Time out from summer for an important flu update



Time out from summer for a flu update

We interrupt your summer to bring you a Flu vaccine reminder and update.

Although flu (influenza) may be far from your minds, as we enter hot July, pediatricians are already ordering flu vaccines in preparation for Back to School. When the time comes, parents should add “schedule flu vaccine” to their back-to-school list as flu vaccines will arrive in offices as early as late August. Even immunizations given in August will last the entire winter season.

For fans of the nasal spray version of the flu vaccine—bad news. Turns out, data from the past 3 years shows the nasal spray is not nearly as effective as the injectable version. The American Academy of Pediatrics and the American Center for Immunization Practices both recommend giving only the

injectable version of flu prevention for protection against influenza.

Nonetheless, for the inconvenience of a pinch, the vaccine is still worthwhile. A total of 77 children died from flu in the US during the 2015-2016 flu season and many more children were hospitalized with flu related complications such as pneumonia and dehydration. Flu is highly contagious and spreads rapidly within households and schools, including daycare centers. People are contagious from flu one day prior to showing any symptoms of flu.

While most people who become sick with the flu survive, they will tell you it is a tough week. In addition to having a high fever that can last 5-7 days, a hacking cough, and runny nose, those stricken will tell you that every part of their bodies hurt. Even the movement of their eyes can hurt. In addition to the physical effects, our high school and college level patients are particularly distraught about the amount of schoolwork they miss while recovering from the flu.

An ounce of prevention is worth a pound of cure, which is why the flu vaccine is so terrific. There is no “cure” for the flu- you have to let your body fight it out. Unfortunately antiviral medications such as oseltamivir at best shorten the duration of flu symptoms by about one day. Flu vaccines work by jump starting your body’s natural immune system to produce disease fighting cells called antibodies. Vaccines are given yearly because flu virus strains often morph between flu seasons.

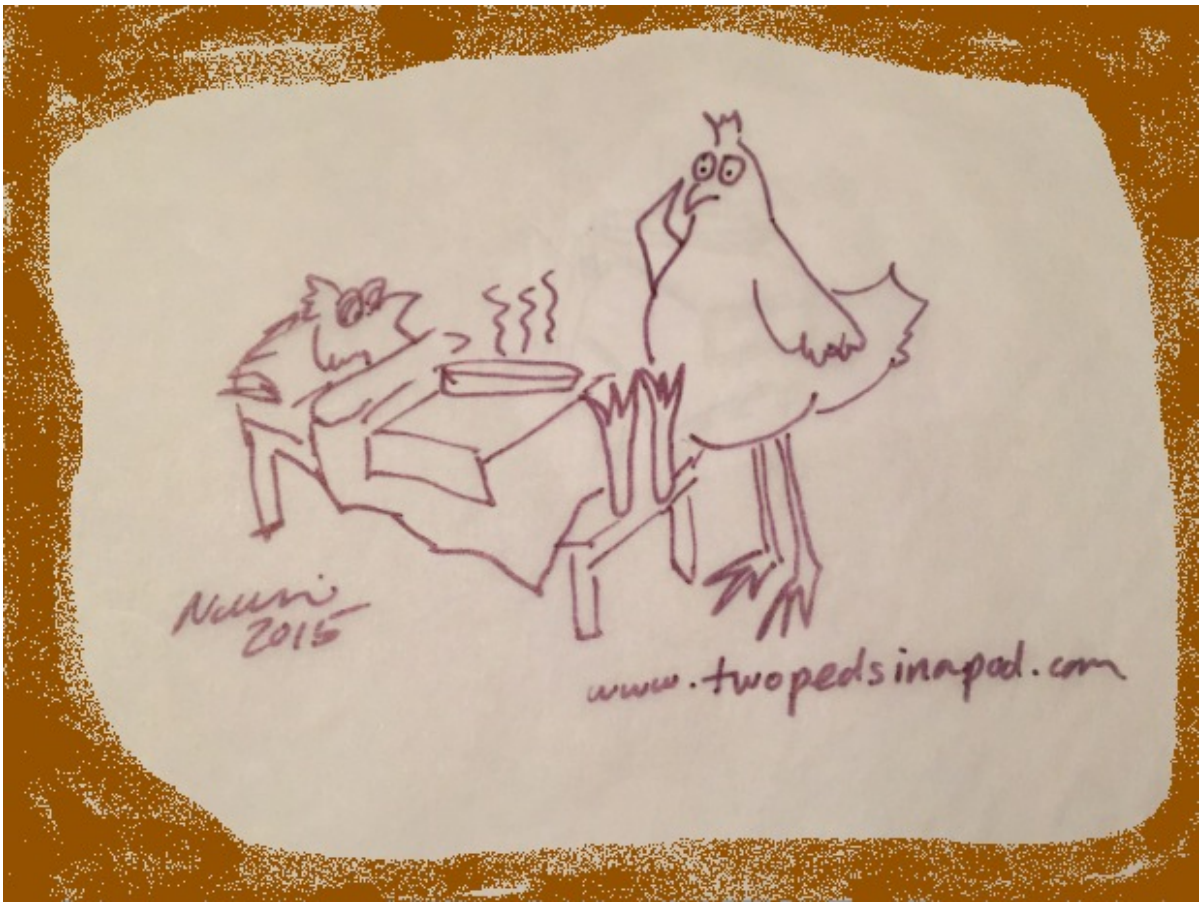
For more Two Peds In a Pod posts about flu and about vaccines in general: How to tell the difference between the common cold and the flu, Fact or Fiction: a flu vaccine quiz, Getting back to basics: how vaccines work.

