



## **2009 H1N1 Influenza Vaccine** **Frequently Asked Questions (FAQ)**

(Rev 10/15/2009)  
(General Questions)

### **How was the 2009 H1N1 vaccine developed?**

Vaccines are the most powerful public health tool for control of influenza, and the U.S. government worked closely with manufacturers to take steps in the process to manufacture a 2009 H1N1 vaccine. Working together with scientists in the public and private sector, CDC isolated the 2009 H1N1 virus and modified the virus so that it could be used to make hundreds of millions of doses of vaccine. Vaccine manufacturers are now using these materials to produce vaccine. Making vaccine is a multi-step process which takes several months to complete. The vaccine passed clinical trials and is now being produced, shipped and administered to the public.

### **Who is recommended to receive the 2009 H1N1 vaccine?**

CDC's Advisory Committee on Immunization Practices (ACIP) has recommended that certain groups of the population receive the 2009 H1N1 vaccine when it first becomes available. These priority groups include:

- **Pregnant women;**
- **People who live with or care for children younger than 6 months of age;**
- **Healthcare and emergency medical services personnel;**
- **Children and young adults 6 months through 24 years of age; and**
- **People 25 through 64 years of age who have medical conditions that place them at high risk for complications from influenza.**

A shortage of 2009 H1N1 vaccine is not expected, but availability and demand can be unpredictable. There is some possibility that initially the vaccine will be available in limited quantities. In this setting, the committee recommended that the following groups receive the vaccine before others: pregnant women, people who live with or care for children younger than 6 months of age, health care and emergency medical services personnel with direct patient contact, children 6 months through 4 years of age, and children 5 through 18 years of age who have chronic medical conditions.

## **Is the 2009 H1N1 vaccine available?**

On October 5, Hawaii received its first shipment of 2009 H1N1 vaccine. DOH continues to order based on allocation availability and demand.

## **Where is the vaccine available?**

Vaccine is available in a combination of settings including schools, physician offices, community health centers, clinics, hospitals, pharmacies, and other community locations. If you fall within one of the priority groups, please contact your primary care physician, visit [flu.hawaii.gov](http://flu.hawaii.gov) for a regularly updated list of clinics where the vaccine is currently available, or call Aloha United Way at 2-1-1.

## **Is there a cost for the vaccination?**

The Federal government will be supplying 2009 H1N1 vaccine to physicians, clinics, hospitals, pharmacies, and community vaccinators free of charge. Although the vaccine is free, participating vaccination sites may bill health insurance companies or charge patients a fee to cover the cost of administering the vaccine.

## **Is the 2009 H1N1 vaccine available in a nasal spray?**

Yes. The 2009 H1N1 vaccine is available in both the shot and the nasal spray forms.

## **Will the seasonal flu vaccine also protect against the 2009 H1N1 influenza?**

The seasonal flu vaccine is not expected to protect against the 2009 H1N1 influenza.

## **If I already had the flu, should I get the 2009 H1N1 flu vaccine?**

People for whom influenza vaccine is recommended should receive the 2009 H1N1 vaccine, even if they had an influenza-like illness previously. There is no harm in being vaccinated if you had 2009 H1N1 influenza in the past.

## **Why are people 65 years and older not included in the priority group for the 2009 H1N1 vaccine?**

Current studies indicate the risk for 2009 H1N1 infection among persons age 65 or older is less than the risk for younger age groups. Therefore, persons age 65 or older are not currently recommended as a priority group at this time. However, persons 65 and older are at higher risk for complications from the seasonal flu and are highly recommended to receive the seasonal influenza vaccine.

### **When will the 2009 H1N1 vaccine be available to people who are not in the priority groups?**

Once vaccine demand by the priority groups is met, and there is an adequate vaccine supply, 2009 H1N1 vaccine will be made available to anyone wanting to be vaccinated.

(Vaccine Safety)

### **Is the 2009 H1N1 influenza vaccine safe?**

It is expected that the 2009 H1N1 influenza vaccine will have a similar safety profile as seasonal flu vaccines, which have a very good safety track record. Over the years, hundreds of millions of Americans have received seasonal flu vaccines. The most common side effects following flu vaccinations are mild, such as soreness, redness, tenderness or swelling where the shot was given. The Centers for Disease Control and Prevention (CDC) and the Food and Drug Administration (FDA) will closely monitor for any signs that the vaccine is causing unexpected adverse events and will work with state and local health officials to investigate any unusual events.

