

What treatments work for swine flu?

Swine flu causes an illness very much like seasonal flu. It can make you feel very ill, with a high temperature and cough. There are treatments that can help, and things you can do to cut your chances of getting the virus.

The main drug being used to treat swine flu is called **oseltamivir (brand name Tamiflu)**. You need to take it within 48 hours of getting symptoms, to get the most benefit.

Basic hygiene precautions such as **washing your hands** frequently with soap and water should help protect against swine flu.

The swine flu vaccine is likely to offer some protection against catching swine flu.

We've looked closely at the research and ranked the treatments into categories, according to whether they work.

Treatments that are likely to work if you have swine flu

Oseltamivir (Tamiflu)

Oseltamivir (brand name Tamiflu) is an **antiviral drug**. It works by stopping the virus from reproducing. It works best in the first couple of days after you've been infected, when the virus is reproducing fast. If possible, you should start to take it within 48 hours of your symptoms starting.

It comes as capsules, or as a liquid for very young children who can't take capsules. You take it for five days. 3

In the UK, most people with swine flu are offered treatment with oseltamivir. But pregnant women and people with chronic kidney disease may be treated with a similar type of antiviral drug, called zanamivir (brand name Relenza), instead. 4

There haven't been any good-quality studies looking at oseltamivir for treating people with swine flu. But we know from other studies that it works against seasonal flu. 5 Also, studies carried out in the laboratory show that this type of swine flu is susceptible to oseltamivir. 6

Oseltamivir isn't a cure for flu. This is how it helps: 5

It may cut the time you are ill by one to two days.

You may be able to get back to your normal activities faster

You may be less likely to get complications, including bronchitis and pneumonia for adults, and ear infections for children.

A more recent review of the evidence questioned how much benefit children with flu get from oseltamivir. It may cut the chances of getting ear infections or asthma attacks, if given early enough. But the evidence is not clear. 7

Oseltamivir does have side effects. The main ones are feeling sick (nausea) and vomiting. 8

The European Medicines Agency, which checks the safety of medicines used in Europe, has warned that a very small number of people taking oseltamivir may be at risk of injuring themselves, or having accidents. Some people taking the drug have experienced convulsions (fits), unusual behaviour and feelings of confusion (becoming delirious). If you are caring for someone taking oseltamivir, contact a doctor at once if they show any sign of unusual behaviour. 9

A report on school children who were given oseltamivir to prevent the spread of swine flu, at the start of the outbreak, says that about half of children experienced some side effects. 10 Feeling sick, stomach pains, and trouble sleeping were the most commonly-reported side effects.

Is this drug safe for pregnant or breastfeeding women?

Oseltamivir seems to be safe to take during pregnancy or while breastfeeding. 11 Having a bad attack of flu can be dangerous for pregnant women, and for their babies, so doctors believe that it's **much safer** for pregnant women to take antiviral medicines like oseltamivir than to go without treatment. 2

Studies of pregnant women who've taken oseltamivir have shown no signs that it can be harmful for unborn babies. And studies looking at breastfeeding mothers found that only tiny amounts of oseltamivir get into breast milk. 11 You should carry on breastfeeding your baby if you are taking oseltamivir for flu. But you may be advised to wear a mask, to avoid passing the virus to your baby when you cough or sneeze.

In the UK, the Health Protection Agency says pregnant women should normally be treated with zanamivir, because it comes as a spray straight to the lungs, instead of a capsule that spreads the drug around the body. That means it is less likely to affect the growing baby. See below for more information about zanamivir. 4

Zanamivir (Relenza)

Zanamivir (Relenza) is also an antiviral drug. It comes as a dry powder that you breathe in through your mouth, using a device called a Diskhaler.

It works best in the first couple of days after you've been infected, while the virus is reproducing fast. If possible, you should start to take it within 48 hours of your symptoms starting. You'll need to take it for five days. 12

In the UK, most people with swine flu are being treated with oseltamivir. But some people, including most pregnant women and people with chronic kidney disease, are being treated with zanamivir. 4

There haven't been any good-quality studies looking at zanamivir for treating people with swine flu. But we know from studies that it works against seasonal flu. 5 Also, studies carried out in the laboratory show that this type of swine flu is susceptible to zanamivir. 6

Zanamivir isn't a cure for flu. This is how it helps: 5

It may cut the time you are ill by about one day

You may be able to get back to your normal activities faster

Zanamivir may reduce your chances of getting complications from flu, such as pneumonia.