OK, now back to your summer fun!

Julie Kardos, MD and Naline Lai, MD

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How to tell the difference between the Flu and the Common Cold



> “Now what kind of soup did the doctor recommend? Was that tomato soup? Mushroom barley?”

Now that we are in the middle of the 2015 flu season, we have parents asking us every day how they can tell if their child has the flu or just a common cold. Here’s how:

Colds, even really yucky ones, start out gradually. Think back to your

last cold: first your throat felt scratchy or sore, then the next day your nose got stuffy or then started running profusely, then you developed a cough. Sometimes during a cold you get a fever for a few days. Sometimes you get hoarse and lose your voice. Kids are the same way. In addition, they often feel tired because of interrupted sleep from coughing or nasal congestion. This tiredness leads to some extra crankiness.

Usually kids still feel well enough to play and attend school with colds, as long as their temperatures stay below 101°F and they are well hydrated and breathing without any difficulty. The average length of a cold is 7-10 days although sometimes it takes two weeks or more for all coughing and nasal congestion to resolve.

Important news flash about mucus: the mucus from a cold can be thick, thin, clear, yellow, green, or white, and can change from one to the other, all in the same cold. The color of mucus does NOT tell you if your child needs an antibiotic and will not help you differentiate between a cold and the flu.

The flu, caused by influenza virus, comes on suddenly and makes you feel as if you've been hit by a truck. Flu always causes fever of 101°F or higher and some respiratory symptoms such as runny nose, cough, or sore throat (many times, all three). Children, more often than adults, sometimes will vomit and have diarrhea along with their respiratory symptoms. Usually the flu causes body aches, headaches, and often the sensation of your eyes burning. The fever usually lasts 5-7 days. All symptoms come on at once; there is nothing gradual about coming down with the flu.

So, if your child has a runny nose and cough, but is drinking well, playing well, sleeping well and does not have a fever and the symptoms have been around for a few days, the illness is unlikely to "turn into the flu."

Remember: colds = gradual and annoying. Flu = sudden and miserable.

Fortunately, a vaccine against the flu can prevent the misery of the flu. In addition, vaccines against influenza save lives by preventing flu-related complications that can be fatal such as pneumonia,

encephalitis (brain infection), and severe dehydration. Even in a year, like this one, when the flu vaccine is not well matched to the currently circulating strains, its still worth getting the vaccine.

