under five years old.

How is swine flu infection diagnosed?

There is now a new self-care service, called the National Pandemic Flu Service, which allows people to check their condition online www.pandemicflu.direct.gov.uk or over the telephone (0800 1 513 100 or textphone 0800 1 513 200) and obtain antiviral medication if swine flu is confirmed.

The following people should call their GP directly for an assessment of their symptoms and a diagnosis:

- those with a serious underlying illness,
- pregnant women,
- those who have a sick child under one year of age,
- those with a condition that suddenly gets much worse, or
- those with a condition that is still getting worse after seven days (five for a child).
Is the new swine flu virus contagious?

The Health Protection Agency (HPA) says the new swine flu virus is highly contagious and is spreading from person to person.

Swine flu spreads in the same way as ordinary colds and flu. The virus is spread through the droplets that come out of the nose or mouth when someone coughs or sneezes.

If someone coughs or sneezes and they do not cover it, those droplets can spread about one metre (3ft). If you are very close to the person you might breathe them in.

Or, if someone coughs or sneezes into their hand, those droplets and the virus within them are easily transferred to surfaces that the person touches, such as door handles, hand rails, telephones and keyboards. If you touch these surfaces and touch your face, the virus can enter your system, and you can become infected.

How long does the virus live on surfaces?

The flu virus can live on a hard surface for up to 24 hours, and a soft surface for around 20 minutes.

What is the incubation period for swine flu?

According to the Health Protection Agency, the incubation period for swine flu (time between infection and appearance of symptoms) can be up to seven days, but is most likely to be between two and five days. It is, however, too early to be able to provide details on virus characteristics, including incubation period, with absolute certainty at this time.

When are people most infectious?

People are most infectious to others soon after they develop symptoms, although they continue to shed the virus (for example, in coughs and sneezes) for up to five days (seven days in children). People become less infectious as their symptoms subside, and once their symptoms are gone, they are no longer considered infectious to others.

How quickly is swine flu spreading?

Swine flu is now widespread in the UK and spreading rapidly. The number of new cases in the UK is doubling every seven days. Most of these are because people are catching swine flu in their local community and not as the result of foreign travel.

Should I avoid contact with people suspected of having swine flu?

All suspected cases who have swine flu symptoms will have been asked to self-isolate at home and restrict their contact with people. The vast majority of people should go about their normal activities, including going to school or work. This includes children who attend a school with a confirmed case of swine flu.

There is no need on risk grounds to avoid contact with people who might simply have come into contact with those having the illness, such as the parents of children at schools with a confirmed case but who are not themselves ill.
How dangerous is it?

It is difficult to judge this at the moment. While there have been deaths, symptoms exhibited by most infected people have not been severe.

It appears that early doses of antiviral medicines such as Tamiflu are effective in helping people to recover. In the UK we have enough antivirals to treat half the population if they were to become ill. Also, orders of Tamiflu have been placed to increase UK supplies to 50m doses, enough to treat 80% of the population.

What are the symptoms of swine flu?

The symptoms of swine flu in people are expected to be similar to the symptoms of regular human seasonal flu and include fever (a high body temperature of 38C/100.4F or over), fatigue, lack of appetite and coughing. Some people with swine flu have also reported runny nose, sore throat, nausea, vomiting and diarrhoea.

How long are symptoms expected to last?

As with any sort of influenza, the severity and duration of symptoms will vary depending on treatment and individual circumstances. Most cases reported in the UK to date have been relatively mild, with those affected starting to recover within a week.

How does swine flu cause death?

Like any other type of flu, people can die from swine flu if they develop complications, like pneumonia.

Has the swine flu virus developed resistance to Tamiflu?

Not at the moment. Routine sampling of the virus in the UK has shown that there is currently no resistance to either Tamiflu or Relenza.

One flu H1N1 virus strain showing Tamiflu resistance was reported in a patient in Denmark who had received treatment - however, Tamiflu resistance in individual patients does occur in a low percentage of cases and is of limited public significance. The Health Protection Agency is monitoring whether such viruses are being transmitted from person to person.

Will the swine flu virus become resistant to antivirals in the future?

It is possible. The virus may mutate (change) and become less susceptible or resistant to the antiviral drug, and then spread from person to person. If the virus does develop resistance, it’s more likely to be to Tamiflu, the main antiviral treatment. If this happens, the government has a stockpile of Relenza that could be used instead.

