The Seasonal and Swine Flu: Vaccinate for Both

I have been reading the latest information on the seasonal flu and the swine or H1N1 flu every day. This has been the first stressful flu season for me in my 16 years of being in practice. It has been quite confusing to health care providers because of what has been reported in the media in terms of when and how much of the H1N1 vaccine will be distributed by the government and who will get it first. I can only imagine what the general public is thinking about all this.

I have also been following various clinical trials closely on the H1N1 vaccine's final outcome. I stopped worrying about the H1N1 flu vaccine after I read an article published in The New York Times on October 11, 2009 by my former professor Dr. Paul Offit, the chief of the infectious diseases division of the Children's Hospital of Philadelphia.

He explained that in one clinical trial the H1N1 vaccine has already been given to thousands of volunteers to determine whether it could protect them from the H1N1 virus and not cause adverse reactions. Following the success of this clinical trial, the Food and Drug Administration licensed the H1N1 vaccine to make it available to the general public. Dr. Offit commented on the vaccine in his article titled "Nothing to Fear but the Flu Itself." Anyone who would like to read the full article can click on the following link: http://www.nytimes.com/2009/10/12/opinion/12offit.html?_r=2&scp=1&sq=Nothing%20to%20Fear%20but%20the%20Flu%20Itself%20&st=cse

The reported number of children below the age of 18 who have died from the H1N1 flu since April 2009 has reached nearly 80. This number is close to the number of children who die each year from seasonal influenza, according to the U.S. Centers for Disease Control and Prevention (CDC). **But the CDC also warned that the H1N1 flu in 2009 has yet to run its course!**

Many health care experts say the H1N1 flu does not appear to be more dangerous than other flu strains, but they do warn that children have been catching it more easily than the seasonal flu. The majority of children who have died from the H1N1 flu have had underlying diseases that put them at risk for influenza-related complications. However, between 20% and 30% of these children were healthy.

Anticipating possible shortages of the H1N1 vaccine in the beginning stages of its release, the CDC has recommended that clinicians first immunize patients on a priority basis. **The CDC recommends that the vaccine be given to patients in the following order of priority:**

- Pregnant women
- People who live with or care for children younger than 6 months of age
- Health care and emergency services personnel
- Persons between the ages of 6 months and 24 years of age
- People from ages 25 through 64 years who are at higher risk for complications from an H1N1 infection

In the event that there may not be enough of the H1N1 vaccine at first, the CDC recommends that **these groups receive the vaccination first:**

- Pregnant women
- People who live with or care for children younger than 6 months of age
- Health care and emergency services personnel who have direct contact with patients or with infectious substances
- Children 6 months through 4 years of age
- Children ages 5 -18 who are at greater risk for complications of influenza

Anyone who receives the H1N1 vaccine should also still receive the seasonal flu vaccine that is available every year. You may receive both vaccines at the same time. There are no known problems associated with receiving vaccines for both the H1N1 flu and seasonal flu on the same day; however, health officials recommend a three-week waiting period between receiving the nasal versions of the vaccines.

Most health care providers expect to receive the H1N1 flu vaccine by mid-November, if not sooner. Check with your doctor or nurse, local pharmacist, or local health department to see when the vaccine will be available.