

## Bird flu flies again

By John Bell

Influenza is not just a bad cold. Certainly the symptoms are somewhat similar, but the flu is potentially a life-threatening disease.

Typically people with the flu experience a sudden high fever, cold shivers, sore throat, headache, muscle aches and pains, chest pain and cough.

In otherwise healthy adults, the worst of the symptoms usually last for three or four days; but significant feelings of ill health can linger on for weeks; and for people in certain high risk groups whose immune systems are already under stress, the consequences can be very serious.

What was known as the “Spanish flu”, early last century, killed more than 20 million people – including 12,000 Australians out of a total population then of less than 5 million.

Frightened people wore masks on the streets. Schools, churches and theatres were shut down; and it was an offence to stay longer than 5 minutes in a hotel bar. Some World War 1 victory celebrations were cancelled and the already tense relations between Victoria and New South Wales worsened over quarantine regulations.

Since then, with the benefits of better public health measures and effective vaccines, the outcomes of flu infection have not been so devastating. Even so, each year in Australia, influenza causes an estimated 3,000 deaths in older people. There are also the economic costs to the community of more than one and a half million lost work days, 300,000 doctor visits and 18,000 people admitted to hospital.

The most recent “swine flu” pandemic (worldwide epidemic) seems to have been caused by a descendant of the 1918 Spanish flu; and whilst the World Health Organization declared this pandemic under control in August 2010, there are reports of a mutant form of the virus (also known as H1N1) circulating this year. The 2013 seasonal flu vaccine contains this H1N1 strain and gives at least some protection.

Potentially more of a problem now is the new strain of avian influenza - that is: “bird flu”. This so-called H7N9 influenza virus subtype was first reported to have infected humans early this year in China. So far, there appear to be no cases of human to human transmission; however, at this stage we have no specific medicines or vaccines to tackle a pandemic caused by H7N9. So, as stated in an article in the May 6 edition of *New Scientist* magazine, “we could all be sitting ducks”.

Of course, antibiotics are not effective against viral infections like the flu or the common cold; and there is ongoing debate about the effectiveness of the anti-viral drugs such as *Tamiflu*. However, in February, Professor Jonathan Van-Tam from the University of Nottingham published preliminary results of a study he and his colleagues had undertaken on people who had been hospitalised with the 2009 “swine flu”. The study showed people who took *Tamiflu* within two days of falling ill were only half as likely to die compared with those who took it late or not at all. They’re encouraging results; but we can’t rely on a quick fix solution to infection with the flu virus - whether that infection comes from pigs, birds or human beings.

Today, prevention remains our major weapon against influenza. You can help protect yourself by making sure your lifestyle is healthy with regular exercise you enjoy and a daily diet that includes the widest possible variety of foods. And, of course, annual vaccination against the flu is essential for all people in high-risk categories. People with chronic heart, kidney or lung disease, diabetes or other long-term illnesses are particularly vulnerable to influenza.

You can get more advice about the flu from pharmacies around Australia providing the Pharmaceutical Society’s Self Care health information. For the nearest location phone 1300 369 772 or visit the website [www.psa.org.au](http://www.psa.org.au)