Should we expect a more severe second wave of the pandemic in the winter?

Features of previous flu pandemics suggest that the current viral strain will become even more widespread in the autumn or winter, causing more illness and death. It is possible that the virus will mutate (change) into a more potent strain.
Should I go to work or school if I have been in contact with someone who I know has swine flu?

Yes, as long as you do not have flu-like symptoms. If you are feeling well, you should go about your normal activities, including going to school or work.

It can take up to seven days (normally two to five days) after infection for swine flu symptoms to develop. If you develop symptoms, stay at home and follow the general advice.

Is it possible to catch swine flu twice?

Yes, because the virus can mutate (change). If you become infected with the swine flu virus, your body produces antibodies against it, which will recognise and fight off the virus if the body ever encounters it again. However, if the virus mutates, your immune system may not recognise this different strain and you may become ill again, although you may have some 'cross protection' due to encountering a similar virus previously.

Should I have a 'swine flu party' or try and catch swine flu now, so I will be immune to more serious strains that may emerge later?

No – it is irresponsible to purposefully catch the virus as you may perpetuate the spread. Also, as we don't yet know the profile of the virus, it is too soon to assume it is only a mild infection. And catching swine flu will not necessarily protect you from strains that may emerge later.

Can my pet catch swine flu?

There is currently no evidence that pets are susceptible to this new strain of flu. The swine flu virus appears to be passing only from person to person or from human to swine. In general, flu viruses commonly infect just one species; for example, dogs and cats do not get seasonal flu from their owners.

What is the National Pandemic Flu Service and how does it work?

The National Pandemic Flu Service is a new self-care service that will give people with swine flu symptoms fast access to information and antivirals.

It is a dedicated website www.pandemicflu.direct.gov.uk and a phoneline (0800 1 513 100 or textphone 0800 1 513 200) for people to get information, check their symptoms and get a unique number that will give them access to antivirals if necessary.

When you are given your unique access number, you will be told where your nearest antiviral collection point is. You should then ask a flu friend - a healthy friend or relative - to go and pick up the antiviral medication.

If you think you have swine flu, do not go out to your GP or A&E.
What documents are needed to be able to collect the antivirals?

The flu friend must show their own ID as well as that of the patient. The authorisation number and ID information will be checked to ensure it matches the information provided when the assessment of symptoms was completed.

The ID includes:

- a utility bill,
- passport,
- a credit or debit card,
- driving licence, or
- NHS card.

Why has the government brought in this new service?

This new service will free up GPs, enabling them to deal with other illnesses that need their urgent attention.

Do I use the National Pandemic Flu Service if I'm in a high-risk group?

You should contact your doctor directly rather than using the National Pandemic Flu Service if:

- you have a serious underlying illness,
- you are pregnant,
- you have a sick child under one year of age,
- your condition suddenly gets much worse, or
- your condition is still getting worse after seven days (five for a child).

How well trained are the Flu Service staff?

Experienced call operators have been trained for a minimum of three hours. Less experienced call operators have received one day's training. Agents are not medically trained and will not be able to answer any other questions, but they will be supported by healthcare professionals.

There will be NHS Direct trainers present in each call centre for the first two days. There will not be healthcare workers in attendance. Call centre managers will be able to contact the National Pandemic Flu Service clinical on-call desk with urgent issues.

Doctors from the Royal College of GPs will have a special liaison role with each of these call centres and will feed back problems or concerns that arise during the operation of the service.

Strict industry standard regulations are in place when employing staff. These include the right to work in the UK (therefore no illegal immigrants), satisfactory employment references and satisfactory character references.

A wide range of people are being recruited from all round the country and all are required to be able to speak English.

Will the algorithm distinguish between swine and other flu?

Taken from NHS Choices 03.08.09
The algorithm is designed to identify cases of swine flu. However, the symptoms of seasonal flu are very similar and therefore there is likely to be some overlap with other circulating flu cases. As swine flu becomes more common, a higher proportion of influenza-like illness will be swine flu.

How will the government stop people fraudulently getting Tamiflu?

The government is relying on the public to be responsible in using the system. There is no need to jump the queue, because there is more than enough Tamiflu for everyone likely to catch the virus in the months ahead. Nor is there any need to buy Tamiflu from someone who has obtained it under false pretences, as anyone who needs it will be supplied free of charge.

What can I do?

