



# **ROUTT COUNTY OFFICE OF EMERGENCY MANAGEMENT**

## **MEDIA RELEASE**

**FOR IMMEDIATE RELEASE:**

Date: May 4, 2009

Time: 1430 Hours

### **H1N1 FLU PANDEMIC 2009 UPDATE**

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Routt County, Colorado – **What do we know?** At this time, there are seven confirmed H1N1 flu virus cases in Colorado. We do not have a confirmed case in Routt County. We know that the number of confirmed cases of this virus is growing daily across the world. The World Health Organization is considering upgrading their pandemic alert to Phase 6 on a scale of 6.

The H1N1 flu virus is made up of three genetic components: human, swine and bird. There is no risk of obtaining this virus from eating pork. This is a human disease; not a swine disease. Influenza can be passed to individuals a day before symptoms begin so it is very difficult to prevent the spread.

At the current time there is no vaccine against this particular H1N1. Seed virus has been sent to vaccine manufacturers. It will be four months or longer before one is available if it is decided that vaccine is necessary and a safe effective vaccine can be produced.

There are antivirals available to treat influenza and there have been enormous efforts to produce tamiflu in preparation of pandemic influenza. Currently, there appears to be no commercial shortage of antiviral medications, so we anticipate that we have adequate supplies between the national stockpile and the personal health care system. The CDC has released a portion of its national stockpile to all states. This includes antivirals and personal protective equipment. Antivirals can be used to treat H1N1 virus, but should be reserved for those with severe risk and at high risk of complications. They shorten the duration and lessen the severity, but do not cure the disease.

CDC is reporting 286 laboratory confirmed human infections with novel H1N1 flu in the United States. (Yesterday, CDC reported 226 cases.) This afternoon (May 4, 2009), CDC will begin reporting the total number of "probable" cases of infection with novel influenza A (H1N1) virus nationwide. (CDC will not be reporting probable cases at the state level.) To date, 99 percent of "probable" cases sent to

CDC by state health departments have been laboratory confirmed as cases of novel H1N1 flu infection. Reporting probable cases will better reflect the true impact of novel H1N1 flu on the United States. Today, at 1pm, CDC will post the number of probable cases in the U.S.

The list of states with the numbers of people who are confirmed cases is updated daily at approximately 11 a.m. at <http://www.cdc.gov/h1n1flu/>.

The Southern Hemisphere is just going into their flu season and how this virus behaves will give us some clues about what we can expect for the Northern Hemisphere. Soon we will likely reach a point where it will become impossible to count individual cases. At that point, we will be transitioning to using reporting systems similar to those used for seasonal flu. We don't count individual cases for seasonal flu, we just monitor activity levels through a nationwide surveillance system, which we will be using to monitor spread of illness caused by this new virus.

**What we don't know?** We don't know if this virus will be same as the seasonal flu, worse, or much worse. We don't know if it might fizzle out by summer, only to return in the fall. The big question is how virulent will this virus become. What age groups will be most susceptible? Will past exposure to certain influenza viruses give some cross immunity, such as the 1977/78 swine flu?

**What are we doing to prepare?** From 2005 to August 2008, \$6 Billion was appropriated for pandemic preparedness. Half of the money went to the development of a better process of producing vaccine, but much of it went to improving the public health infrastructure to respond to "not if, but when" the pandemic would occur. Much of it also went to public education and preparing communities to respond.

We have been involved in daily briefings from the CDPHE and they have been participating in a daily exchange of information from the CDC. We have plans in place for the distribution of Strategic National Stockpile that arrived in Western Colorado late last week. We understand that antivirals have begun to arrive at CDPHE. They are determining how and when to further deploy the supplies. We have been providing information to clinicians, schools, and our other community partners.

**What the Public should know? The public should not panic, but should be vigilant in following the status of the H1N1 virus and know where to get reliable information.**

The public should take seriously the recommended personal protective measures. As we do during the regular flu season, we encourage people to take those personal precautions to decrease their chances of getting the flu. Regular hand washing and the use of alcohol-based hand cleaners, covering sneezes and coughs, and avoiding others with respiratory illnesses are recommended. Prevention is still the best strategy.

The symptoms of the H1N1 flu virus in people are similar to the symptoms of seasonal flu and may include:

- Fever greater than 100°F
- sore throat, cough
- stuffy nose, chills
- headache
- body aches
- fatigue
- Some people have reported diarrhea and vomiting associated with swine flu.

We are asking all Routt County families to make sure they and their families are prepared for an emergency that might require staying at home for several days. We want to take the opportunity to remind people to be prepared at home, including considering having food, water and other necessities. We are asking all individuals with mild flu-like illness to stay home and limit contact with others. This is regardless of travel history. Children and adolescents with fever should not go to day care or school. Adults with fever should not go to work until their symptoms resolve. Individuals with severe illness, such as difficulty breathing, and those with medical conditions that could be worsened by the flu should contact their health care provider.

Remember that there are a lot of questions we don't have answers to at this point. As the situation has evolved, information has been changing.

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