### **Is this vaccine be made differently than the seasonal influenza vaccine?**

No. This vaccine will be made using the same processes and facilities that are used to make the currently licensed seasonal influenza vaccines.

### **What are the possible side effects of the 2009 H1N1 influenza vaccine?**

The side effects from 2009 H1N1 influenza vaccine are expected to be similar to those from seasonal flu vaccines. The most common side effects following vaccination are expected to be mild, such as soreness, redness, tenderness or swelling where the shot was given. Some people might experience headache, muscle aches, fever, nausea and fainting. If these problems occur, they usually begin soon after the shot and may last as long as 1-2 days. Like any medicines, vaccines can cause serious problems like severe allergic reactions. However life-threatening allergic reactions to vaccines are very rare. In 1976, an earlier type of swine flu vaccine was associated with cases of a severe paralytic illness called Guillain-Barre Syndrome (GBS) at a rate of approximately 1 case of GBS per 100,000 persons vaccinated. Some studies done since 1976

have shown a small risk of GBS in persons who received the seasonal influenza vaccine. This risk is estimated to be no more than 1 case of GBS per 1 million persons vaccinated. Since then, flu vaccines have not been clearly linked to GBS. GBS has a number of different causes, and GBS can occur in a person who has never received an influenza vaccine. The potential benefits of influenza vaccination in preventing serious illness, hospitalization, and death substantially outweigh these estimates of risk for vaccine-associated GBS.

### **Are there some people who should not be vaccinated?**

Anyone who has a severe (life-threatening) allergy to eggs or to any other substance in the vaccine should not get the vaccine. People should always inform their immunization provider if they have any severe allergies, if they've ever had a severe allergic reaction following flu vaccination, or if they have ever had GBS.

### **Will the 2009 H1N1 influenza vaccine contain thimerosal?**

The 2009 H1N1 influenza vaccines will be manufactured in several formulations. Some will come in multi-dose vials and will contain thimerosal as a preservative. Multi-dose vials of seasonal influenza vaccine also contain thimerosal to prevent potential contamination after the vial is opened.

Some 2009 H1N1 influenza vaccines will be available in single-dose units, which will not require the use of thimerosal as a preservative. In addition, the live-attenuated version of the vaccine, which is administered intranasally (through the nose), is produced in single-units and will not contain thimerosal.

There is no scientific evidence of harm caused by the small amount of thimerosal in vaccines. The following websites provide additional information: US Food & Drug Administration (<http://www.fda.gov/cber/vaccine/thimerosal.htm#t1>) CDC (<http://www.cdc.gov/nip/vacsafe/concerns/thimerosal/faqs-thimerosal.htm>).

### **Is the 2009 H1N1 influenza vaccine safe for pregnant women?**

Influenza vaccines have not been shown to cause harm to a pregnant woman or her baby. The seasonal flu shot is proven safe and is already recommended for pregnant women. The 2009 H1N1 influenza vaccine will be made using the same processes and facilities that are used to make seasonal influenza vaccines.

There is no evidence that thimerosal (used as a preservative in vaccine packaged in multi-dose vials) is harmful to a pregnant woman or a fetus. However, because some women are concerned about exposure to preservatives during pregnancy, manufacturers will produce preservative-free

seasonal and 2009 H1N1 influenza vaccines in single dose syringes for pregnant women and small children. Pregnant women may receive influenza vaccine with or without thimerosal.

(Dosing/Scheduling)

### **How many doses will be needed for the 2009 H1N1 vaccine?**

The U.S. Food and Drug Administration (FDA) has approved the use of one dose of 2009 H1N1 flu vaccine for persons 10 years of age and older. Data from trials among children are not available at this time, so dosing schedules for children are not yet known. Data from trials among children will be available soon. At this time, FDA has approved two doses for children 9 years of age and younger. Immunogenicity data for the 2009 H1N1 vaccine among adults is similar to that for seasonal influenza vaccines. If this is also the case among children, then it is likely that younger children will require two doses and older children will require one dose, as licensed.

### **If a second dose is needed for my child, can I go to a different clinic?**

Yes. Please bring your child's immunization record to your vaccinator of choice.

### **Can the seasonal vaccine and the 2009 H1N1 vaccine be given at the same time?**

It is anticipated that seasonal flu and 2009 H1N1 vaccines may be administered on the same day. However, we expect the seasonal vaccine to be available earlier than the 2009 H1N1 vaccine. The usual seasonal influenza viruses are still expected to cause illness this fall and winter. Individuals are encouraged to get their seasonal flu vaccine as soon as it is available.