You can reduce, but not eliminate, the risk of catching or spreading swine flu by:

- Always covering your nose and mouth with a tissue when coughing or sneezing.
- Disposing of dirty tissues promptly and carefully.
- Maintaining good basic hygiene, for example washing hands frequently with soap and warm water to reduce the spread of the virus from your hands to face, or to other people.
- Cleaning hard surfaces, such as door handles, frequently using a normal cleaning product.

You should also prepare now by:

- **Confirming a network of ‘flu friends’** – friends and relatives – who could help you if you fall ill. They could collect medicines and other supplies for you so you do not have to leave home and possibly spread the virus.
- **Knowing your NHS number and those of other family members** and keeping them in a safe place. It is not essential to have your NHS number in order to receive treatment, but it can help NHS staff to find your health records. You will be able to find your NHS Number on your medical card or other items such as prescribed medication, GP letter or hospital appointment card/letter.
- **Making sure you have a thermometer and adequate quantities of cold and cough remedies** in your medicine cupboard in case you or your family are affected by swine flu.

Are alcohol handrubs better than soap and water?

Both alcohol handrubs and washing with soap and water are important in minimising the risk of spreading swine flu - they both deactivate the flu virus. Alcohol handrub can only be used on visibly clean hands; if hands are dirty, soap and water should be used. Handrubs are useful where there is no easy access to a place to wash and dry your hands.

Who should be wearing a facemask?

The Health Protection Agency (HPA) recommends that healthcare workers should wear a facemask if they come into close contact with a person with symptoms (within one metre) to reduce their risk of catching the virus from patients.
However, the HPA does not recommend that healthy people wear facemasks to go about their everyday business.

**Why shouldn't the general public wear facemasks?**

Because the available scientific evidence does not suggest that this is an effective preventative measure.

The virus is spread by picking up the virus from touching infected surfaces, or by someone coughing or sneezing at very close range – so unless you are standing close to someone with the virus, wearing a facemask will not make a difference.

There are concerns about the risks posed by not using facemasks correctly.

Facemasks must be changed regularly as they are less effective when dampened by a person’s breath. People may infect themselves if they touch the outer surface of their mask, or may infect others by not disposing of old masks safely.

Finally, wearing a facemask may encourage complacency. People need to focus on good hand hygiene, staying at home if they are feeling unwell, and covering their mouth when they cough or sneeze.

**So why have other countries gone down this route?**

This is an issue which each government has considered separately. France is encouraging the general public to buy their own masks for use as a precaution, but it is not stockpiling masks centrally from government funds and neither is the US.

In other countries there is an existing culture of wearing facemasks for either the prevention of spreading illness or preventing the risks of pollution; this is not the case in the UK.

**What should I do if I think I’m infected?**

If you have flu-like symptoms and are concerned that you may have swine flu:

- Stay at home, read up on swine flu symptoms and check your condition using the National Pandemic Flu Service.
- Call your GP directly if:
  - you have a serious underlying illness,
  - you are pregnant,
  - you have a sick child under one year old,
  - your condition **suddenly** gets much worse, or
  - your condition is still getting worse after seven days (five for a child).

The National Pandemic Flu Service is a new online service that will assess your symptoms and, if required, provide an authorisation number which can be used to collect antiviral medication from a local collection point. For those who do not have internet access, the same service can be accessed by telephone on:

- Telephone: 0800 1 513 100
- Minicom: 0800 1 513 200
If swine flu is confirmed, ask a healthy relative or friend to pick up your antiviral medication for you.

In the meantime, take paracetamol-based cold remedies to reduce fever and other symptoms, drink plenty of fluids and get lots of rest.

Do not go into your GP surgery, or to a hospital, as you may spread the disease to others.

**If I have been in close contact with an infected person, do I need treatment?**

You only need antiviral treatment if you have been diagnosed with swine flu or if a doctor decides that you are at serious risk of developing severe illness.

**Is swine flu treatable?**

Testing has shown that the swine flu can be treated with the antiviral medicines oseltamivir (brand name Tamiflu) and zanamivir (Relenza). However, the drugs must be administered at an early stage to be effective.

The UK already has a stockpile of antivirals sufficient to treat half the population. Also, orders of Tamiflu have been placed to increase UK supplies to 50m doses, enough to treat 80% of the population.

