

# Tips for avoiding, treating swine flu

May 1 2009, By Judith Graham

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Swine flu has surfaced in the United States, and people are bound to have many questions as the illness arrives a step closer to home. Dr. Mark Dworkin, an associate professor of epidemiology at the University of Illinois Chicago School of Public Health, discussed some common queries.

Dworkin is the author of a new and timely book, "Outbreak Investigations Around the World: Case Studies in Infectious Disease Epidemiology." An edited version of our conversation:

Q. What symptoms are associated with swine flu?

A. The classic symptoms are the same as with any flu: muscle aches, a fever of 101 or higher and a dry cough. Other symptoms may include nausea, vomiting, a sore throat, a running nose, and diarrhea. These symptoms tend to have an abrupt onset. Suddenly, you'll notice that you're feeling very bad. But this isn't true for everyone. If you've been exposed to a similar [virus strain](#) in the past or you've been vaccinated against the flu, you may feel only mildly ill.

Q. What should I do if I or a family member has these symptoms?

A. The first thing you want to consider is whether you've been near someone who may have swine flu. If you think you have been exposed, get in touch with your doctor.

If you weren't exposed, you're probably dealing with a different illness

that can cause flu-like symptoms. Since the flu season is pretty much over, it's probably not influenza. It may be adenovirus or a parainfluenza virus. In any case, call your doctor.

If you have mild symptoms only, you don't need to call a physician or go to the emergency room. Drink plenty of fluids, get rest, eat properly, and avoid going to work or school. Wait and see if you get better. If you don't, be in touch with your doctor.

Q. What treatments are there for swine flu?

A. The recommended antiviral medications are the same as what we've been using recently for regular influenza: [Tamiflu](#) and Relenza. The drugs tend to shorten the duration of the illness -- typically a week or two weeks -- by a day or two. It's preferred that treatment start within 48 hours of the onset of the illness. That's when you get the most benefit.

Q. What about side effects?

A. These are generally safe medications. Infrequently, people report having stomach discomfort or headaches, dizziness or diarrhea. Several other possible side effects have been reported -- including sore throat or asthma -- but it's hard to know what caused them, the underlying illness or the medications.

Q. Should I take anti-viral drugs as a preventive measure?

A. If you've had contact with someone who may have swine flu, yes. But otherwise, it doesn't make much sense to take these medications at this time. The risk is that you'll waste your money. And if you have a large population of people taking these medications out of fear, you could get a resistant virus as a result.

Q. What would justify a trip to the emergency room?

A. It might be a good idea if the sick person has delirium or a high fever (104 or more) that doesn't come down in response to a medication like Tylenol, or if the person is very sick and also at higher risk of flu-related complications \_ children, the elderly, people with chronic lung disease or heart disease.

If someone looks really sick and you know something isn't right, get it checked out. A lot of advice assumes a person has a regular doctor: If you don't, go to the ER as your backup.

Q. What kind of protection does a mask provide?

A. A mask is a barrier that can protect your nose and mouth from droplets that fly in the air when someone coughs. But it will not protect the conjunctiva of your eyes, which is another entry point. A mask doesn't protect your hands from picking up the virus in the environment. The bottom line with masks is that they're reassuring to those who wear them but they evoke fear in those who see them. They are not foolproof for blocking transmission of the flu.

Q. What should I do if I have travel plans?

It depends on where you're traveling. If you had a Mexican vacation planned next week, I'd cancel it. But there are no travel restrictions for other places at this point. I'd base a decision on how widespread the flu is in that area. In New York, for instance, the swine flu isn't really widespread although a number of cases have been reported. I wouldn't stop myself from going there based on current data.

Q. Should I take my child out of day care?

A. There are no broad recommendations of this kind. But this is an opportunity to remind parents not to bring sick children to day care centers, whether or not [swine flu](#) is circulating. It's also an opportunity to remind people of what they should do anyway to prevent themselves from getting sick. Wash your hands more. Do it for an appropriate length of time \_ about the amount of time needed to sing the "Happy Birthday" song. Lather up. And keep away from someone who has flu-like symptoms unless absolutely necessary.

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