

H1N1 (swine) flu is spreading across college campuses nationwide. Close living quarters, communal restrooms and an abundance of social activities means a greater chance of catching swine flu for college students. This fact sheet will provide you information about swine flu and college students. This is not a substitute for medical advice from your doctor.

What are the symptoms of swine flu?

The swine flu is an infection of the nose, throat, and (sometimes) lungs. A college student with swine flu will usually have a fever of 100 °F or higher and a sore throat or a cough. Other symptoms may include:

- Chills, sore muscles, and headache
- Runny nose
- Fatigue
- Diarrhea and vomiting

Most people with milder symptoms should feel better within 3 to 4 days and do not need to see a doctor or nurse. Avoid contact with other people and drink plenty of fluids if you are experiencing any of the symptoms above.

How do I treat my symptoms?

Acetaminophen (Tylenol) and ibuprofen (Advil, Motrin) help lower fever. Sometimes doctors advise you to use both types of medicine.

- Take acetaminophen every 4 - 6 hours.
- Take ibuprofen every 6 - 8 hours.
- Do NOT use aspirin.

A fever does not need to come all the way down to normal. Most people will feel better when the temperature drops by even one degree.

Over-the-counter cold medicines may relieve some of your symptoms. Throat lozenges or sprays that contain an anesthetic will help with your sore throat. Check your student health center's web site for more information.

What about antiviral medications?

Most people with milder symptoms feel better within 3 to 4 days and do not need to take antiviral medications.

If you have any of the medical conditions below you may be at risk for a more severe case of the flu and should talk to your doctor about whether you would benefit from taking antiviral medications:

- Chronic lung (including asthma) or heart conditions (except high blood pressure)
- Kidney, liver, neurologic, and neuromuscular conditions
- Blood disorders (including sickle cell disease)
- Diabetes and other metabolic disorders

- An immune system that does not work well, such as AIDS patients or cancer patients receiving chemotherapy or radiation therapy, or someone taking corticosteroid pills every day
- A chronic medical problem

Two antiviral medicines are used to treat some people who have swine flu. They are oseltamivir (Tamiflu) and zanamivir (Relenza). These drugs work better if you start taking them within 2 days of your first symptoms.

How soon after my symptoms go away can I return to school?

You should be able to return to school when you're feeling well and have not had a fever for 24 hours (without taking acetaminophen, ibuprofen, or other medicines to lower your fever).

Should I get the swine flu vaccine?

Yes - even if you've had a swine flu-like illness already. If you are 24 or under, you are in a high risk group, and the CDC recommends that you should receive the vaccine first.

Receiving the swine flu vaccine will help protect you from getting swine flu. Remember, if you don't get the flu, you will not pass it on to others either.

Should I also get the regular flu vaccine?

Anyone who receives the swine flu vaccine still should also receive the seasonal flu vaccine that is released every year.

Where can I get the vaccines?

Check with your student health center, your local pharmacist, your doctor's office, your place of work, or anywhere else that is offering the vaccine.

How do I avoid catching or spreading swine flu?

- Stay in your apartment, dorm room, or home for at least 24 hours after any fever is gone. Wear a mask if you leave your room.
- Avoid sharing food, utensils, cups, or bottles.
- Cover your cough with a tissue and throw away after use.
- Carry hand sanitizer with you. Use it often during the day and always after touching your face.
- Cough into your sleeve if a tissue is not available.
- Avoid touching your eyes, nose, and mouth.

When should I see a doctor?

Most people of college age do not need to see a doctor or nurse when they have symptoms of the swine flu. This is because most people of college-age are not at risk for a severe case.

If you feel you should see a doctor or nurse, call their office about your symptoms first before going there. Knowing you are coming will help the office staff prepare for your visit, so that you do not spread germs to other people there.

If you have an increased risk of complications from swine flu, you should contact your medical provider. These risk factors include:

- Chronic lung problems (including asthma or COPD)
- Heart problems (except high blood pressure)
- Kidney disease or failure (long-term)
- Liver disease (long-term)
- Brain or nervous system disorder
- Blood disorders (including sickle cell disease)
- Diabetes and other metabolic disorders
- Weak immune system (such as patients with AIDS, cancer, or an organ transplant; receiving chemotherapy or radiation therapy; or taking corticosteroid pills every day)

You may also want to talk to the doctor if you are around others who may be at risk for a severe case of the flu, including people who:

- Live with or care for a child 6 months old or younger
- Work in a health care setting and have direct contact with patients
- Live with or care for someone with a chronic medical problem who has not been vaccinated for the swine flu

Call your doctor right away or go to the emergency room if you have:

- Difficulty breathing, or shortness of breath
- Chest pain or abdominal pain
- Sudden dizziness
- Confusion, or problems reasoning
- Severe vomiting, or vomiting that does not go away
- Having fever and a worse cough AFTER flu-like symptoms seemed to improve
- Flu-like symptoms improve but then return with fever and worse cough

References

What To Do If You Get Sick: 2009 H1N1 and Seasonal Flu Site last updated November 10, 2009 accessed November 13, 2009
<http://www.cdc.gov/h1n1flu/sick.htm>

Use of Influenza A (H1N1) 2009 Monovalent Vaccine Recommendations of the Advisory Committee on Immunization Practices (ACIP), 2009
Prepared by National Center for Immunization and Respiratory Diseases, CDC MMWR August 21, 2009 / 58(Early Release);1-8
<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr58e0821a1.htm>

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