**What do antivirals do?**

Antivirals are not a cure, but they help you to recover by:

- relieving some of the symptoms,
- reducing the length of time you are ill by around one day, and
- reducing the potential for serious complications, such as pneumonia.

**How large is the UK’s stockpile of antivirals?**

The government has 23 million treatments of Tamiflu and 10.5 million treatments of Relenza. Orders of Tamiflu have been placed to increase UK supplies to 50m doses, enough to treat 80% of the population.

**Is one of the antivirals more appropriate for pregnant women and people with certain kidney conditions?**

Relenza is an inhaled drug that will be used for pregnant women and people with certain kidney conditions who are unable to take Tamiflu.

**Will antivirals be given to people without flu symptoms?**

In most cases, no. Antivirals will generally only be given to people who have been diagnosed with swine flu.

Doctors should not offer antiviral medication as prophylaxis (prevention) to contacts of cases unless, for example, a household member has serious underlying health problems or there are other special circumstances.

Taken from NHS Choices 03.08.09
Will my child experience nausea if they take Tamiflu?

As is the case with many medicines, nausea is a known side effect of Tamiflu, in a small number of cases. Symptoms may lessen over the course of the treatment. It may help to take Tamiflu either with or immediately after food, and drinking some water may also lessen any feelings of nausea.

How are those with confirmed swine flu getting access to antivirals?

If antivirals are required, the National Pandemic Flu Service will provide you with an authorisation number which can be used to collect antiviral medication from a local collection point or, if you are in a high-risk group, your GP will advise you over the phone on how to collect your antivirals.

A healthy friend or relative can then pick up the antivirals for you from your local collection centre - usually a pharmacy or community centre.

Should people be stockpiling their own antivirals?

No. The government has a stockpile of antivirals sufficient to treat half the population, and is taking steps to increase this to cover 80% as an extra precaution. Therefore, antivirals should be available for everyone who gets ill in the pandemic and there is no need for people to buy their own.

Does Tamiflu go out of date?

The government has a programme to replace any expired doses under a ‘rolling stock’ system.

If I take an antiviral and have side effects, whom should I inform?

First, see your healthcare professional to check that you are ok. Then, report your suspected drug reaction to the Medicines and Healthcare products Regulatory Agency (MHRA) via their new online system.

This new webpage, based on the Yellow Card Scheme, helps the MHRA to monitor the safety of Tamiflu and Relenza.

Anyone who does not have access to the internet can ask their healthcare provider to send a report on their behalf.

When will there be a vaccine?

Vaccines are complex and difficult to manufacture in large numbers. However, the Government has already signed contracts to get enough vaccine for the entire country as soon as it is available.

While the first batches of vaccine will start to arrive in the autumn it will take several months to get enough vaccine for everyone. It will also take time to fully test the vaccine and to organise the vaccination of everyone in the country.

To reduce the impact of swine flu, the NHS is focusing on those at the greatest risk first
Why does it take several months to produce a swine flu vaccine?

The flu vaccine production process is long and complicated. Production technology is labour-intensive. The government's plans include two manufacturers, thus maximising chances of early development.

If other countries are also being given advance supply guarantees, will we get ours first?

The UK has a binding contractual agreement in place to ensure its supply.

Does the current seasonal flu vaccine work?

The current seasonal flu vaccine is designed to protect against H1N1, but it is unclear as yet whether this will offer any protection against the current strain of swine flu.

How many stocks are available of seasonal vaccine?

Flu vaccine is produced each year for the seasonal flu. Discussions are ongoing with manufacturers about how much may still be available. However, the government has determined that there are 430,000 doses of vaccine available in the UK.

Who will be a priority for vaccination with the H1N1 swine flu vaccine?

The Joint Committee on Vaccination and Immunisation has previously advised that the priority groups in relation to H5N1 (the bird flu vaccine) should be assumed to be:

- frontline health and social care workers (to help ensure the NHS functions well),
- older people and those in clinical risk groups, as flu can be more serious in these groups, and
- under-16s, as protecting children can slow the spread of the virus in the population.

The priority groups would be reviewed in light of evidence on the virulence and severity of the new virus in different groups.

The government will still aim to achieve universal vaccination, but because the vaccine will have to be delivered over time, it is right that we start thinking now about groups to be prioritised.

Will the vaccine still provide people with protection if the swine flu virus mutates between now and the autumn?

