

Influenza

Guidelines for Parents



The flu — every child seems to get it at some time or another, right? But what is the flu? Can it be prevented? Should my child get a flu shot? These are just a few of the most common questions parents have about *influenza* (the flu). The following information will help you understand what influenza is, how to prevent it, and treatments that are now available.

What is the flu?

The flu is an illness caused by a virus. There are three different flu viruses, types A, B, and C. Types A (the most common) and B (usually milder) cause the usual epidemics of the flu. Flu viruses usually strike between December and early April. Since each of the types of flu virus has different strains, every year the flu is slightly different and can infect people several times during their lifetime.

The flu can last a week or even longer. Your child will usually feel the worst during the first 2 or 3 days and may have any of the following symptoms:

- A sudden fever (usually above 101°F)
- Chills and shakes with the fever
- Extreme tiredness
- Headache and body aches
- Dry, hacking cough
- Sore throat
- Vomiting and belly pain
- Stuffy nose

There are usually no serious complications from the flu. However, sometimes an ear infection, a sinus infection, or pneumonia might develop. Talk to your pediatrician if your child says that his ear hurts, he feels all congested in his face and head, if his cough persists, or if a fever lasts beyond 3 to 4 days.



How the flu is spread

The flu is spread from person to person in various ways:

- Direct hand-to-hand contact
- Indirect contact (for example, if your child touches an infected surface like a toy or a doorknob and then puts her hand to her own eyes, nose, or mouth)
- By virus droplets being passed through the air (for example, from coughing or sneezing)

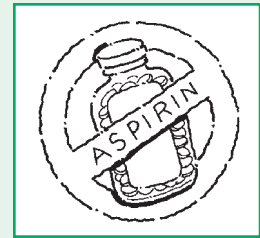
The flu spreads very easily, especially in preschool and school-age children. Adults are then easily exposed and can get the disease. The virus is usually transmitted just as symptoms begin or in the first several days of the illness.

Treatment

In children over 1 year of age, type A influenza can be treated with antiviral agents if given in the first day or two of the illness. This can speed recovery. Under some circumstances, antiviral agents can be taken before exposure to the flu and can prevent illness. This is particularly important for children with other health problems who have not been immunized. Antibiotics can be used to fight bacterial infections but have *no* effect on viruses, including the influenza viruses. Extra bed rest, extra fluids, and light, easy-to-digest meals can also help your child feel better.

If your child is uncomfortable because of fever, acetaminophen or ibuprofen in proper doses for age and weight will help him feel better. However, ibuprofen should never be given to children who are dehydrated or who are vomiting continuously.

Do not give aspirin to your child for the flu. An increased risk of developing Reye's syndrome (an illness that can seriously affect the liver and the brain) is associated with aspirin use during bouts of the flu and many other diseases caused by viruses.



Do not give your child over-the-counter cough or cold medicines without checking with your pediatrician.

Prevention

Good hygiene is the best way to prevent the flu from spreading to other family members. If your child has the flu, the following will help prevent its spread:

- Teach your child to cover her mouth and nose when coughing or sneezing. If your child is old enough, teach her how to blow her nose properly.
- Use facial tissues for runny noses and to catch sneezes. Throw them away in the trash after each use.
- Avoid kissing your child on or around the mouth or face, though she will need plenty of hugs while she is sick.



- Make sure everyone washes their hands before and after coming in close contact with someone with the flu.
- Wash dishes and utensils in hot, soapy water or in the dishwasher.
- Do not let children share pacifiers, cups, utensils, washcloths, or towels. Never share toothbrushes.
- Use disposable paper cups in the bathroom and kitchen.
- Disinfect. Viruses can live for more than 30 minutes on doorknobs, toilet handles, countertops, even on toys. Use a disinfectant or soap and hot water to keep these areas clean.
- Do not smoke around your child. Children who are exposed to tobacco smoke cough and wheeze more and have a harder time getting over the flu.

Influenza vaccine

There are safe and effective vaccines to protect against the flu. However, they are mainly recommended for children with health problems that make it risky for them to get the flu. This includes children with the following:

- Heart disease
- Lung disease, including asthma
- Immune problems, including HIV infection
- Blood diseases
- Cancer
- Diabetes
- Chronic renal and metabolic diseases
- Long-term aspirin therapy, such as with rheumatoid arthritis

Children 6 months or older with these health problems should get a flu shot each fall, as should everyone in their household.

For children under 9 years of age, the vaccine requires two injections, given 1 month apart the first year it is given. After that, only one dose is needed. The best time to get the flu vaccine is in late October to early November — before the flu season starts — but vaccination should begin earlier for those needing two shots.

Since the strains of flu are different every year, a new flu vaccine is developed each year as well. The vaccine is made from killed flu viruses and helps the immune system fight the flu. Most children are immune within 2 weeks of getting the vaccine. Side effects are almost always minor and include soreness at the site of the injection and a low-grade fever.

Important note:

Even though there are few side effects to the vaccine, production of the vaccine involves the use of eggs. If your child has had a serious allergic reaction to eggs or egg products, he should be skin tested before getting the vaccine. If skin testing confirms hypersensitivity, the vaccine usually should not be given.

Scientists are working on the development of a nasal spray flu vaccine. This will be a painless and effective way to protect children from the flu.



Influenza or cold?

Both the flu and colds are caused by viruses and share many symptoms, but there are differences. A child with a common cold usually has a lower fever, a runny nose, and only a small amount of coughing. Children with the flu usually feel much sicker, achy, and miserable. Also, the flu tends to strike more quickly than a cold. Stomach upsets and vomiting are more common with the flu than with a cold. Children who have colds usually have enough energy to play and keep up with their usual day-to-day routines. The flu, on the other hand, keeps most children in bed for several days.

When to call the pediatrician

An older child with the flu usually does not need to see the pediatrician unless the condition becomes more serious. If your child is 3 months of age or younger, however, call your pediatrician if she has a fever. For a child older than 3 months of age who has been exposed to the flu, call your pediatrician if your child experiences any of the following:

- Difficulty breathing
- Blue lips or nails
- A cough that just will not go away (for more than 1 week)
- Pain in the ear
- Persistent or new onset of fever after 3–4 days of illness

Your pediatrician may want to see your child or ask you to watch your child closely and report back if he does not improve each day.

The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.



From your doctor

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