



CDC issues H1N1 guidance for patients with HIV.(swine influenza)

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CDC issues H1N1 guidance for patients with HIV

The Centers for Disease Control and Prevention (CDC) has just released interim guidance for clinicians on the H1N1 flu virus and HIV-infected adults and adolescents. While there is insufficient data to determine who is at higher risk for complications of H1N1 flu, adults and adolescents with HIV infection are known to be at higher risk for viral and bacterial lower respiratory tract infections and for recurrent pneumonias, the guidance notes.

The guidance is available at www.cdc.gov/h1n1flu/hiv_flu.htm. Here is an excerpt:

Question: Are people with HIV/AIDS at greater risk than other people of infection with novel H1N1 flu?

Answer: At the present time, we have no information about the risk of the novel H1N1 flu in people with HIV/AIDS. In the past, people with HIV/AIDS have not appeared to be at any greater risk than the general population for infection with routine seasonal influenza. However, HIV-infected adults and adolescents, and especially persons with low CD4 cell counts or AIDS, can experience more severe complications of seasonal influenza. It is therefore possible that HIV-infected adults and adolescents are also at higher risk for complications from infection with the H1N1 flu virus.

Q: What can people with HIV/AIDS do to protect themselves from novel H1N1 flu?

A: HIV-infected patients should take precautions to protect themselves from novel H1N1 flu.

- Wash your hands often (or using an alcohol-based hand sanitizer if soap and water aren't available)
- Avoid touching your eyes, nose or mouth with your hands - germs spread this way
- Try to avoid close contact with sick people
- Review the CDC's interim recommendations (www.cdc.gov/h1n1flu/masks.htm) for facemask and respirator use

If you are currently taking antiretrovirals or antimicrobial prophylaxis against opportunistic infections you should adhere to your prescribed treatment and follow the advice of your health care provider to maximize the health of your immune system.

Q: What are the signs and symptoms of H1N1 influenza?

A: Signs and symptoms of infection with the novel H1N1 influenza are generally the same as for seasonal influenza: fever, cough, sore throat, runny or stuffy nose, headache, body aches (muscle aches or joint pain), chills, and fatigue. Some people have reported diarrhea and vomiting associated with novel H1N1 flu.

Q: What should people with HIV/AIDS do if they think they may have novel H1N1 flu?

A: HIV-infected people should do the same things as they would do for routine seasonal flu: Contact your health care provider and follow his or her instructions. He or she will determine if laboratory testing or treatment is needed.

If you need to go to a doctor's office, to an emergency room, or to any other health care facility to be evaluated, cover your mouth and nose with a facemask if a facemask is available and tolerable, or cover your mouth and nose with a tissue when coughing or sneezing. Let the office staff know you are there because you think you might have novel H1N1 flu.

For more information on what to do if you are sick, see "Taking Care of a Sick Person in Your Home" at www.cdc.gov/h1n1flu/guidance_homecare.htm.

Q: Is there a vaccine against this the H1N1 flu virus?

A: No. There is currently no vaccine for the novel H1N1 flu. The vaccine given for seasonal flu does not protect against the novel H1N1 flu. If a vaccine against novel H1N1 flu becomes available, CDC will make recommendations for people with HIV/AIDS. Researchers are presently working to develop a vaccination against novel H1N1 flu.

Q: Is there treatment against novel H1N1 flu for people with HIV/AIDS?

A: Yes. The novel H1N1 flu virus is sensitive to two antiviral drugs: zanamivir and oseltamivir. HIV-infected adults and adolescents who meet current case-definitions for confirmed, probable, or suspected infection with novel H1N1 flu should receive antiviral treatment. Treatment is most effective if started within 48 hours of symptom onset. Please check the CDC web site frequently for updates in recommendations for antiviral treatment (www.cdc.gov/h1n1flu/recommendations.htm).

See additional information on treatment of novel H1N1 flu at www.cdc.gov/h1n1flu/antiviral.htm.

Q: When should people with HIV/AIDS be prescribed antiviral medications for the prevention (also called "chemoprophylaxis") of novel H1N1 flu?

A: HIV-infected adults and adolescents who are close contacts of persons with novel H1N1 flu should receive antiviral chemoprophylaxis. Please check the CDC web site frequently for updates in recommendations for antiviral chemoprophylaxis. (www.cdc.gov/h1n1flu/recommendations.htm).

Q: Are the medicines used to treat and prevent infection with the novel H1N1 flu virus safe for people with HIV/AIDS?

A: There is not a lot of information on the interaction between anti-flu medications and HIV antiretrovirals. No adverse effects have been reported among HIV-infected adults and adolescents who received oseltamivir or zanamivir. There are no known major drug interactions between oseltamivir or zanamivir with currently available antiretroviral medications used to treat HIV infection. If you are prescribed oseltamivir or zanamivir and think you might be having a reaction to the drug, contact your health care provider. Health care providers should observe patients for possible adverse drug reactions to anti-influenza agents, especially patients with neurologic problems or decreased kidney function.

Q: What is CDC doing about H1N1 flu for people with HIV/AIDS?

A: The CDC, in coordination with state and local health departments and with the World Health Organization (WHO) is working aggressively to understand the epidemiology of this novel H1N1 flu and determine if it affects HIV-infected people and people with other immunocompromising conditions differently. As additional information about the situation become available, the CDC's recommendations may change. Please check the CDC H1N1 Flu web site frequently.

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