At this stage, it is impossible to predict if or how the H1N1 swine flu virus will mutate (change). However, experiences with the H5N1 vaccine (bird flu vaccine) would suggest that an H1N1 vaccine (produced using the same processes) would also provide a high level of immunity against closely related strains. The level of cross-protection is expected to be greatest for more closely related strains.
Does the NHS have enough syringes to administer the swine flu vaccine?

Yes, orders have been placed to ensure there are enough syringes to administer the vaccine.

What extra antibiotics have been purchased?

Orders have been placed for 15.2m courses of antibiotics. They will play an important part in the response to the pandemic.

Why do you need antibiotics in a pandemic?

While antivirals may reduce the number of complications, there are still likely to be significant numbers of complications occurring in the pandemic. Some of the most common include bacterial infections in the respiratory tract and lungs, such as pneumonia. Antibiotics are needed to treat such complications.

Antibiotics will be used to treat people in the community if they develop complications. In hospitals, antibiotics will be used to treat the sickest patients and may reduce the length of hospitalisation.

Are pregnant women more likely to catch swine flu?

Yes. Pregnant women are more susceptible to all infections, because their immune system is naturally suppressed in pregnancy. They are especially vulnerable to swine flu, as this virus is affecting younger age groups in particular.

Does swine flu pose special risks in pregnant women?

Most pregnant women with swine flu will only have mild symptoms like most other people with swine flu. However, pregnant women have an increased risk of complications from any type of flu, because their immune system is naturally suppressed in pregnancy. Possible complications are pneumonia (an infection of the lungs), difficulty breathing and dehydration, which are more likely to happen in the second and third trimester.

There is a small chance that these complications will lead to premature labour or miscarriage. There is not yet enough information to know precisely how likely these birth risks are.

What special precautions can pregnant women take?

If you are pregnant, you can reduce your risk of infection by avoiding unnecessary travel and avoiding crowds where possible. Pregnant women should also follow the general hygiene advice.

If a family member or other close contact has swine flu, your doctor may prescribe you antiviral medication (usually Relenza) as a preventative (prophylactic) measure. Relenza is taken through an inhaler rather than a tablet. This means it builds up in your throat and lungs but not in your blood or placenta and should not affect your baby.
If you think that you may have swine flu, call your doctor for an assessment immediately. If your doctor confirms swine flu over the phone, you will be prescribed antiviral medication to take as soon as possible.

Unless you have swine flu symptoms, carry on attending your antenatal appointments so you can monitor the progress of your pregnancy.

**Can I take antiviral drugs if I am pregnant?**

Yes, on the advice of a doctor. The Department of Health has purchased Relenza, an inhaled antiviral drug that treats flu without reaching the developing fetus. Relenza should not affect your pregnancy or your growing baby.

However, if your doctor or midwifery specialist thinks that a different medicine is needed (for instance, if you have unusually severe flu), you will be given Tamiflu instead.

An expert group reviewed the risk of antiviral treatment in pregnancy, which is extremely small - much smaller than the risk posed by the symptoms of swine flu.

**What are the possible side effects of Relenza?**

Some people have had wheezing or serious breathing problems when they have used Relenza. Relenza is therefore not recommended for people with asthma or COPD. Other possible side effects include headaches, diarrhoea, nausea and vomiting.

If you take an antiviral and have side effects, see your healthcare professional to check that you are ok. Then report your suspected drug reaction to the Medicines and Healthcare products Regulatory Agency (MHRA) via their new online system.

**Can I take flu remedies or painkillers if I am pregnant?**

You can take paracetamol-base cold remedies to reduce fever and other symptoms. Paracetamol is safe to take in pregnancy.

However, pregnant women should not take non-steroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen (Nurofen).

**Will pregnant women get preference for a swine flu vaccine?**

It will be in the autumn before a swine flu vaccine becomes available. When it is available, there will be guidelines on which groups of people are a greater priority for vaccination.

**Should I stop breastfeeding if I need to take antiviral drugs?**

Women who are breastfeeding should continue to do so while receiving antiviral treatment, as this is not contraindicated. If a mother is ill, she should continue breastfeeding and increase feeding frequency. If she becomes too ill to feed, then expressing milk may still be possible. Antiviral drugs are excreted into breast milk in very small (insignificant) amounts.

Taken from NHS Choices 03.08.09
How do I tell if my child has swine flu?