A more recent review of the evidence questioned how much benefit children with flu get from zanamivir. One study said it had no effect on the chances of children getting complications such as ear infections. But the evidence is not clear. 7

Zanamivir does have side effects. The main one is diarrhoea. Also, zanamivir shouldn't be used by people who have bad asthma, except under close medical supervision. 12

There have been some reports of people becoming delirious and confused and injuring themselves while taking zanamivir. Children have been mainly affected and the symptoms go away quickly. We don't know if zanamivir causes these symptoms, as they often happen with the flu. If you are caring for someone taking zanamivir, contact a doctor if they show signs of unusual behaviour. 13

Is this drug safe for pregnant or breastfeeding women?

There hasn't been much research looking at the effect of zanamivir on women who are pregnant and breastfeeding. 11 But having a bad attack of flu can be dangerous for pregnant women, and for their babies, so doctors believe that it's **much safer** for pregnant women to take antiviral medicines than to go without treatment. 2

Before the current outbreak, very few pregnant women had taken zanamivir, so it's hard to say how safe it is in pregnancy. But in the UK, the Health Protection Agency says pregnant women should be treated with zanamivir, because it comes as a spray straight to the lungs, instead of a capsule that spreads the drug around the body. This means zanamivir is less likely to affect the growing baby through the mother's blood. 4

Studies looking at breastfeeding found that only tiny amounts of zanamivir get into breast milk. 11 You should carry on breastfeeding your baby if you're taking zanamivir for flu. But you may be advised to wear a mask, to avoid passing the virus to your baby when you cough or sneeze.

Treatments that are likely to work to prevent swine flu

Washing your hands

Sensible hygiene precautions, such as regularly washing your hands with soap and hot water, help protect against swine flu (and any other type of cold or flu).

You don't need to use special hand-washes or alcohol hand rubs. One study showed that washing hands with soap and water got rid of as much, if not more, flu virus from people's hands, as alcohol hand rubs. 14

Studies show regular hand-washing works well, especially for children. Anyone with small children knows they're often the first to pick up viruses. Good-quality studies found that increased hand-washing among young children cut the number who caught respiratory viruses. Studies of adults (for example, one looking at army recruits in barracks) also showed a reduction in respiratory diseases with increased hand-washing. 15

One study says you need to wash your hands at least 10 times a day, but another says more than four times a day had an effect. Use common sense: wash hands if you've touched something lots of other people have touched (such as a handrail on public transport), after sneezing or coughing into a tissue or your hands, after using the toilet, and before eating or preparing food. You should also regularly clean hard surfaces, especially those that get touched a lot, in the workplace or at home.

Hand-washing doesn't guarantee that you won't catch swine flu. But it does reduce the chances. And if everyone followed basic hygiene measures, including coughing or sneezing into a tissue, fewer people would be infected overall.

Swine flu vaccine

The swine flu vaccine is especially designed to work against swine flu and is likely to offer you some protection against the disease.

Vaccines help your body make antibodies before it is infected by a virus. Antibodies are part of the body's immune system and they help fight off infections. So when you come into contact with the live flu virus, your body already knows how to fight it. The swine flu vaccine is prepared using proteins from the swine flu virus that have been made harmless in the laboratory.

Two brands of vaccine are to be used in the UK vaccination programme: Pandemrix , made by the drug manufacturer GlaxoSmithKline, and Celvapan , made by Baxter. Most people will have Pandemrix.

Pregnant women and people with chronic diseases were offered vaccination first, because they are more at risk of complications from swine flu. Young children aged six months to five years are also being offered the vaccine. Other groups of people may be added over time. If you need a vaccination, you'll be contacted by your GP surgery and invited to attend. 16

The vaccine is not intended to replace the normal seasonal flu vaccine. If you normally have the seasonal flu vaccine, you may need both vaccines. Your local health care provider will tell you when you can come and be vaccinated.

People are expected to have two doses of the vaccine, three weeks apart. But research shows one dose might be enough for some people. 17

We don't know exactly how well the swine flu vaccine will cut the chances of getting swine flu. Normal flu vaccines reduce an adult's chance of getting flu by about 50 to 70 percent. 19 Research suggests that about 9 in 10 people who have the swine flu vaccine produce antibodies to swine flu. 17 That should mean their immune system is prepared to fight off the virus, but it's not a guaranteed protection against swine flu.

The vaccine is unlikely to cause serious side effects. It is similar to vaccines for seasonal flu, which have been given to millions of people, and which rarely cause serious problems. So far, people in studies of swine flu vaccines have not had serious side effects. 17

The side effects most commonly reported in studies of Pandemrix include swollen lymph glands, headache, bruising, pain, soreness and swelling at

the point where you have the injection, muscle and joint aches, and a high temperature. But all of these side effects are temporary and usually mild. 20
If you're allergic to eggs, tell your doctor. The Pandemrix swine flu vaccine uses eggs in its manufacturing process and you may be advised to have Celvepan instead. Celvepan is made differently, without the use of eggs.

