

UNIVERSITY STUDENT HEALTH SERVICES • Fact Sheet

INFLUENZA OR “THE FLU”

WHAT IS IT?

Influenza is contagious respiratory infection caused by influenza viruses. Commonly known as “the flu”, influenza is more serious than the common cold due to the risk of complications, which can be deadly. Influenza is also not the same as the “stomach flu”, which leads to vomiting and diarrhea. Between 10-20% of people in the United States get influenza each year. The seasons for the common cold and influenza overlap, occurring primarily between November and March.

HOW IS IT TRANSMITTED?

All respiratory infections are transmitted by tiny infected mucus particles that are sprayed into the environment through sneezing, coughing, and talking. These particles can also be transmitted to objects (like door knobs and sink handles) and through person-to-person contact. Remember to cough or sneeze into a tissue (or your elbow if no tissue is available) to reduce the spread of infection to others. It is important to wash your hands after coughing or sneezing.

Hand-washing: Proper technique is important! Rub your hands together with soap and water for 15-30 seconds (about the time it takes to sing “Happy Birthday to You”) before rinsing thoroughly. An alcohol based hand-sanitizer is an effective alternative as long as you do not have visibly soiled hands.

WHAT ARE THE SYMPTOMS?

Characteristic flu symptoms include:

- Fever of 101°F or above, lasting 3-4 days
- Dry, hot skin
- Muscle and joint pains
- Headaches
- Dry cough
- Sore throat
- Runny or stuffy nose
- Fatigue and weakness (may last several weeks)
- Nausea, vomiting, and/or diarrhea (more common in children)

FOR HOW LONG AM I INFECTIOUS?

Influenza can be passed to others beginning one day before symptoms begin to an average of 7-10 days after symptoms develop.

IS THE FLU DANGEROUS?

Most people fully recover from the flu in 7-10 days, though it may take as long as 14 days. However, certain high-risk groups may be more likely to develop severe disease and complications, such as pneumonia, respiratory failure, and even death. These **high-risk groups** include pregnant women, infants and children under age 5, elderly persons, and persons with chronic medical problems (eg. asthma, diabetes, heart disease, suppressed immune systems, hepatitis, etc.).

HOW IS IT PREVENTED?

The **influenza vaccine** can reduce your chance of infection by about 70%. It is best to receive the vaccine starting in mid-October or early November, before the flu season starts. However, the flu vaccine can be given anytime during the flu season. It takes about 2 weeks after receiving the vaccine to develop enough antibodies to protect you from infection.

Contrary to popular belief, you cannot get the flu from the flu shot because it contains killed viruses. There are some restrictions on who can receive the nasal vaccine because it contains a live, but weakened, version of the flu virus. Consult your health care provider for more information.

The flu vaccine is available at Student Health to all enrolled students free of charge. Those who are at higher risk of developing complications from influenza are strongly advised to get the vaccine.

WHAT IS THE TREATMENT?**Do medications help?**

Antiviral medications started within 2 days of the onset of symptoms may lessen both the severity and duration of influenza. These medicines also make you less contagious to others. However, most people do not need antiviral medications to fully recover from the flu. Treatment with antiviral medications is recommended for those patients at high-risk of developing complications. Consult your health care provider for more information.

Antibiotics may be prescribed if a bacterial infection (such as pneumonia) occurs with an influenza infection. More severe or prolonged illness or illness that seems to get better then gets worse again may be an indication of a bacterial infection. If you experience these symptoms, it is important to seek treatment as soon as possible.

Should I stay home?

Students diagnosed with influenza should stay home until at least 24 hours after their fever is gone. Fever should be gone without the use of a fever-reducing medication. Students should not work, attend class, or attend clinical rotations while they are ill and a fever is still present. It is important to adhere to this restriction to decrease the risk of infecting others.

What else can I do?