Call your GP immediately if your child has any of the following symptoms and a temperature of 38°C or above or feels hot:

• tiredness
• headache,
• runny nose and sneezing,
• sore throat,
• shortness of breath,
• loss of appetite,
• vomiting and diarrhoea, or
• aching muscles, limb and joint pain.

Of course, if you are worried about your child you should always call your GP for advice.

One thing you can do right now is to make sure you have a digital thermometer to take your child’s temperature.

If my child has swine flu, what should I do?

If your GP confirms that your child has swine flu, they should stay at home and you should treat their symptoms like any other cold or flu. Make sure they drink plenty of liquids, get lots of rest and take over-the-counter cold and flu remedies to help control their temperature.

Your GP will tell you whether your child should also take antiviral drugs. Antivirals, such as Tamiflu, shorten the symptoms by about a day and can reduce the risk of complications. Antivirals are only effective if taken within 48 hours of symptoms starting. If you are worried about your child, do not delay, call your GP immediately.

However, antivirals can also have side effects. If your child’s swine flu symptoms are mild, you may not wish to give them antivirals. Your GP can advise you on this.

Can children take antivirals?

Yes, on the advice of a doctor. Tamiflu is safe for infants aged one and older, at a reduced dose. Relenza (an inhaler) can be used by children aged five and older under the supervision of an adult.

Can babies under the age of one take antivirals?

Tamiflu and Relenza are not licensed for use in babies under the age of one. However, after evaluating all the available evidence, the European Medicines Agency has advised that children under one may be treated with Tamiflu, considering that:

• the appropriate dosage to treat children aged under one is 2-3mg/kg twice daily for five days,
• children are preferably treated under medical supervision, and
• dilution of the capsule content can be used to prepare the dose.
Can my baby take Tamiflu as a preventative measure?

The balance of benefit and risk for using Tamiflu for the prophylaxis (prevention) of swine flu in babies who are not suffering from flu symptoms is not clear. A decision on whether this is recommended should be taken by an expert in the care of young children. The recommended course for prevention in the under-ones is 2mg/kg once a day for 10 days (but should not exceed 10 days).

The first line of protection for babies aged under one is respiratory and hand hygiene and frequent cleaning of surfaces, toys and equipment.

How do I get antiviral drugs for my child?

Your GP will tell you over the phone how you can pick up the antiviral medication. You should ask a ‘flu friend’ – a friend or relative who does not have swine flu – to collect this for you.

Will children be first in line for the vaccine?

Scientists and doctors are still testing the vaccine and studying the swine flu virus. When the vaccine becomes available, the NHS will prioritise those who need to get it first.

I’m on immunosuppressants. Am I more at risk from swine flu?

Yes. If you take immunosuppressants you have a greater risk of becoming infected with any virus, including swine flu, and will be less able to fight it off once you have it.

Will my dose of immunosuppressants be altered in the event of an outbreak?

Your doctor may advise that your dose of immunosuppressants needs to change. The appropriate dose will vary from patient to patient.

Can I take antivirals if I’m on immunosuppressants?

Yes, on the advice of a doctor it is safe for you to take Tamiflu or Relenza.

Am I more at risk of catching swine flu if I have HIV?

Probably not. Although HIV infects CD4 cells and reduces their number and function, there are other parts of the immune system that are able to fight flu. For more information, go to the Terrence Higgins Trust website.

Am I more likely to suffer complications if I have HIV and catch swine flu?

If you have a low CD4 count (under 200), you may be more likely to suffer complications like pneumonia from any type of flu, including swine flu.

Can I take antivirals if I have mild to moderate kidney disease?
Yes. If you have stage 1 to 3 kidney disease, or your glomerular filtration rate (GFR) is above 30, you will be treated as any other person would be. This means you can take Relenza or Tamiflu, if necessary.

**Can I take antivirals if I have severe kidney disease?**

Yes. If you have stage 4 or 5 kidney disease, or your glomerular filtration rate (GFR) is below 30, you will probably be under the care of a kidney specialist. Relenza (an inhaler) is safe to take. If you find this tricky to use, your doctor may give you a reduced dose of Tamiflu tablets instead.

**Will people with long-term conditions get preference for a swine flu vaccine?**

It will be months before a swine flu vaccine becomes available. When it is available, there will be guidelines on which groups of people are a greater priority for vaccination.