### **Do those that have been previously vaccinated against the 1976 swine influenza need to get vaccinated against the 2009 H1N1 influenza?**

The 1976 swine flu virus and the 2009 H1N1 virus are different enough that it's unlikely a person vaccinated in 1976 will have full protection from the 2009 H1N1. People vaccinated in 1976 should still be given the 2009 H1N1 vaccine.

### **Is the 2009 H1N1 vaccine mandatory for healthcare workers?**

No. It is recommended for healthcare and emergency service personnel with direct patient contact. This is due to their contact with high risk individuals and to ensure the viability of the health care work force.

### **Is the 2009 H1N1 virus found in other countries?**

Yes. According to the World Health Organization, reporting systems indicate that the 2009 H1N1 influenza virus is the predominant influenza virus circulating in many countries, including those in the Southern Hemisphere that are currently experiencing winter conditions.

### **Are there plans to make the vaccine mandatory for everyone?**

No. The 2009 H1N1 influenza vaccination is voluntary.

### **Are there other ways to prevent the spread of illness?**

Take everyday actions to stay healthy.

- Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it.
- Wash your hands often with soap and water, especially after you cough or sneeze. Alcohol-based hands cleaners are also effective.
- Avoid touching your eyes, nose or mouth. Germs spread that way.
- Stay home if you get sick. CDC recommends that you stay home from work or school and limit contact with others to keep from infecting them.
- Follow public health advice regarding school closures, avoiding crowds and other social distancing measures.

## **Hawaii H1N1 Influenza Master FAQs**

### **Disease**

#### **1. What is “swine” flu?**

2009 Novel H1N1 (called “swine flu” early on) is a new influenza virus causing illness in people. Novel H1N1 is spreading from person-to-person, sparking a growing outbreak of illness in the United States and around the world. Because it is a new virus, people may not have immunity to it, and illnesses may be more widespread as a result. Vaccines are medicines that prevent illness. The Centers for Disease Control (CDC) expects to have a vaccine ready in the fall of 2009. The Hawaii Department of Health will provide information to the public about who should get the vaccine and how it will be made available if the CDC recommends vaccination of the general public.

#### **2. Is the new flu in Hawaii?**

Yes it is. To date, only a few of the Hawaii cases have been very severe – but it can have a serious effect on people with other health problems such as chronic asthma. The Department of Health is watching them closely. These are some of the steps they are taking;

- giving the latest information to doctors
- making sure an extra supply of flu medicines is available for our state, and
- helping people learn what they can do to stay healthy.

The Hawaii Department of Health website has updated information on the current number of cases in Hawaii. The site is at [hawaii.gov/health](http://hawaii.gov/health).

### **3. Is this virus contagious?**

Yes. This virus is contagious and is spreading from person to person. The Centers for Disease Control says, “It's important to know that we're seeing sustained spread here in the U.S., and we're acting very aggressively.”

### **4. What are the signs and symptoms of the new flu in people?**

The new flu illness is similar to the regular flu. The symptoms include:

- Fever
- Cough
- Sore throat
- Body aches
- Headache
- Chills
- Fatigue or tiredness
- diarrhea and vomiting, in some cases

In the past, more severe illness such as pneumonia has been reported with the new flu. Like the regular flu, the new flu strain can cause chronic medical conditions to get worse – and can be fatal in some cases.

### **5. How do you catch the new flu?**

You can catch the new H1N1 flu by contact with a person with the new flu or by touching something an ill person has touched. Person-to-person spread is believed to happen in the same way as seasonal flu, by coughing or sneezing from people who are ill with the new virus. People may also become infected by touching something with flu viruses on it and then touching their mouth, nose, or eyes. That's why frequent hand-washing is so important.

### **6. How long can an ill person spread the new flu to others?**

People with the new flu virus can be contagious for at least as long as they have symptoms, and possibly for up to seven days after their illness began. Children, especially younger children, could be contagious for more than seven days. If a child still shows some symptoms seven days after onset of the illness, he or she should still be considered contagious.

### **7. Can I get the new flu virus from eating or preparing pork?**

No, the new flu viruses are not spread by food. You cannot get the new flu from eating pork or pork products.

**8. Has the Centers for Disease Control (CDC) issued any travel warnings?**

Healthy people may make travel plans as they normally would and take common sense precautions to protect their health during travel. The CDC recommends that people in these categories check with their health care provider before planning a trip:

- People with underlying illness
- Pregnant women
- People of advanced age (65 or older)

Travelers can stay informed by going to the CDC travel health page: [cdc.gov/travel](http://cdc.gov/travel).

