

H1N1 Frequently Asked Questions and Answers

- [Versión en español](#)

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Novel H1N1 Flu – General Information

What is H1N1?

H1N1 is a new type A influenza (flu) virus that was first seen in the United States in April 2009. Health officials initially called it "swine flu" because it looked similar to some flu viruses that pigs get. However, further study showed that H1N1 contains a combination of flu virus genes that circulate in some pigs, birds and humans. H1N1 flu is not the same as swine flu.

As health officials learn more about this flu virus, they continue to identify it more accurately. As a result, you may hear or see it called by different names, including "novel H1N1 influenza (flu) virus," "H1N1 influenza (flu) virus" or "novel influenza A (H1N1) virus infection." These are all describing this same, newly seen influenza virus in people. The word "novel" indicates that this is a new influenza virus with a gene combination that has not been seen before.

Is H1N1 flu the same as swine flu?

No. Swine flu is a respiratory disease of pigs caused by a different influenza virus. Outbreaks of swine flu happen regularly in pigs. People do not normally get swine flu, but human infections can and do happen. Most commonly, human cases of swine flu happen in people who are around pigs but it's possible for swine flu viruses to spread from person to person.

Is H1N1 flu the same as seasonal flu?

No. Seasonal flu is a contagious respiratory illness caused by a different flu virus than H1N1 flu. Seasonal flu occurs every year, most often during the winter and early spring. Seasonal flu most severely affects people 65 years and older, while H1N1 flu is currently being seen in children and young adults between the ages of 5 and 24 years old. In addition, a new vaccine is available every year to help prevent seasonal flu. Currently there is no vaccine against H1N1 flu, although work is being done to create one. [More information on seasonal flu and the seasonal flu vaccine.](#)

Is H1N1 flu the same as the bird flu (avian flu) that has been in the news in recent years?

No. Even though novel H1N1 contains avian (bird) genes, it is not the same. There are many different types of influenza viruses. The bird flu virus that has been watched closely is categorized as influenza A (H5N1), and is transmitted primarily among birds. Bird flu (avian flu) has not been found in the United States.

Is H1N1 flu the same as pandemic flu?

It is unknown whether H1N1 flu could become a pandemic. Pandemic flu can occur when a new influenza A virus emerges for which there is little or no immunity in the human population, when it begins to cause serious illness and spreads easily between people worldwide. Because it is currently unknown how severe the illness will be in the general population and how easily the virus spreads between people, H1N1 flu is **not** the same as pandemic flu.

Current H1N1 Situation in the US, New York and Worldwide

How many people in the U.S. have confirmed H1N1 flu?

Current information on the number of confirmed cases of novel H1N1 flu in the U.S. is available on the [Centers for Disease Control and Prevention website](#) . In addition, CDC is now tracking H1N1 flu activity through their [routine influenza surveillance systems](#) and [reporting data weekly](#).

How many people in New York State have been diagnosed with H1N1 flu?

[See the number of confirmed H1N1 cases in New York State](#) (PDF, 278KB, 1pg.).

What is New York State doing to identify additional H1N1 flu cases in New York?

The New York State Department of Health conducts flu surveillance throughout the year. To ensure rapid detection of H1N1 flu cases, the New York State Department of Health and approved public health laboratories in NYS are testing selected laboratory samples from people who are suspected of having H1N1 flu.

What is the current H1N1 flu situation in New York City?

Information on the situation in New York City and [recommendations for New York City residents](#) are available on the NYC Department of Health and Mental Hygiene website.

What other countries have confirmed cases of H1N1 flu?

Information on confirmed cases of novel H1N1 flu outside of the United States is available on the [World Health Organization website](#).

Novel H1N1 Flu – Specifics about the Illness and Treatment

How does the H1N1 flu virus spread?

The federal Centers for Disease Control and Prevention (CDC) has determined the H1N1 virus spreads from person to person, in the same way that seasonal flu spreads. Influenza viruses are thought to spread from person to person in respiratory droplets of coughs and sneezes. This can happen when droplets from a cough or sneeze of an infected person are propelled through the air and deposited on the mouth or nose of people nearby. Influenza viruses may also be spread when a person touches respiratory droplets on another person or an object and then touches their own mouth or nose (or someone else's mouth or nose) before washing their hands. Health officials are currently studying how easily the H1N1 flu virus spreads between people.