There's been some concern about Guillain-Barré It was linked with swine flu vaccine during a vaccination campaign in the US in 1976. But some researchers now think the unexpectedly high numbers of cases of Guillain-Barré

Treatments that work to prevent swine flu, but where harms may outweigh benefits

Oseltamivir (Tamiflu)

As well as helping people who already have swine flu, oseltamivir may cut the chances of someone getting swine flu symptoms, when they've come into contact with someone who has it. 5

To prevent flu, you need to take oseltamivir for 10 days. It comes as a capsule, or as a liquid for children who can't take capsules. 3

However, oseltamivir is not often used to prevent flu. Only people who are at high risk of complications from swine flu are being offered antiviral drugs to protect against it, if they are in close everyday contact with someone with swine flu. 23

In the early days of the swine flu outbreak, antiviral drugs were given to everyone who'd come into close contact with someone with confirmed flu. The intention was to slow down the spread of the virus. 24

But there are good reasons to stop doing this, once the virus is widespread. That's because:

Antiviral drugs don't give you lasting protection against flu, like a vaccine does. With so many people infected, you'd need to take repeated courses of antiviral drugs to keep fighting off the virus.

The more people who take antiviral drugs, the higher the chances that the virus will mutate and start to become resistant to the drugs. That means they won't work for people who are really sick with swine flu. So giving antiviral drugs to everyone who's come into contact with swine flu would be dangerous. 25

It's quite common to get side effects from oseltamivir, such as feeling sick and vomiting. It doesn't make sense to take drugs that cause side effects unless you will benefit from them. (See above for more information about the side effects of oseltamivir).

However, some people at high risk of complications if they got swine flu may be offered oseltamivir, if doctors think they need it. Oseltamivir works by stopping the flu virus from reproducing as fast.

There haven't been good quality studies of oseltamivir to prevent swine flu. But studies in people with seasonal flu show it can reduce your chances of getting flu, after being in contact with someone who has flu, by 60 percent to 90 percent. 5

Zanamivir (Relenza)

As well as helping people who already have swine flu, zanamivir may cut the chances of someone getting swine flu symptoms, when they've come into contact with someone who has it.

To prevent flu, you need to take zanamivir for 10 days. It comes as a dry powder that you breathe in through your mouth, using a device called a Diskhaler.

However, zanamivir is not often used to prevent flu. Only people who are at high risk of complications from swine flu are being given antiviral drugs to protect against it, if they are in close everyday contact with someone with swine flu. 23

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The more people who take antiviral drugs, the higher the chances that the virus will mutate and start to become resistant to the drugs. That means they won't work for people who are really sick with swine flu. So giving antiviral drugs to everyone who's come into contact with swine flu would be dangerous. 25

Zanamivir may cause side effects, such as diarrhoea. There's no point taking medicine that causes side effects, unless it's going to be helpful. (See above for more details about the side effects of zanamivir).

However, some people at high risk of complications may be offered zanamivir, if doctors think they need it. Zanamivir works by stopping the flu virus from reproducing as fast.

There haven't been proper studies of zanamivir to prevent swine flu. But studies in people with seasonal flu show it can reduce your chances of getting flu, after being in contact with someone who has flu, by about 60 in 100 to 90 in 100. 5

Treatments that need further study

Wearing a mask

You've probably seen lots of photos of people wearing masks to protect against swine flu. But there's no evidence that wearing masks on the street, or while going about your daily business, will protect you against swine flu.

Most of the studies of masks have been in hospitals, where health care workers caring for people with flu or other respiratory illnesses wear them to stop the virus spreading. Health care workers also wear disposable gowns and rubber gloves to prevent the spread of the virus.

Studies looking at the use of masks during the **SARS (severe acute respiratory syndrome)** outbreak in China during 2003 found they worked quite well, when combined with other protective clothing. 15 But the studies only looked at their use in hospital, not in the wider world.

One small study looked at whether wearing masks in the home helped when someone in the household had seasonal flu. 26 The study showed that masks might help prevent others in the home catching flu, when used alongside careful hand-washing, but the results weren't clear. The study only found an effect when people started improved hand-washing and wearing masks within 36 hours of the person getting symptoms. Everyone in the household was told to wear a mask.

Most masks are designed to stop you from passing on the germs you breathe out, not to stop germs getting in. And you'd have to change your mask every 90 minutes, because after that time it gets too damp with your breath to work properly. You'd need a big supply of masks, and to be sure to dispose of them carefully to avoid infecting people with the used mask.

Masks might be helpful in the following situations: 1

If you have swine flu, to avoid giving it to people who are caring for you

If you are caring for someone at home with swine flu.

About the Author

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