

Swine Flu Briefing: *Status of the Outbreak, How it Spreads and How you can Help in the Fight*

The CDC investigation at this point:

As of April 26, 2009, the Centers for Disease Control and Prevention (CDC) has confirmed 40 cases of swine flu in the United States. This includes two cases in Kansas, seven cases in California, one case in Ohio, two cases in Texas and 28 cases in New York City.

The U.S. has thus far seen mild, uncomplicated illnesses. The cases in Mexico have been far more severe. The reason has not been determined; however, CDC has deployed staff to Mexico to assist in the investigation. Mexico is reporting that 81 deaths have been deemed "likely linked" to the new swine flu virus. Viral testing has confirmed the link to 20 deaths in Mexico. Some specimens from Mexico have tested positive for the same strain of swine flu as identified in U.S. cases.

We believe the outbreak in the United States will grow more severe. It is likely that additional cases will be found in other states, including Missouri. Unless the virus is contained, clusters of cases will probably develop in local communities. The CDC has emphasized that, while the number of cases so far is small, the virus is now so widespread that the situation is no longer one of containing the virus, but of controlling the severity of the outbreak.

The federal government declared a public health emergency in response to the growing number of swine flu cases. However, Janet Napolitano, secretary of the Department of Homeland Security, described the situation as more of a "declaration of public health emergency preparedness." The declaration serves as a trigger to release emergency response funding and resources so that preparations can be made now, before a full emergency occurs, rather than lose valuable time doing so in the midst of a developing disaster. At this point, the federal declaration does not require any particular action on the state's part.

What is swine flu and how is it transmitted?

Swine flu is a respiratory disease of pigs caused by type A influenza viruses. Outbreaks of swine flu happen regularly in pigs. People do not normally get swine flu, but human infections do occur. Most commonly, human cases of swine flu occur in people who are around pigs, but swine flu viruses also can spread from person to person.

The current swine flu outbreak in the U.S. is believed to be a result of sustained human to human transmission. In late March and early April 2009, cases of human infection with swine influenza A viruses were first reported in Southern California and near San Antonio, Texas. For comparison, only 12 human cases of swine flu were detected in the U.S. from December 2005 to February 2009, with no deaths occurring. The last swine flu outbreak in the U.S. was in 1976.

The viruses contain genetic pieces from four different virus sources: North American swine flu, North American avian flu, swine flu found in Asia and Europe and human flu. This particular genetic combination of swine influenza virus segments has never previously been recognized anywhere in the world.

This is worrisome because the next influenza pandemic is expected to be caused by a new strain to which no one has immunity. A true pandemic flu virus would spread easily from person to person. It is not clear at this time how easily this current virus jumps from person to person. At any time, however, the virus could mutate to make it more virulent and more contagious.

Swine flu viruses are not spread by food. You cannot get swine flu from eating pork or pork products. Eating properly handled and cooked pork products is safe.

The symptoms of swine flu in people are similar to the symptoms of regular human flu and include fever, cough, sore throat, body aches, headache, chills and fatigue. Some people have reported diarrhea and vomiting with swine flu.

Swine flu in humans can vary in severity from mild to severe and may aggravate underlying chronic medical conditions. In the past, complications from swine flu have included pneumonia and respiratory failure. People with swine flu infections should be considered contagious from one day before showing symptoms through seven days after symptoms begin. Children, especially younger children, might be contagious for longer periods.

Are there medications for swine flu?

Two antiviral drugs, Relenza[®] and Tamiflu[®] appear to be effective in treating symptoms of this strain of swine flu. Antiviral drugs may make the illness milder and help an ill person feel better faster. These drugs may also prevent serious flu complications. For treatment, antiviral drugs work best if started within two days of the patient becoming ill. There are ample supplies of these drugs already on the market, as well as in storage as part of federal supplies known as the Strategic National Stockpile.

It should be noted that these are prescription medications designed for treating a person who already has the flu virus. They are not vaccines and are not effective in preventing the virus. People should not ask their health care providers for prescriptions for these medications “just in case,” nor try to purchase them by other means.

Missouri is nearing the end of the regular flu season, but flu cases can be seen well into late spring and early summer. Because the regular flu and swine flu share similar symptoms, one type could be confused for the other. Therefore, patients with flu-like symptoms should contact a health care provider for advice. The health care provider should take samples swabbed from the nose to be tested. The test will determine whether it is flu, and what type it is. This year’s flu vaccine was effective against the regular flu, but is not expected to be effective against the new swine flu virus.

What are current and future responses by the Department of Health and Senior Services?

On Friday, April 24, 2009, the state health department issued a Health Advisory to Missouri’s medical community and to public health departments. The Health Advisory asked hospital intensive care units to collect influenza specimens from patients with flu-like illness, confirmed influenza, bacterial pneumonia, or febrile lower respiratory illness. The Missouri Department of Health and Senior Services (DHSS) also asked our existing network of key health care providers to collect specimens from outpatients suffering from those conditions. DHSS is monitoring our disease surveillance system, which includes a network of hospital emergency rooms.

If the World Health Organization determines that this outbreak constitutes a pandemic influenza crisis, DHSS will put into effect the Missouri Pandemic Influenza Response plan. Additional activities include enhanced surveillance for swine flu by requiring immediate, detailed reporting of all diagnosed or suspected cases; conducting more frequent analysis of surveillance data; and activating additional surveillance providers.

What are the current Federal Government activities?

As part of the decision to declare a public health emergency, the federal government has released medical supplies from the Strategic National Stockpile (SNS). These medications and supplies are being sent to states already reporting swine flu cases. A second phase of supply shipments from the stockpile will be made to states that are likely to soon report cases of swine flu.

Missouri is among the states to receive the second wave of SNS shipments. It will receive 25 percent of its SNS allotment. These include enough antiviral medication to treat 200,000 cases of flu; three million surgical masks and three million enhanced surgical masks for health care workers and others who are at greater risk.

These supplies will be taken to a central location where they will be readied for transport to affected areas of the state. The supplies will be added to Missouri's existing inventories. Missouri plans to use existing supplies first before tapping into the SNS shipment. The combined supplies should provide ample medications and other resources if they are needed here in Missouri. In addition, significant private supplies of antiviral medication exist in Missouri.

What will DHSS do if swine flu is reported in Missouri?

DHSS will advise the patients not to report to work or school and to avoid close contact with others. DHSS will work with the reporting medical provider to obtain lab specimens to confirm the case. Local public health agencies will investigate the case to document symptoms, onset of symptoms, possible exposure sources, and possible contacts with others. DHSS will monitor and analyze such data to determine progress of disease.

DHSS will recommend a range of measures to control the spread of disease. In addition to dispensing antiviral medications, the department's actions might include voluntary isolation of patients, voluntary quarantine of household contacts, cancellation of large public gatherings and closures of schools or child care centers. The department also will recommend infection control measures such as hand washing, proper cough etiquette, and the correct use of protective equipment such as surgical masks.