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NEWS

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* * * *Chronically ill and elderly need
flu shots

DALLAS--Each year people over 65 and those with chronic illness should get influenza (flu) shots to protect themselves during the flu season.

These people are more subject to the adverse complications of acute infection than are younger, healthy people, says Dr. James Luby, chief of the Infectious Diseases Division at The University of Texas Health Science Center at Dallas. In these "high risk" groups, flu may develop into flu pneumonia or bacterial pneumonia. People with impaired lungs, abnormal metabolism or suppressed immunity could die from the complications.

Those "at risk" for influenza complications include: the elderly; anyone with cardiovascular or respiratory disease or metabolic disease such as diabetes; persons with tumors or hematologic malignancy; anyone taking immuno-suppressing drugs; and children with cystic fibrosis or other chronic lung problems.

These people should see their physicians for flu shots in October every year, says the researcher. "It takes three to four weeks for the shot to take effect, and the flu season usually starts in mid-December."

This year three strains of the influenza virus are expected by the U.S. Public Health Service advisory committee: two A strains, A/Bangkok and A/Brazil, and one B strain, B/Singapore. Although the three produce identical symptoms, they are characterized by different antigens (the protein that triggers the body's immune response). Any flu vaccine available this year will contain all three antigens so that the immunized person will have antibodies against all the expected influenza strains.

Sometimes people confuse the common cold with flu. While a cold may develop over a few days, flu is characterized by abrupt onset.

Fever, head and muscle aches, malaise (general uneasiness) and prostration are the first symptoms of flu. A little later the patient develops a scratchy sore throat, nasal discharge and cough.

"There is also an alteration in respiratory function. The oxygenation of the blood is impaired even without the complication of pneumonia," says Luby. This is why flu can be dangerous to anyone who already has lung problems.

The influenza virus passes from one person to another through close contact or through the air. A cough producing a fine aerosol mist of the virus can infect a person across the room. It usually takes flu four to six weeks to spread through a community.

December through February is usually the Type A season with Type B coming a little later in February and March. Type B tends to be more a disease of school children.

A rare complication of influenza B in children is Reye's syndrome (or Reye-Johnson syndrome). Several days into the course of flu, children with Reye's syndrome experience a severe nervous system reaction. They become confused or agitated, and can even become comatose. The syndrome is characterized by brain swelling and changes in the liver.

Reye's syndrome appears predominantly in children with Type B influenza although it also can occur with influenza A and other viral infections. But why it develops is not known. Since the cause is unknown or could be due to an allergic reaction to some viral component, infectious disease experts do not recommend routine flu immunization for healthy children.

Side effects from the flu shots include a sore arm and maybe a little fever. These soon go away, but it is permissible to take aspirin, says the physician.

The well-publicized Guillain-Barré syndrome that occurred following swine flu immunizations in 1976 was associated only with swine flu. It has not been associated with other flu vaccines.

Since flu immunity is short-lasting and new variants in the virus appear every year, people at high risk should be immunized every year. This year people age 29 and over need one shot. Those under 29, if not immunized previously, will need two shots.

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