

# Pediatrics Plus

## Myths about Influenza

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Myths about the flu, and other virus infections, abound. These myths, misconceptions, and rumors are as hard to contain and as hard to fight as the virus itself. Given the recent swine flu outbreaks in the U.S., panicking people are spreading some of those myths faster than ever. Here are some examples of the more common myths that you may hear regarding the flu.

### **Myth #1: The flu vaccine can give you the flu.**

This is probably the most common myth about the flu vaccine and it just isn't true. It is scientifically impossible to contract the flu from the flu shot because the shot contains only dead viruses and dead viruses cannot multiply. Even if they could multiply (which they can't), it would take several days for the number of viruses to reach the point that they could give clinical evidence of the flu. Most people that state they caught the flu from the vaccine will say they became sick within several hours of receiving the vaccine which again, is not possible.

Experts suggest two reasons for the persistence of this myth. One is that people mistake the side effects of the vaccine for the flu. While side effects to the current vaccines tend to be limited to a sore arm, in the past, side effects often felt like mild symptoms of the flu. The other is that flu season coincides with a time of year when other respiratory viruses (i.e. cold viruses) are in the air. Thus, many people who get the vaccine have also been exposed to one or more of these other viruses and they become sick within a few days of receiving their flu vaccine. They then blame the flu vaccine for their illness.

### **Myth #2: Vaccines are dangerous.**

In recent years, there's been growing mistrust of vaccines in general. Some believe that there could be a link between vaccines and developmental disorders, like autism, in children. However, there is no scientific evidence that vaccines cause autism, and experts say that we're losing sight of how important vaccines are. The vaccine program in the United States has become so successful and effective that some are more afraid of the very rare side effects to the vaccines than they are to the diseases they prevent. Vaccines are arguably the greatest medical advancements in history. Let's not lose sight of this fact!

If you still have concerns about the safety of vaccines, there are thimerosal-free flu vaccines available. Ask your doctor about these vaccines.

### **Myth #3: Antibiotics can fight the flu.**

Antibiotics do not fight virus infections; they only fight bacterial infections. The flu is not caused by bacteria, but by a virus. Antibiotics have absolutely no effect on any kind of flu.

However, there are bacterial complications to flu infections and these complications may require the use of antibiotics. The flu virus can weaken your body and allow bacteria to infect you. These infections are called secondary bacterial infections and they include bronchitis, ear infections, sinusitis, meningitis, and most often, pneumonia.

### **Myth #4: If you're young and healthy, you don't need to worry about getting the flu vaccine.**

With few exceptions, we should all get the seasonal flu vaccine. While healthy, young people will probably recover from the flu with no lasting effects, they can still be miserable for several days during the illness and miss school, work, and other important events. In addition, protecting oneself

from the flu isn't the only reason to be vaccinated. Healthy individuals tend to forget that while they themselves might be at low risk for developing complications from the flu, others around them might not be. This includes younger siblings, elderly parents and grandparents, and individuals with chronic illness. Failure to vaccinate oneself might endanger others around you. Sometimes, other's safety depends on us getting immunized.

It is not clear whether healthy young adults are less likely to suffer complications to the swine flu. A higher than expected number of deaths from this illness have been among healthy, young adults. The same pattern has been seen in previous flu pandemics. This should make it even more important for everyone, regardless of age or health status, to receive the swine flu vaccine in addition to the seasonal flu vaccine. Today's flu vaccine protects against both.

**Myth #5: The seasonal flu is annoying but harmless.**

While the swine flu is presently capturing most of our attention regarding the upcoming flu season, it is important to remember that the seasonal flu that strikes almost every year can be a very serious condition itself. Each year in the United States, an average of 200,000 people are hospitalized and 36,000 people die from the "run-of-the-mill" flu. Many simply consider the seasonal flu a very bad cold -- until they get it.

**Myth #6: The flu is only dangerous for the elderly.**

While it is true that the people most likely to become seriously ill or die from the seasonal flu are those over 65 years old, the flu can pose dangers to anyone, even healthy, young adults. Young children, especially those under two years of age, have some of the highest rates of hospitalization. Children younger than 6 months of age are at highest risk because they are too young to be immunized. To protect these children and others

from the seasonal flu, do your best to keep them away from those that have the flu or have symptoms of the flu, and vaccinate those around them, including yourself. This is not a simple task and is sometimes "next to impossible" especially for families with school-age children. Simply do your best. Make sure your babysitters and others caring for your children have been vaccinated against the flu (seasonal and swine). Feel free to discuss this with your doctors and staff at Pediatrics Plus.

**Myth #7: "Stomach flu" is a form of influenza.**

The word "flu" has been so overused that it has lost much of its actual meaning. Gastrointestinal viruses are often called the "stomach flu," but other than being caused by viruses and the occasional vomiting and diarrhea that occurs in children with influenza, they have no connection. Vomiting and diarrhea, in the absence of fever, cough, congestion, and generalized body aches, probably do not indicate a case of influenza. When it comes to seasonal flu, vomiting and diarrhea are rare in adults.