How long after exposure do symptoms appear?

Because this virus is new, it is not known how long it takes symptoms to appear after exposure. It could range from 1-7 days, and is more likely 1-4 days.

What are the signs and symptoms of H1N1 flu?

The symptoms of this new H1N1 flu in people are similar to the symptoms of regular human flu and include:

- Fever greater than 100°F
- Cough
- Sore throat
- Body aches
- Headache
- Chills
- Fatigue (weariness, tiredness, or lack of energy)
- Some people have also reported diarrhea and vomiting, which are not usual symptoms of seasonal flu

Like seasonal flu, novel H1N1 flu can vary in severity from mild to severe, and may cause a worsening of underlying chronic medical conditions. The severity of illness from the current H1N1 flu virus is not yet clear and is currently being studied by the federal Centers for Disease Control and Prevention (CDC).

Can H1N1 flu be treated?

Yes. There are anti-flu drugs that your health care provider can prescribe to treat H1N1 flu. They work best if started within 2 days of the beginning of symptoms. Your health care provider can determine if you need treatment. The federal Centers for Disease Control and Prevention (CDC) recommends that influenza antiviral treatment be given to all hospitalized patients with confirmed, probable or suspected H1N1 flu and people who are at higher risk for seasonal flu complications who have confirmed, probable or suspected H1N1.

Do I need a prescription for one of the anti-flu drugs?

Yes. Antiviral drugs are prescription medicines (pills, liquid or an inhaler) that fight against the flu by keeping flu viruses from reproducing in the body. The two prescription antiviral medications that health care providers can prescribe to treat H1N1 flu are oseltamivir (oss-el-TAM-eh-veer), brand name "Tamiflu," and zanamivir (zan-AM-i-veer), brand name "Relenza."

Do most insurers cover prescription antiviral medications?

Health insurance may cover the cost of these drugs. Talk to your health insurance company to find out if you are covered for these medications.

What are the signs of more severe illness with H1N1 flu?

While most of the current novel H1N1 influenza cases have been mild, severe illnesses and death have occurred from this new flu virus. If you, or someone you know, becomes ill and experiences any of the following warning signs, seek emergency medical care immediately.

In children, symptoms that require emergency medical attention include:

- Fast breathing or trouble breathing
- Bluish or gray skin color
- Not drinking enough fluids
- Severe or persistent vomiting
- Not waking up or not interacting
- Being so irritable that the child does not want to be held
- Flu-like symptoms improve but then return with fever and worse cough

In adults, symptoms that require emergency medical attention include:

- Difficulty breathing or shortness of breath
- Pain or pressure in the chest or abdomen
- Sudden dizziness
- Confusion
- Severe or persistent vomiting
- Flu-like symptoms improve but then return with fever and worse cough

Who is at increased risk of developing severe illness or complications from H1N1 flu?

People at increased risk of severe illness or complications from influenza include:

- Children younger than 5 years old (especially those under 2 years old)
- Persons aged 65 years or older
- Residents of nursing homes and other chronic-care facilities

- Children and adolescents (younger than 18 years) who are receiving long-term aspirin therapy and who might be at risk for experiencing Reye syndrome after influenza virus infection
- Pregnant women
- People with:
 - Lung conditions (including asthma)
 - Heart conditions (except hypertension)
 - Chronic kidney and liver disease
 - Blood disorders (including sickle cell disease)
 - Neurologic disorders (including intellectual and developmental disability, cerebral palsy, spinal cord injuries, seizure disorders or other neuromuscular disorders)
 - Metabolic disorders (such as diabetes mellitus)
 - Immunosuppression (including those who have immune systems that are weakened by medications or HIV/AIDS)

What should parents do if their young children or children with chronic health problems develop flu-like symptoms?

Talk with their child's health care provider who will decide if the child should be prescribed an anti-flu medication or other treatment.

How long can people infected with the H1N1 influenza virus spread it to others?

People with this novel H1N1 flu infection may be contagious from one day before they develop symptoms up to 7 days following illness onset. Children, especially younger children, might potentially be contagious for longer periods.

Can I be tested for H1N1 flu?

Contact your health care provider if you are ill. Your doctor may decide to test you for this new flu, and request special testing if indicated. The New York State Department of Health has provided guidance to health care providers throughout the state regarding who should be tested for H1N1 flu and what specimens to collect.