**9. Are there any recommendations for schools (preschools/schools/colleges/)?**

Parents, students, and school staff are reminded to stay home if they are sick. It is also important to practice good health habits, like these:

- Cover your nose and mouth with a tissue when you cough or sneeze.
- Wash hands often with soap and water.
- Avoid touching eyes, nose or mouth.
- Avoid close contact with sick people.

**10. I am from a school and have a concern that we have a student or staff person with the new flu strain. What should I do?**

The person affected should also be directed to a health care provider, and provided with instruction on home isolation [*Appendix at the end of this document*].

**11. What should I do to prepare for a more severe outbreak of the new flu in Hawai‘i?**

People who may be ill should stay home from school or work. Hawaii’s households can prepare for the possibility that this new flu could change and cause greater disruption in schools and other settings.

Each home should put an emergency preparedness kit together. This kit should have at least three days’ supply of water, food, a can opener, clothes, flashlight, hygiene items, first-aid basics, and a radio. You should make sure that all members of your family keep at least a two-week supply of any necessary medicines in the house. You should make plans for child care at home if schools are closed. It’s good to have at least two or three people identified who could help watch your children if they had to stay home but you needed to go to work.

**12. Is it safe for children to attend school?**

Right now children should attend school if they are healthy. Children who are sick with a fever and cough or sore throat should stay home until they have recovered. As always with a flu virus, you should keep these precautions in mind:

- Wash hands often with soap and water.
- Avoid touching eyes, nose or mouth if you haven’t washed your hands.
- Avoid close contact with sick people.

### **13. Is it safe for adults to go to work?**

Right now there are no recommendations to stay away from work because of the new flu, – as long as people who are ill stay home. If more cases of the new H1N1 flu continue to be seen in Hawai‘i, your employer may make plans for you to change your work schedule.

If you become sick, especially with a fever with cough or sore throat, you should stay home from work until you have recovered. If your doctor suspects that you may have the new flu, you will be asked to stay home for at least 24 hours after your fever is gone except to get medical care. Your fever should be gone without the use of a fever-reducing medicine. This guidance does not apply to those adults working in health care settings where the exclusion period should be for 7 days from symptom onset or until the resolution of symptoms, whichever is longer.

### **14. Why isn't the Department of Health closing schools?**

The Department of Health is following guidance from the Centers for Disease Control and Prevention, or “CDC.” Current CDC guidance says school closing is not advised unless there are so many cases that a school or child care program is not able to keep its regular operations going.

## **Treatment**

### **15. Are there medicines to treat swine flu?**

Yes. Public health experts sometimes recommend prescription drugs to treat the new flu and prevent its spread. These drugs have the brand names Tamiflu and Relenza. They fight the flu by keeping the viruses from growing in your body. If you get sick, these drugs can make your illness milder and make you feel better faster. They may also prevent more serious flu illness. These drugs work best if started soon after getting sick (within two days of symptoms). They can come in the form of pills, liquid, or an inhaler.

Some over-the-counter medicines can help make people with flu feel better. Medicines such as acetaminophen (for example, Tylenol) and ibuprofen (for example, Motrin, Advil, or Nuprin) are useful in many cases – but there are exceptions. Talk to your doctor first if you have liver, stomach, or kidney problems, or if you take blood thinners like Coumadin.

Children should avoid taking aspirin while ill with the flu. Consult with your child’s doctor if they take aspirin for medical reasons.

### **16. What should I do if I get sick?**

If you are sick, stay home and stay away from other people as much as possible to keep from spreading your illness. If you are sick and have any of the following signs, seek medical care immediately.

In children, the emergency signs include:

- Fast breathing or difficulty (a hard time) breathing;
- Bluish skin color;
- Not drinking enough fluids;
- Not waking up or not interacting (not talking or moving);
- Being very irritable, child does not want to be held;
- Flu-like symptoms get better but then come back with fever and are worse;

- Bad cough;
- Fever with a rash.

In adults, the emergency signs include:

- Difficulty breathing or shortness of breath;
- Pain or pressure in the chest or abdomen (belly);
- Sudden dizziness;
- Confusion;
- Severe or persistent vomiting.

### **Prevention**

#### **17. What can I do to protect myself from getting sick?**

There are some things you can do to keep from getting sick:

- Try to avoid close contact with sick people.
- Wash your hands often with soap and water, especially after you cough or sneeze – for at least 20 seconds. Alcohol-based hand cleaners (hand gels) also work.
- Try not to touch your eyes, nose or mouth. Germs on your hands could cause infection if they get into your eyes, nose or mouth.
- Get vaccinated when the new H1N1 vaccine becomes available.