**Are people with asthma or chronic obstructive pulmonary disease (COPD) more at risk from swine flu?**

You are no more likely to catch swine flu than anyone else. However, if you do catch a respiratory infection, including swine flu, it may add to the breathing difficulties you may have.

**What advice is there for people with asthma or COPD?**

Your condition places you at greater risk if you catch the disease. It is therefore all the more important that you follow good hygiene practices and react quickly if you develop flu-like symptoms.

**Can I take antivirals if I have asthma or COPD?**

Yes - Tamiflu is safe to take. However, Relenza (an inhaler) is usually not given to people with asthma as on rare occasions it can cause breathing complications.

**I have diabetes. Am I at more at risk from swine flu?**

You are no more likely to catch swine flu than anyone else. However, if you do catch it, your blood glucose may increase and your diabetes treatment may need to be adjusted accordingly.

**What should I do if my blood glucose increases?**

If you find your blood glucose has increased, or you develop thirst and are urinating more, call your GP. If you are on insulin and testing your own blood glucose, you may be advised to do this more often so you can adjust your dose according to the results. If you start to vomit or become increasingly unwell, call your GP as soon as possible.

**Is there any advice for people with liver disease?**

If you have liver disease you are no more likely to catch swine flu than anyone else. If you do catch it, antivirals are safe to take – there is no interaction between these and antivirals you may already be taking to treat hepatitis.

Taken from NHS Choices 03.08.09
Can I take antivirals if I am on epilepsy treatment?

Yes. It is thought that antiviral treatments will not affect medicines taken to control epilepsy.

I look after someone who is very ill/disabled. What if I become too ill to care for them?

As a carer, you should probably begin planning for an emergency caring situation as soon as possible. The best way to get help with planning for a caring emergency is to arrange a carer’s assessment from your local authority.

If you have time you may be able to arrange for formal respite care, but you may want to talk to friends, neighbours and relatives about forming a network of ‘flu friends’ who can help out and look after you if you are ill.

Are older people more likely to catch swine flu?

It is not yet known, but the vast majority of cases so far in the UK have been in those younger than 60. It is speculated that some older people may have partial resistance to the swine flu virus, due to being exposed to a similar flu virus in a previous pandemic.

Are older people more at risk of complications if they do catch it?

Older and frail people are more likely to develop complications from any type of flu, and are generally less able to fight it off.

What advice are you giving to travellers?

Before travelling, they should check the Foreign and Commonwealth Office (FCO) website for information specific to the country they are visiting. Those who do not have internet access can call the FCO’s 24-hour advice line on 0845 850 2829.

We are about to go on holiday, what should we do?

Wherever you go on holiday, you should always take the same sensible precautions that you do when at home. Know where you can get medical advice if you or your family feel unwell and make sure you have over-the-counter medication for coughs and sneezes.

If you are going on holiday in the UK then you can contact the local GP surgery or call the National Pandemic Flu Service helpline on 0800 1 513 100.

If you are travelling to Europe, make sure you have your free European Health Insurance Card (EHIC). This entitles you to any necessary medical treatment, including for swine flu, during a visit to another European Economic Area country. You can get an EHIC application form from the Post Office or by calling 0845 606 2030. If you have swine flu, do not travel until after your symptoms have stopped.

Whenever you go abroad, always check the latest travel advice from the Foreign Office at: www.fco.gov.uk.
What advice are you giving to people with flu who want to travel by plane?

The Health Protection Agency is advising anyone in the UK who is symptomatic not to travel until they are no longer infectious. Similarly, any British nationals abroad with flu who want to fly home should only travel when they are no longer infectious.

What if British nationals abroad ignore this advice and try to travel anyway - won't they be putting other passengers at risk?

It is the discretion of the airline whether to carry a person with signs or symptoms of infectious disease. Any British national prevented from boarding flights when trying to return home from abroad can seek Consular advice from their nearest Diplomatic mission.

Will people be screened when they arrive at their destination?

The Foreign and Commonwealth Office website states that medical screening for the swine flu virus has been introduced at several airports for passengers arriving on international flights, including in China. In the section on China, the guidance states: 'The Chinese government continues to place great emphasis on screening and surveillance, rapid detection, quarantine and treatment.'

What should I do if I become ill on holiday or on the flight home?

Make sure you check in advance so you know where you can get medical advice if you or your family feel unwell on holiday. And make sure you have over-the-counter medication for flu, such as paracetamol or ibuprofen. Remember that children should not take aspirin.