School-Related Information

I heard that some schools have been closed because of H1N1 flu. Should I keep my child home from school as a precaution?

No. Parents do not need to keep otherwise healthy children home from school unless directed to do so by local school and health officials.

How can I find out if my child's school is closed because of H1N1 flu?

If your child attends a New York City public school (in the Bronx, Manhattan, Brooklyn, Queens or Staten Island), [visit the NYC Department of Education website](#).

If your child attends public school outside of New York City or a private school, you should be notified by the school system through their usual school closing procedures. If you do not know how your child's school will notify you, visit the school district's website or call their administrative offices.

Who makes the decision to close schools?

School closings are a local decision made by schools; however, the New York State Department of Health and local health departments work closely with school districts and individual schools to make sound recommendations based on individual circumstances.

How do school and health officials decide to close a school?

In accordance with CDC guidance, New York State school closing decisions have been based on faculty and student absenteeism levels that interfere with the school's ability to function. On May 22, 2009, the New York State Department of Health and State Education Department finalized a voluntary statewide system for monitoring illness and absenteeism in schools that will enhance the monitoring that has been underway since the start of the H1N1 outbreak. Under the new statewide monitoring system, local school officials, in consultation with local health officials, will continue to make decisions about if and when to close schools.

I know of students, faculty or staff from a school who are sick—should the school close?

School closings because of a flu outbreak are decided by the school district and state officials. Their decisions are based on school absenteeism and how staffing shortages may affect school operations. School closure is not advised unless a large number of faculty or students are absent and their absence interferes with the school's ability to function.

Does closing schools help prevent the spread of H1N1 flu?

Because of the large number of reported H1N1 flu cases and disease clusters in the U.S., the spread of the H1N1 flu virus within communities makes individual school and child care program closure less effective as a control measure. Some schools have and may temporarily close due to high rates of absenteeism and influenza-like illness (ILI) that interfere with the school's ability to function.

What is the best way to prevent the spread of H1N1 flu at schools that have confirmed cases?

The best way to reduce the spread of influenza in schools continues to be the early identification of ill students, faculty or staff, having ill persons stay home from school for 7 days or until 24 hours after symptoms resolve (whichever is longer) and having all students, faculty and staff practice good respiratory and hand hygiene etiquette. See the next question and answer for information on respiratory and hand hygiene etiquette.

What does "good respiratory and hand hygiene etiquette" mean?

Good respiratory and hand hygiene etiquette means that people carefully cover their nose and mouth with a disposable tissue every time they cough or sneeze. If they do not have a tissue, they should cough or sneeze into their sleeves or upper arm. People should dispose of used tissue immediately into a trash receptacle and then wash their hands with soap and water or use an alcohol-based hand sanitizer if hand washing is not possible.

My child had contact with a student from a school that closed because of the H1N1 flu, who has developed flu symptoms or who has been diagnosed with H1N1 flu. Should I be concerned? What should I do?

It is not possible to know if your child was infected with the H1N1 virus or to determine how likely it is that your child will become sick. If your child is at high risk for complications of the flu (for example, is less than 5 years old; has asthma, heart or kidney disease or a weakened immune system), call your child's health care provider to see if prescription antiviral medication that may prevent H1N1 flu (prophylaxis) is needed. If your child is not at high risk, monitor your child for influenza-like illness (ILI) and call your child's health care provider, who will determine whether influenza testing or treatment is needed.

What is the best way to be sure people who have flu-like symptoms or H1N1 flu do not go to school?

Parents and guardians should monitor their children every morning for flu-like symptoms (fever greater than 100°F, cough, sore throat, body aches, headache, chills, fatigue or possible diarrhea or vomiting). Faculty and staff should check themselves for flu-like symptoms. Ill persons should stay home.

What if someone comes to school and then begins to show flu-like symptoms or H1N1 flu symptoms?

Students, faculty and staff who appear to have an influenza-like illness (ILI) when they come to school or who become ill during the school day should be isolated in a room separate from other people. Their temperature should be taken and documented. Ill students, faculty or staff should be sent home in accordance with district procedures.

How long should students, faculty or staff with flu-like symptoms or confirmed H1N1 flu stay out of school?