#### **18. What should I do if I get sick?**

Call your health care provider. He or she will decide if flu testing or medicines are needed.

If you are sick, stay home and stay away from other people as much as possible to keep from spreading your illness.

If you are sick and have any of the following signs of severe illness, seek medical care immediately.

In children, the emergency signs include:

- Fast breathing or difficulty (a hard time) breathing
- Bluish skin color
- Not drinking enough fluids
- Not waking up or not interacting (not talking or moving)
- Being very irritable; child does not want to be held
- Flu-like symptoms get better but then come back with fever and are worse
- Bad cough
- Fever with a rash

In adults, the emergency signs include:

- Difficulty breathing or shortness of breath
- Pain or pressure in the chest or abdomen (belly)
- Sudden dizziness
- Confusion

- Severe or persistent vomiting

**19. I want to know if I should wear a mask. [Example] I ride the bus every day to and from work.**

Use of masks or respirators is not currently advised for the general public. Persons who are ill should avoid exposing others by staying home until they are well. Masks are not a reliable way to protect yourself, but persons ill with flu or any respiratory infection are encouraged to wear masks to protect those around them.

### Resources

**20. How many cases of the new flu are there?**

The current number of confirmed cases can be found online at [cdc.gov/swineflu/index.htm](http://cdc.gov/swineflu/index.htm).

**21. Where can I get more information about the new flu?**

[The Centers for Disease Control, or CDC, has an excellent informational website that is updated daily. Visit: cdc.gov/swineflu/index.htm.](http://cdc.gov/swineflu/index.htm)

### Health Care Provider Information

**22. I am a Health Care Provider and have a question.**

Official Dept. of Health information for health care providers is available at [hawaii.gov/health](http://hawaii.gov/health). Click on the Information for Physicians and Clinicians link.

**23. I am a Health Care Provider and I believe one of my patients has the new 2009 H1N1 flu. What should I do?**

You can contact the Hawaii Department of Health Disease Investigation Branch on O'ahu directly at (808) 586-4586. You also can refer to [hawaii.gov/health](http://hawaii.gov/health) and click on the "Information for Physicians and Clinicians" link.

**24. None of the pharmacies has Tamiflu (oseltamivir) or Relenza (zanamivir) for my patients. What should I do?**

There has been an increased demand for Tamiflu and Relenza (antivirals) since the new flu began circulating, but most Hawaii pharmacies should have supplies available. Physicians are asked to treat those who are hospitalized with influenza and those at increased risk of influenza-related complications with antiviral therapy. Use of antivirals for prevention should be reserved for high-risk patients only.

## **Appendix – Home Isolation for a Person Infected with Influenza**

### **The ill person should:**

- Avoid contact with healthy family members.
- If possible, stay in a separate room—a “sick room”—with the door closed.
- Cover coughs and sneezes with a tissue and dispose of the tissue in a covered container.
- Wear a surgical-type mask, if available.
- Stay at home.
- Drink plenty of fluids and eat as healthy a diet as possible.
- Get plenty of rest.
- Take over-the-counter medications (such as Tylenol, Advil, Motrin, or Nuprin) to reduce fever.

### **Other people in the house should:**

- Designate a household member as the primary caregiver.
- Try not to enter the sick person’s room.
- Practice excellent hygiene by avoiding contact with items that may be contaminated, washing their hands if they must handle potentially contaminated items such as linens, and avoiding touching their faces unless they’ve washed their hands just prior.
- Discourage visitors. Encourage other family members to stay away from the ill person, or at least stay more than three feet away.
- Help the designated primary giver encourage the ill person to drink plenty of fluids, eat a nourishing diet, and get plenty of rest.
- Not use the ill person’s plates, silverware, towel, or toothbrush.
- Wash the ill person’s sheets and clothing and any other items touched by the ill person with soap and water or clean with disinfectant wipes.
- Monitor the ill person for signs of potential need for specialized health care at an appropriate facility.

Such signs may include:

- Shortness of breath or difficulty breathing
- Persistently high fever (temperature greater than 102° Fahrenheit) despite taking appropriate medications -- for example, acetaminophen (brand name Tylenol) or ibuprofen (brand names Advil, Motrin, or Nuprin)
- Mental confusion or lethargy (that is, not being alert or responding to normal stimuli)
- If the ill person shows signs of worsening or if uncertain, contact your health care provider.