October 2009

Everything You Need to Know about Swine Flu

Karla Walsh
Iowa State University

Anne Walsh
Iowa State University

Follow this and additional works at: http://lib.dr.iastate.edu/ethos
Part of the Higher Education Commons, and the Journalism Studies Commons

Recommended Citation
Available at: http://lib.dr.iastate.edu/ethos/vol2010/iss1/9

This Article is brought to you for free and open access by the Student Publications at Iowa State University Digital Repository. It has been accepted for inclusion in Ethos by an authorized editor of Iowa State University Digital Repository. For more information, please contact digirep@iastate.edu.
EVERYTHING YOU NEED TO KNOW ABOUT SWINE FLU

TIMELINE (2009)

APRIL 23
Centers for Disease Control (CDC) briefs on human cases of swine flu.

APRIL 27
Non-essential travel to Mexico (an H1N1 hotbed at the time) is not advised.

APRIL 29
First US fatality related to this H1N1 strain.

MAY 2
First Iowa case of H1N1 confirmed.

MAY 8
First confirmed case of H1N1 in an ISU student.

*Information compiled from the CDC, flu.gov and Iowa State University news service.
**The H1N1 virus, also known as “swine flu,” has certainly been a media hot topic in recent months.** Heidi and Spencer Pratt even capitalized on the viral spotlight by donning surgical masks during their honeymoon in Mexico earlier this year.

So why is this flu such a big deal and how is it different from the flu that causes headaches, literally, every winter? **ETHOS** dug up the inside information from experts to give you the straight scoop from those in the know (by the way, the Spedi mask in public isn’t going to do a whole lot for you).

**Germ Grabbers**
The National Science Foundation’s Scrub Club swabbed and shared their findings. So where are the most germs hiding?

- **Dirty, filthy, nasty:** Public sandbox, restaurant server’s tray, school musical instrument, movie theater video game controller
- **Semi-Sterile:** Public park swing, school computer mouse, school desk, store basket, store floor, theater restroom
- **Spick and Span:** Doctor’s office items (checkout desk, magazine, toy, waiting room chair), library book, restaurant restroom door handle, school basketball, bus seat, store shopping cart

Data from Fall 2008, for more information visit www.scrubclub.org.

**H1N1 101**
How is this flu different from the one that strikes every winter?

Flu viruses mutate fairly easily, so even though a recovered individual is immune from that strain, they can become infected with another flu strain, explaining the need for a new flu shot each year. During an average flu season, 56,000 Americans die from flu-related issues and more than 200,000 are hospitalized—many of whom are younger than five and older than 64 years old, the Centers for Disease Control (CDC) reports.

“This H1N1 pandemic strain is affecting most severely and most commonly people under 24. This is unusual because young people have the best immune systems,” says James Roth, DVM, PhD, executive director of the Center for Food Security and Public Health and veterinary medicine distinguished professor.

Researchers think older individuals may have been exposed to a flu strain in the past that was similar enough to this H1N1 strain to cause immunity (H1N1 strains have occurred in the past that have been slightly different than the 2009 version). Pregnant women, diabetics and those with asthma, kidney or heart disease are more at-risk for complications if infected.

The symptoms for this year’s H1N1 and seasonal influenza are quite similar, the CDC notes. If infected, expect a fever, stuffed-up or runny nose, achy body, headache, chills, sore throat and fatigue (influenza is different from the “flu” that many people use to refer to gastrointestinal issues such as vomiting and diarrhea; these may occur with influenza, but are not the main symptoms). H1N1 appears to be spreading fairly rapidly and easily, so unlike seasonal flu, it is best if those that are ill self-isolate.

**What does it mean to self-isolate? What else do I need to know if I get H1N1?**
The CDC recommends that you stay in your home except for medical care or unless absolutely necessary. Michelle Hendricks, director of Thielen Student Health Center, said that if possible, students with H1N1 should leave Iowa State and stay at their parent’s house. Those who live in crowded, high-population places, such as dorms and apartments, can spread the virus easily. The CDC has instructions about how to care for individuals in a home, but it’s much more difficult to stop the disease from spreading when numerous ill and healthy individuals live in close quarters.

Roth recommends planning ahead with a “flu buddy” who can bring you your meals, mail, etc. if you need to stay at the university. ISU Dining will bring your dining plan meals to your on-campus room if necessary.