Students, faculty or staff with influenza-like illness (ILI) should stay home and not attend school or go into the community, except to seek medical care, for at least 7 days, even if they feel better sooner. **Note:** Some children and adults who have had the flu may experience a lasting cough after all other symptoms end. If 7 days have passed, they no longer have a fever, and otherwise feel well for at least 24 hours, they may return to school, even if they have this residual (leftover) cough.

What should students, faculty or staff do if they are still sick with flu-like symptoms or confirmed H1N1 flu after 7 days? How much longer should they stay home from school?

Students, faculty or staff who are still sick 7 days after they become ill should continue to stay home from school until at least 24 hours after symptoms have ended. **Note:** Some children and adults who have had the flu may experience a lasting cough after all other symptoms end. If 7 days have passed, they no longer have a fever, and otherwise feel well for at least 24 hours, they may return to school, even if they have this residual (leftover) cough.

If my child shows flu-like symptoms or has been diagnosed with H1N1 flu, can he or she still attend day care or other afterschool activities?

No. Ill children should stay home. They should not attend alternative childcare, afterschool activities or other group activities.

Prevention

Is there a vaccine against the H1N1 flu virus?

At this time, there is no vaccine for H1N1 flu. The seasonal influenza vaccine does not provide protection against this new H1N1 flu. This makes ordinary precautions, such as covering coughs and washing hands, all the more important.

What can I do to protect myself from getting sick?

There are everyday actions that can help prevent the spread of germs that cause respiratory illnesses like influenza. Take these steps to protect your health:

- Avoid close contact (within 6 feet) with sick people as much as possible.
- Wash your hands often with soap and water, especially after you cough or sneeze. Alcohol-based hand sanitizers are also effective.
- Avoid touching your eyes, nose or mouth. Germs spread this way.
- Cover your nose and mouth with a tissue if you cough or sneeze. Throw the tissue in the trash after you use it and wash your hands or use an alcohol-based hand sanitizer.

Should I avoid large social events and other public gatherings?

If you are at high risk of developing complications if you become infected with the H1N1 flu virus, consider staying away from public gatherings in communities where there are reported cases of H1N1 flu. People at high risk of complications include those with certain chronic medical conditions, children less than 5 years old, persons 65 years or older, people with weakened immune systems and pregnant women. Contact your health care provider if you have questions.

If you have any symptoms of an influenza-like illness (ILI), for example, fever with either cough or sore throat, stay home. See "What should I do if I get sick and have flu-like symptoms or am diagnosed with H1N1 flu?" below for more information on what to do if you or someone in your household develops an ILI.

At this time, CDC is not recommending that people wear masks or respirators at public gatherings. Wash your hands frequently with soap and water or use an alcohol-based hand sanitizer often and avoid touching your eyes, nose and mouth.

Can I get H1N1 flu from eating or preparing pork?

No. H1N1 influenza viruses are not spread by food. You cannot get H1N1 virus from eating pork or pork products. Eating properly handled and cooked pork products is safe.

Should I avoid travel to other countries or areas of the United States where H1N1 flu has been identified?

CDC has removed its recommendation that U.S. travelers avoid travel to Mexico. They have issued a "Travel Health Precaution" that recommends that you take steps to protect yourself from exposure to H1N1 flu if you travel to Mexico.

If you are at high risk for complications from any kind of influenza-like illness (ILI), consider postponing travel to Mexico or discuss the risks and benefits of traveling there with your health care provider. [More information on travel and current recommendations.](#)

Should I ask my health care provider for a prescription anti-flu drug to prevent H1N1 flu if I am healthy, not pregnant or do not have a chronic medical condition?

No. Antiviral drugs are usually used to treat people who are at risk for developing life-threatening complications from the flu. There is no reason to routinely ask for one of these drugs to keep at home, or to take them just as a precaution. Over-use could result in limited supplies for those who need it most. In addition, over-use of antiviral drugs has been known to lead to flu viruses becoming resistant to the drugs. All drugs, including antivirals, can cause side effects and should only be used when necessary under the direction of a health care provider.

Consult your health care provider if you are pregnant or have a chronic medical condition. In some cases, taking a prescription antiviral medication may be recommended to prevent you from becoming infected with the H1N1 flu virus.

Illness in the Household

What should I do if I have flu-like symptoms or am diagnosed with H1N1 flu?