If you are travelling to Europe, make sure you have your free European Health Insurance Card (EHIC). This entitles you to any necessary medical treatment, including for swine flu, during a visit to another European Economic Area country. You can get an EHIC application form from the post office, by calling 0845 606 2030, or by applying online.

If you do experience flu-like symptoms, keep away from public places to avoid spreading it. Then contact a health professional and tell them your symptoms.

If you become ill on your flight home, alert the cabin crew to your symptoms. There are procedures in place for dealing with passengers who become unwell on flights, and the airline will advise port health officials on the ground that a passenger requires a health assessment and may need treatment.

To access the Department of Health Swine Flu Information line when abroad, call 00 44 207 928 1010.

Will GPs have to certify people as having swine flu for travel insurance purposes?

The Association of British Insurers (ABI) has confirmed that swine flu will be treated no differently from any other illness by travel insurers. People diagnosed with swine flu before they are due to travel abroad, and any immediate family members (spouse, parents and children, with some policies covering other relatives) due to travel with them, will be covered for the cost of holiday cancellation by their travel insurance.

Taken from NHS Choices 03.08.09
Insurers usually require a doctor’s certificate to confirm that the patient was unable to travel. The government welcomes the comments from the ABI that they would expect insurers to be flexible on the time it takes to obtain such a certificate and that they are considering what other forms of evidence might be acceptable.

**Do I need extra medical insurance?**

No. You should always have insurance when you travel abroad. You do not need extra insurance for swine flu.

**There are lots of cases in America and Mexico - is it safe to travel there?**

Yes. Just make sure you know in advance where to get medical advice from. If you are not sure whether you can travel to a certain country, check the latest travel advice from the Foreign Office at: [www.fco.gov.uk](http://www.fco.gov.uk).

**Is it safe to use public transport now we are in a pandemic?**

Yes. Public transport has not been closed during previous pandemics, and while there is a small additional risk to the public, this is no greater than using other public places. Anyone who has the flu or feels unwell should stay at home and not travel.

**Will the government restrict travel within the UK?**

The government is not planning to restrict travel within the UK unless it becomes necessary for public health reasons. Any restrictions that are considered are likely to be on an advisory basis. Scientific modelling shows that internal travel restrictions would have little impact on the total number of people infected by flu. The public would be advised to reduce non-essential travel where possible and anyone who has the flu or feels unwell should stay at home and not travel.

**What happens to visitors to the UK if they are confirmed with swine flu during their stay?**

Foreign nationals should not be treated any differently from UK nationals with regard to self-isolation or other recommended measures for symptomatic people. People with symptoms of swine flu, including foreign nationals, are advised not to travel. Overseas visitors will not be charged for NHS hospital treatment for swine flu, including antivirals.

**What is the definition of WHO Phase 6?**

The technical definition of Phase 6 is human-to-human spread of the virus into at least two countries in one World Health Organisation region, with community level outbreaks in at least one other country in a different WHO region.

**Is it a mild infection and therefore no cause for concern?**

Don’t be complacent, as it is too soon to assume it will be a mild infection. We don’t know the profile of the virus and are closely monitoring each case that comes up. Everyone who has been infected with the virus in this country has so far been diagnosed early and treated with antivirals, which reduce the severity of symptoms.
The flu virus changes character very rapidly. It can pick up and swap genetic material, which can dramatically change its character, increasing the severity of symptoms. The virus could change in the autumn, so we need to plan for this.

**Will hospital capacity be adequate?**

Most flu sufferers can be cared for appropriately at home. The UK has well developed plans in place for managing extra demand on the healthcare system during the pandemic.

**Is it safe to eat pig meat?**

Yes. The WHO says there is no evidence that swine flu can be transmitted through eating meat from infected animals. However, it is essential to cook meat properly. A temperature of 70°C (158°F) would be sure to kill the virus. Pig meat includes pork, bacon, ham and pork products.

**Are the reports that 65,000 people are going to die true?**

It is wrong to suggest there will be a particular number of deaths per day. Scientific and clinical experts can use sophisticated modelling techniques to help us understand how the virus may behave, but that is all they can do - be a guide, not a prediction.

**What happens if someone doesn't have a 'flu friend'?**

The government has been working with organisations such as the Red Cross to meet the needs of people who may be isolated or otherwise find it difficult to identify a flu friend.