



What Pregnant Women Should Know About the Flu

Advice for pregnant women often includes more *don'ts* than *do's*. Don't drink, don't smoke, don't eat certain foods and don't take certain medications, are just some examples of sound advice designed to keep the mother to be and her unborn baby healthy. But when it comes to the flu, the best advice is: *do* get a flu shot, *do* take antiviral medications if your doctor recommends them and *do* take everyday precautions such as frequent hand washing and avoiding contact with sick people and crowded places

Changes to a pregnant woman's body, as well as to her immune system, put pregnant women at higher risk of developing severe problems from both the seasonal and H1N1 influenza. Vaccination can prevent the flu, which, in turn, prevents complications. As an added benefit, experts say that a pregnant woman's vaccination may also lower her newborn's risk of getting the flu.

In 2009, the H1N1 (swine) flu is circulating in addition to the regular seasonal flu. There is no single vaccine available that will immunize against both types of flu, so pregnant women need to have 2 separate vaccinations.

What is Influenza or Flu?

The flu is a respiratory (breathing) infection caused by different types of influenza viruses. It spreads when a person sneezes or coughs and droplets containing the virus spread into the air and other people breathe them in. It also spreads when someone touches something that has been touched by a person with the flu, such as countertops, phone, doorknobs, stair rails, computer keyboards, shopping carts, etc.

Seasonal Influenza or Flu

Seasonal flu occurs each year, usually in the late fall and winter. Symptoms begin 1-5 days after exposure and last about 1 week. The seasonal flu symptoms most often occur in the upper respiratory (lung) tract and include

- fever
- chills
- body aches
- feeling very tired
- headache
- sore throat
- runny or stuffy nose
- dry cough

Complications of the seasonal flu can include bacterial pneumonia, ear infections, sinus infections, dehydration, and worsening of chronic medical conditions, such as congestive heart failure, asthma, or diabetes. In pregnant women, complications have been known to lead to pneumonia, dehydration and premature birth.

An infected person is contagious with seasonal flu, or able to pass it on to others, 1 day before symptoms develop and up to 7 days after becoming sick. Some young children and people with weakened immune systems may be contagious for longer than a week. **If you are pregnant, or think you may be pregnant and have been exposed to someone who has the seasonal flu, contact your doctor.**

Seasonal Flu Vaccine

The seasonal flu vaccine is available in 2 forms:

- by injection (killed vaccine) and
- by intranasal spray (live vaccine)

It is recommended that pregnant women receive the injection of killed vaccine. This injection may be given at any stage of pregnancy.

Anyone who will be taking care of a baby younger than 6 months of age should get a seasonal flu shot. Also of priority for the seasonal flu vaccine are people with chronic illnesses such as heart disease, diabetes, asthma, kidney disease and cancer, all people 50 years and older, people who live in nursing homes or long term care facilities, household contacts of persons at high risk for complications from the flu, and healthcare workers. **The seasonal flu vaccine does not protect against the H1N1 flu.**

H1N1 (Swine) Influenza or Flu

H1N1 flu, also referred to as “Swine Flu,” may occur in any time throughout the year. Symptoms start approximately 3 days after exposure and last about 8 days. Persons who continue to be ill longer than 7 days should be considered contagious until symptoms have resolved. Much like the seasonal flu, symptoms include:

- fever
- chills
- body aches
- feeling very tired
- headache
- sore throat
- runny or stuffy nose
- dry cough
- May also include nausea, vomiting and diarrhea.

Complications of H1N1 flu can include bacterial pneumonia, ear infections, sinus infections, dehydration, and worsening of chronic medical conditions, such as congestive heart failure, asthma, or diabetes. In pregnant women, complications have been known to lead to pneumonia, dehydration and premature birth.

An infected person is contagious, or able to pass the disease on to others, beginning 1 day before until 7 days after they have symptoms. Children, especially younger children, as well as people with weakened immunity, might be contagious for longer. **If you are pregnant, or think you may be pregnant and have been exposed to someone who has the H1N1 flu, contact your doctor.**

H1N1 Flu Vaccine

The H1N1 vaccine is available in 2 forms:

- by injection (killed vaccine) and
- by intranasal spray (live vaccine).

It is recommended that pregnant women receive the injection of killed vaccine. The vaccine may be given at any stage of pregnancy.

Also of priority for the H1N1 vaccine are those who live with or care for infants younger than 6 months old, all those from 6 months to 24 years old, and those ages 25 - 64 with chronic illness or weakened immune systems and healthcare workers. **The H1N1 flu vaccine does not protect against seasonal flu.**

How is the Flu Treated?

For both the seasonal and H1N1 influenzas, early or preventative treatment with antiviral medications is recommended for pregnant women. Antiviral medications can lessen the severity of, or even prevent, the flu, by keeping flu germs from growing. They work best when taken within the first 48 hours. If you are pregnant, or think you may be pregnant and have come in close contact with someone infected with the flu, contact your physician. If you have symptoms of the flu, call your doctor as well.

How Can a Pregnant Woman Protect Herself From the Flu?

1. Get your flu shots.

Take 2: Remember that a pregnant woman should receive 2 vaccines, 1 for the seasonal flu and 1 for the H1N1 flu, in order to be fully protected. Pregnant women should receive the flu injections, which are inactivated virus. The nasal flu vaccines, which contain parts of live virus, are *not* recommended for pregnant women. The vaccine injections are generally safe to be given at any time throughout the pregnancy and take about 2 weeks to give protection. They may be given at the same time and should be placed into 2 different sites, such as one in each arm.

2. Take everyday preventive actions:

- **Cover your Cough!** Cough and sneeze into a tissue, sleeve or elbow rather than your hand. Throw the tissue in the trash after use.
- **Wash Your Hands With Soap and Water or Use (at least 60%) Hand Sanitizer** after sneezing or coughing, after using the bathroom, before you eat, and before touching eyes, nose or mouth
- **Try to avoid touching your eyes nose and mouth.** Germs spread this way.
- **Don't share silverware, drinks or personal care items with anyone.**
- **Try to avoid close contact with sick people.**
- **If you are sick with flu-like illness, CDC recommends that you stay home for at least 24 hours after your fever is gone.** (without the use of a fever-reducing medicine such as acetaminophen.)
- **While sick, limit contact with others as much as possible** to keep from infecting them.
- **Practice Social Distancing.** Keep a distance of at least 3 feet from other people during flu outbreaks. Avoiding crowds, shaking hands, kissing and other measures as much as possible to lessen the spread of flu.

3. Take flu antiviral medications if recommended by your doctor. If you are pregnant and have or think you may have the flu, or have had close contact with someone who has the flu, consult your doctor immediately for his/her recommendations for antiviral drugs. Because pregnant women are at increased risk of serious illness and complications, the use of antiviral drugs is a priority in that group. Antiviral drugs can make illness milder, shorten the length of the illness and prevent serious flu complications.

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