**Flu Myth #8: If you get the flu, you can't get it again during that flu season.**

Many people assume that if they have already had the flu during the present season that they cannot get it again that same season. This isn't true. In any given flu season, there are usually both Type A and Type B viruses in circulation. Both can cause the flu. It is possible that you could get infected with one type virus and then the other. So, if you've already had the flu, you should still get the vaccine.

**Flu Myth #9: You do not need to get the flu vaccine each year.**

We do need to get revaccinated each year because flu viruses mutate (change) from year to year. Each year the particular strains of flu that predominate are different from those that predominated the year before. Therefore, the vaccine is changed to better fit the virus that will most likely predominate in the upcoming flu season.

**Flu Myth #10: Cold weather causes the flu.**

It is a myth that going outside in cold weather causes the flu (or any other viral infection for that matter). The same can be said for leaving the window open, sleeping under a ceiling fan, failing to dry our hair, walking in the rain, etc. While there might seem to be a connection -- since flu season coincides with colder months in the U.S. -- there isn't. If this were true, then Florida would have a different flu season than Minnesota. The rise and fall of flu season each year has more to do with the natural cycle of the virus, although experts aren't exactly sure how this works. On the other hand, colder weather might increase one's chances of contracting the flu, but this is not simply because it is cold. It is because we tend to be more confined in closer quarters during the winter months because we are "stuck inside" more during the winter and thus in closer contact to each other. It is this proximity to others that increases the risk of catching virus infections. A similar circumstance exists in day-care centers and classroom settings where indeed the risks are higher of becoming ill.

**Myth #11: Antibacterial soaps will prevent the flu.**

Antibacterial soaps are useless against the influenza virus because the influenza virus is not a bacteria.. Regular hand washing with any soap, however, is a simple and effective way to reduce the transmission of contagious diseases, including the flu.

**Flu Myth #12: If you haven't gotten the seasonal flu vaccine by November (or December or January), there's no point in getting vaccinated.**

The best time to get vaccinated against the seasonal flu is when the vaccine first becomes available in the community in which you live. This may be as early as late August. While it is best to be vaccinated as early as possible, it is rarely too late to receive the vaccine. Although the U.S. flu season usually peaks between late December and early March it can continue into April and even May. So, no

matter what the month, if you haven't had your flu vaccine yet, get it. It's not too late.

Remember, it takes about two weeks after vaccination for your body to produce antibodies against the flu.

**Flu Myth #13: Starve a fever; feed a cold.**

There is no truth to this myth. In either case, take or encourage fluids. One of the main complications of any illness is dehydration and an abundance of fluids will help prevent this. It is also recommended that we eat enough food to satisfy our appetite.

**Flu Myth #14: You can only catch the flu in cold weather regions.**

There are no temperature or geographic boundaries for the flu. You should get vaccinated if you are traveling to the southern hemisphere from April through September because these times correspond to flu season in these regions. You should also seek advice on the flu when traveling anywhere at anytime.

**Flu Myth #15: Large doses of Vitamin C can keep you from catching the flu or a cold, or will quickly cure them.**

Although it is important to one's overall health to consume the minimum daily requirements of Vitamin C, it has not been proven that increased dosages will prevent or cure colds or the flu.

**Flu Myth #16: Herbal remedies are an effective treatment for the flu or colds.**

Echinacea and other herbs have received a great deal of publicity as cold remedies. To date, none of these claims are solidly supported by scientific studies.

**Flu Myth #17: Chicken soup and "hot toddies" are effective treatments for the flu or colds.**

**While** a bowl of chicken soup is a popular home remedy, and it can soothe a scratchy throat or cough, it has no special power to cure either a cold or the flu. As for "hot toddies", any alcohol-containing beverage should be avoided when someone is sick.

**Flu Myth #18: The seasonal flu vaccine protects against swine flu.**

The swine flu virus that first appeared in Mexico during April 2009 was a new strain of influenza virus. The seasonal flu vaccine that became available in late August of 2009 did not provide protection against this new strain of influenza. However, beginning with the seasonal flu vaccine that became available in the fall of 2010, the seasonal vaccine had a swine flu component built into it.

**Flu Myth #19: Swine flu is transmitted by touching or eating pork products.**

While it is true that the swine flu virus did originate in pigs, it cannot be contracted by eating pork products. The virus spreads from person to person, not from swine to person.

**Flu Myth #20: There is no treatment for the flu.**

Prevention is the best form of treatment for the flu, and vaccination is the best form of prevention. Beyond prevention, the best treatment is rest, fluids, fever control (do not use aspirin as a form of fever control in children under the age of 18 years) and "tincture of time". There are also antiviral medications (such as Tamiflu) that can help, and while these medications won't cure the flu, they can shorten its duration and reduce the severity of its symptoms.

In order for antiviral medications to work, they must be started within 48 hours of the onset of flu

symptoms. If you are healthy and vigorous, your doctor may be less inclined to prescribe this treatment.

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