**Why was this flu called “swine flu” earlier this year? Should I be afraid of the pork chops at the dining center?**
The 2009 H1N1 flu virus is a mixture of viruses that occur in pigs (swine), birds (avian) and humans. More of the genes originated from a pig flu virus than the other two, so they said it looks most like a swine flu. “But it’s still not been found in pigs in the US. It probably will be, but so far it hasn’t,” said Roth, who has grant funds from the United States Department of Agriculture (USDA) to study avian and swine influenza.

“People can give it to pigs. Pigs have more to worry about us than we do about them!”

You cannot get the flu from eating properly cooked pork products, so go ahead and take that tenderloin!

**If this H1N1 is not very severe, why are so many people worried about it?**
To be more severe, “the virus would have to mutate. Flu viruses do mutate, so scientists are concerned it might,” Roth says. The current H1N1 strain could mix with another flu virus if an individual is infected with more than one virus and those viruses swap genetic materials. This could result in a flu strain that has more severe symptoms or has a longer duration.

**How is H1N1 spread?**
If an infected person sneezes or coughs within six feet of you, you can get ill from the droplets. But many times, a healthy individual becomes infected by touching their eyes or nose after touching something that an ill individual has touched (the virus can last two to eight hours on a surface, the
Cortney Hendricks, director of the university’s upper administration, says. The team plans to monitor and follow-up on various types of events. The team plans to monitor developments and coordinate plans with the university’s upper administration.

**Does it make a difference if I wash my hands or use an alcohol-based hand sanitizer?**

The CDC says that when soap and water are available hit the sink. Use warm water and wash thoroughly for 15 to 20 seconds. If you can’t wash, it’s a great idea to use alcohol-based hand wipes or gels—simply rub until hands are dry. Either option will help to kill most germs on hands.

**Should I go buy a Costco-sized package of facemasks?**

While facemasks can protect from droplets that transfer viruses, the CDC doesn’t recommend that healthy individuals wear them in public. If you’re ill, the CDC says that facemasks or coughing/sneezing into a tissue are equally wise.

“I think one of the biggest things a face mask does for people is it keeps them from putting their fingers in their mouths or touching their nose, because that’s more likely how you are going to get infected. It’s really hard not to touch your face; it’s an unconscious thing to do,” Roth says. So be conscientious about hand-to-face contact and save yourself some cash (and strange looks).

**What’s the deal with the H1N1 vaccine I’ve seen on the news?**

While the seasonal flu vaccine is available now (and recommended for the general population, including college students), a different vaccine has been developed in attempts to prevent the H1N1 spread. Every year a new vaccine is made with a different flu strain plugged in and the H1N1 shot is the same as all other flu vaccines, just with the H1N1 combating parts included.

The H1N1 vaccine will roll out early to mid-October and will be offered to at-risk populations and health care workers first. College students, since they are less likely to have immunity and more likely to live in a densely-populated environment, will probably be able to get vaccinated in the second round of distribution, as more doses become available.

The CDC will release alerts about vaccine availability and “Iowa State will tell the students when there is a vaccine for them. I would tell all students to get it as soon as they are eligible,” Roth says.

**Will this virus last forever?**

No need to fret. After a few months, enough people will have had it and recovered that it will die out. The reason it is spreading so fast is that there are so many people with no immunity. Once you have it and recover, then you are immune and you don’t have to worry about getting it again,” Roth says, adding that it would be wise for those who have been ill and recovered to take care of those currently ill.

---

**DID YOU KNOW?**

**H1N1 updates are available** on your mobile device if you’re into keeping tabs on the latest virus-related news. Visit m.cdc.gov on your mobile Internet provider to sign up. If you’d rather receive text updates and tips, send HEALTH to 87000 (standard text messaging rates apply). You can also receive the latest news by following @CDCEmergency on Twitter or becoming a fan of the CDC on Facebook.

---

**SEPTEMBER 15**

US Food and Drug Administration (FDA) approves H1N1 vaccine

**SEPTEMBER 18**

US, Australia, Brazil, France, Italy, New Zealand, Norway, Switzerland and the United Kingdom pledge to donate H1N1 vaccines to developing countries

**SEPTEMBER 25**

WHO reports 318,925 worldwide lab-confirmed cases and more than 5,917 deaths (expected to be a significant underestimation—based on lab results not reported cases from individuals or health care providers).