- Stay home and limit contact with others in your household as much as possible.
- To help prevent others in your household from becoming ill, wear a disposable facemask when close contact with other people in the home is unavoidable (including when breastfeeding, if applicable). Disposable facemasks can be purchased at pharmacies and medical supply, hardware or home improvement stores and may be labeled as surgical, dental, medical procedure, isolation or laser masks. Facemasks cover the nose and mouth and reduce the number of infectious droplets you may

cough or sneeze into the air. Wash your hands or use an alcohol-based hand sanitizer immediately after removing the facemask and disposing of it in the trash.

- Unless necessary for medical care, stay home. If you must be in a public place, protect others by wearing a disposable facemask and make the time you spend in crowded settings as short as possible.
- Rest, drink plenty of clear fluids and take medications that you typically use to treat flu-like symptoms, such as acetaminophen or ibuprofen.
- Cover your mouth and nose with a tissue when you cough or sneeze. Promptly throw the tissue into the trash and wash your hands with soap and water or an alcohol-based hand sanitizer.
- Avoid having visitors. If visitors must enter your home, they should avoid close contact with you.
- Stay home for 7 days after your symptoms begin or until you have been symptom-free for 24 hours, whichever is longer.

What precautions and steps should I take if I live with someone with confirmed H1N1 flu?

Follow the same steps and precautions you would to avoid ordinary seasonal flu:

- If you are taking care of someone with H1N1 flu, speak with your health care provider to see if you should take prescription antiviral medication to prevent catching it.
- If possible, place the person with H1N1 in a separate room, away from the common areas of the house or apartment. Respiratory treatments, such as inhalers and nebulizers, should be used by the ill person in a separate room away from common areas of the house when possible.
- Limit your contact with the sick person. Avoid close contact such as kissing and do **not** share towels, drinking glasses, eating utensils or toothbrushes with the ill person.
- When holding small children who are sick, place their chin on your shoulder so that they will not cough in your face.
- If you must have close contact (within 6 feet) with or are providing care to a member of your household with an influenza-like illness (ILI) or confirmed H1N1 flu **and** you are at increased risk of severe illness or complications from influenza, consider wearing a disposable facemask. After removing the facemask, throw it in the trash and immediately wash your hands or use an alcohol-based hand sanitizer. Contact your health care provider if you have further questions.
- All household members, ill and well, should regularly wash their hands with soap and water or use an alcohol-based hand sanitizer.
- Provide disposable tissues to ill persons to use to cover their mouth and nose whenever they sneeze, cough or blow their nose. Make sure they immediately throw their used tissues in a nearby wastebasket or trash receptacle. Both ill and well persons should wash their hands or use an alcohol-based hand sanitizer after touching used tissues, similar waste and after emptying wastebaskets or trash receptacles.
- Do **not** give infants, children and young people under 18 years old aspirin or aspirin-containing products, for example, regular Pepto-Bismol®, which can increase the risk of a rare and serious illness called Reye's syndrome. "Children's Pepto®" does not contain salicylates (sa-LIS-a-lates), of which aspirin is a type of, but does not treat diarrhea.
- Avoid having visitors. If visitors must enter the home, they should avoid close contact with the sick person.

- The dirty dishes, eating utensils, and laundry of the ill person do **not** need to be washed separately from other members of the household. Use detergent and wash as usual.
- Monitor well household members closely for the development of illness. If they develop influenza-like illness (ILI), for example fever and cough, they should stay home for 7 days after their symptoms begin or until they have been symptom-free for 24 hours, whichever is longer.

Can household cleaning help prevent transmission?

Yes. To help prevent transmission, clean frequently touched surfaces, such as doorknobs, refrigerator handle, toilet seat and handle. Clean all hard surfaces, for example, bedside tables, bathroom surfaces and children's toys, with a standard household disinfectant. If surfaces are visibly dirty, use a household cleaner first, then a disinfectant. Wash your hands with soap and water after cleaning surfaces and items. For more information, visit [Information about Cleaning and Disinfectants](#).

Further H1N1 information can be found on the following web sites

- [General influenza information](#) from the New York State Department of Health
- [New York State H1N1 Influenza Update](#)
- [H1N1 \(SO\) Flu Information](#) - New York City Department of Health and Mental Hygiene
- [H1N1 Flu \(Swine Flu\)](#) - Centers for Disease Control and Prevention (CDC)
- [2009 H1N1 Flu \(Swine Flu\)](#) - National Library of Medicine
- [Influenza A \(H1N1\)](#) - World Health Organization (WHO)

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