- **REST:** You do not need to stay in bed. Just be in a quiet, comfortable environment.
- **DRINK FLUIDS:** High-calorie fluids can replace solid foods for a few days if you do not feel like eating. Fluids will keep nasal and throat secretions thin and will prevent dehydration, which is a risk if a high fever is present.
- **FEVER:** Fever can be treated with acetaminophen (Tylenol), ibuprofen (Advil or Motrin), or naproxen (Aleve). Do not take Aspirin. Follow the package directions, and take these medicines with food to avoid an upset stomach. You can expect your fever to rise if you skip a dose. See a health care provider if your fever is not improving.
- **MUSCLE & JOINT ACHES AND HEADACHES:** Acetaminophen, ibuprofen, or naproxen (not aspirin) can be used to reduce body aches and headaches. Severe or persistent headaches should be evaluated by a health care provider. Fever of 101°F or more, neck pain, rash, nausea, and any visual changes associated with the headache should be evaluated immediately.
- **Dry Irritating COUGH:** Dextromethorphan cough suppressant (Delsym, Robitussin DM, Triaminic DM) may be used to decrease symptoms. Follow the package directions for safe dosing. Cough drops may also help by soothing irritated mucous membranes in the throat. Increase your intake of non-caffeinated beverages. Stop smoking if you smoke, and avoid secondary smoke. Blood-tinged mucus may develop from a persistent dry cough; however, seek medical care immediately if the amount of blood increases. It is common to feel short of breath or wheeze during a coughing spell, but you should not feel short of breath or wheeze when at rest.
- **Wet Productive COUGH:** Do not suppress the cough! Guaifenesin (Mucinex or plain Robitussin) or any over-the-counter expectorant may be used to thin the mucus. Warm, humid air (such as from a humidifier or a steamy shower) can also help. Increase your non-caffeinated fluid intake. Consult your health care provider if your cough causes shortness of breath, if you have asthma, or if you are a heavy smoker.
- **SORE THROAT:** Comfort care includes eating soft foods, drinking fluids, gargling with a salt-water solution (1/4 tsp of salt per ½ cup of warm water), using commercial lozenges according to the package directions, and stopping smoking. Research has documented benefits from drinking warm water mixed with lemon and honey. Acetaminophen, ibuprofen, or naproxen may also help.
- **HEAD CONGESTION:** A runny or stuffy nose can be relieved by increasing fluid intake and “steaming” in the shower or with a humidifier. Oral decongestants (such as phenylephrine or Sudafed PE) and nasal decongestants (Afrin) can help shrink swollen nasal passages. It is important not to use Afrin for more than 3 days as this can lead to worsening congestion. Saline (salt) nasal sprays can thin out secretions and improve drainage. Nasal sprays should be used by tilting your head forward to look at the floor and spraying the agent into the nose while breathing in.

WHAT CAN I DO TO PREVENT THE SPREAD OF FLU AT HOME?

If you are the sick person:

- Avoid being around other household members as much as possible, especially those at high risk of complications from influenza.
- Stay in a room separate from the common areas of the house (eg. a spare bedroom with its own bathroom if possible). Keep the sickroom door closed.
- Use a separate bathroom if possible. Clean the bathroom daily with a household disinfectant.
- Wear a facemask if you must be in the same room as other household members or if you are out in public.
- Remember to cover your nose and mouth when sneezing or coughing and to wash your hands afterwards.

If you are a household member:

- Avoid being around the sick person as much as possible. Especially avoid being face-to-face.
- Choose one adult in the home to take care of the sick person. This person should not be someone at increased risk of developing complications from influenza.
- Do not share the sick person’s bathroom if possible. It is also best not to share towels. If a shared bathroom cannot be avoided, clean bathroom surfaces frequently with a household disinfectant.
- Clean your hands often, using soap and water or an alcohol-based hand rub. This is especially important after every contact with the sick person or the sick person’s room or bathroom.

If you are a household member and at high risk for complications from influenza:

- Attempt to avoid contact (within 6 feet) of the person who is sick with influenza.
- If close contact with the sick person is unavoidable, wear a facemask or a N95 disposable respirator.
- Contact Student Health (828-8828 for the Monroe Park campus or 828-9220 for the MCV campus) or your medical provider to see if you should start taking antiviral medications to prevent infection with the influenza virus.

CONSULT YOUR HEALTH CARE PROVIDER IMMEDIATELY IF YOU:

- Have difficulty breathing or chest pain.
- Have purple or blue discoloration of the lips.
- Are vomiting and unable to keep liquids down.
- Have signs of dehydration, such as dizziness when standing or absence of urination.
- Have seizures or uncontrolled convulsions.
- Become less responsive than normal or become confused.

RECOMMENDED WEBSITES: www.cdc.gov, www.goaskalice.columbia.edu