Be sure to read our guest article on ways to prevent colds and flu and our thoughts on over the counter cold medicines. Now excuse us while we go out to buy yummy-smelling hand soap to entice our kids to wash germs off their hands. After that you'll find us cooking up a pot of good old-fashioned chicken soup, just in case…

Julie Kardos, MD and Naline Lai, MD
revised from our Sept 2009 post

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Flu update 2014-2015- We may be in for a rough winter



Ben's runny nose, as depicted by Ben

Because we couldn't have said it better ourselves, we have reprinted (with permission) our pediatrician colleague Dr. Roy Benaroch's recent flu update from his blog The Pediatric Insider.

Some bad news about flu this year

We could be in for a rough influenza winter.

First, data just released from the CDC shows that a lot of the flu circulating in the USA isn't a good match for the strains in this year's flu vaccines. About 82% of flu since autumn is a type A H3N2, one that historically has been associated with more-severe illness. Of those, only about half are closely related to the A/Texas/50/2012 strain that was chosen in February to be included in the vaccine. Unfortunately, current methods of vaccine production take a long time, and manufacturers have to commit early—months ahead of time—to what will be included in the vaccines. In February, when the World Health Organization made their recommendations for the Northern Hemisphere 2014-2015 flu vaccine, they chose the H3N2 that was then in circulation. Since then, it's "drifted", or changed, to a related but non-identical type.

What this means is that the current vaccine is well-matched to only about 40% of circulating flu. The vaccine will probably offer some protection against the other 60%— illness will be milder and shorter—but a lot of people who got their flu vaccines are still going to get the flu, and spread the flu. Now, some protection is still better than none, so I'd still go and get that flu vaccine now if you haven't gotten it already. An imperfect (or, honestly, far-less-than-perfect) flu vaccine is better than none. But it isn't looking good this year.

And it gets worse. It's becoming increasingly clear that Tamiflu, the anti-viral medication we rely on to help treat influenza, doesn't work very well. As summarized by the Cochrane Collaboration earlier this year, studies show that Tamiflu is only modestly effective in reducing the length of influenza illness, and may be only slightly effective at reducing complications. If it does work for treatment of flu, it works best when started very early in the course of the illness. The FDA labeling calls for it to be started within 48

hours, but honestly it seems to barely work if started that late. Better to get it started within 24, or even better, 12 or 6 or 2 hours.

In practice, Tamiflu really doesn't seem to do much of anything for most of the flu patients seen in hospitals and doctor's offices, because we usually see patients too late. It does have a role in helping family members at risk for flu. They can start it immediately, at the first symptoms, and will probably get more benefit.

Tamiflu can also be used as a prophylactic, or preventive, agent in people exposed to flu with no symptoms, though again, the benefits are modest at best. Crunching the numbers, we probably have to treat about 33 people on average for just one person to benefit from prophylaxis. That's not very good, especially considering that all 33 people will have to pay for it and risk the side effects.
And Tamiflu does have some significant side effects. Nausea and vomiting are quite common, but the scarier reactions are depression, hallucinations, and psychosis. Neuropsychiatric side effects are most common in people of Japanese ancestry.

So: the flu vaccine, this year, will probably offer only modest benefits. And Tamiflu really has very limited usefulness. It looks like we'd better prepare for a rough winter, and keep in mind some of the old-fashioned ways to keep from getting the flu:
• Stay away from sick people.
• If you're sick, stay home.
• Keep your mucus to yourself—sneeze into your elbow, or better yet into a tissue. And then wash your hands.
• Don't touch your own face. Flu virus on your hands doesn't make you sick until you help it get into your body by touching your eyes, nose, or mouth.
• Wash or sanitize your hands frequently, and especially before touching your face or eating.

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In practice near Atlanta, Georgia, Dr. Roy Benaroch is an assistant clinical professor of pediatrics at Emory University, a father of three, and the author of The Guide to Getting the Best Health Care for your Child and Solving Health and Behavioral Problems from Birth through Preschool. Most recently he is the Narrator of the Great Courses Series: Medical School for Everyone. We are fans of his blog The Pediatric Insider