

SWINE FLU and TRAVEL – CARRY TAMIFLU?

Swine Influenza (SF)

April, 2009

Tamiflu (oseltamivir phosphate) is effective against influenza virus A and B. This includes the SF, Type A H1N1 strain. This virus has been confirmed to have infected a number of people, with a definite risk of death. Many young, healthy individuals have been infected.

Tamiflu can speed recovery by 1-2 days, and markedly reduces serious flu complications, such as secondary bacterial pneumonia.

To be effective Tamiflu must be taken within 48 hours of first symptoms: abrupt, high fever; cough/congestion; severe muscle aches; headaches; occasional diarrhea. There is no human vaccine available for the H1N1 strain.

The concern is for an influenza pandemic – multiple, concurrent continental epidemics worldwide. The 1918 Spanish influenza pandemic caused 25 million deaths in 6 months. The pre-condition for that pandemic as well as the one predicted to occur soon in the upcoming years (by the Asian avian A H5N1 strain or other flu virus) is an immunologically novel influenza virus for humans, with no immunity experience from prior illness with the specific flu virus strain or closely related prior flu virus strains or from influenza vaccines used in prior years. In other words, with an epidemic from a viral strain to which people are immunologically naked, 2.2 million deaths in the U.S. are predicted. Worldwide the toll would be unimaginable.

These facts should at least prompt consideration for carrying a supply (5 day treatment course) of Tamiflu by individuals traveling or residing in countries where SF cases have occurred (and possibly contiguous nations, as well).

Go to cdc.gov and the World Health Organization (WHO) websites to update information most current disease activity in planned destinations.

Availability of the drug locally cannot be relied upon and it must be started immediately upon becoming ill or after credible exposure (as an illness preventive strategy). Relenza (zanamivir) is effective, but cannot be used in those less than 12 years old or in those with respiratory disease (asthma, COPD, etc.).

Asian Avian Flu Precautions

1. Regional Destination Disease Activity Information: update yourself:
<http://www.cdc.gov/>
2. Travel Medicine Kit: include thermometer
alcohol-based hand rub for hand hygiene
Tamiflu: Treatment- 75mg twice daily x 5 days
Prevention- 75 mg daily while exposure is ongoing
3. In-Country Healthcare Resources: identify pre-travel
4. Medical Evacuation Health Insurance
5. During Travel
 - a) Avoid direct contact with individuals with flu-like illness or with anyone who has had contact with such a person in the past 2 weeks
 - 1) Avoid meetings or waiting in close proximity with others in close-quarters, shared air spaces.
 - b) Perform careful, frequent hand cleansing.
 - c) If you become sick abroad, contact U.S. consulate to locate medical services.

Note: Pork ingestion does not appear associated with Swine Flu infection, though all pork products should be thoroughly cooked anyway.
6. After Travel

If you become ill within 10 days of return, immediately notify your physician or a travel medicine/infectious diseases specialist, emphasizing the specifics of your recent travel.

 - a) As soon as you are aware that you may have influenza, wear an N-95 respiratory mask (on your way to see your physician).

Edward R. Rensimer, MD, FACP
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