



# Winter newsletter for parents and carers

November 2018

**Welcome to the winter newsletter from Public Health England London, providing key information on:**

- **Influenza and the annual immunisation programme**
- **Norovirus and steps to help reduce the risk of spreading infection**

## **INFLUENZA (Flu)**

### **What is influenza?**

Influenza or 'flu' is a viral infection that mainly affects the nose, throat and the lungs.

Flu is worse than a common cold. Symptoms of flu can include a sudden onset of fever which can last for three to four days, shivering, headache, cough, sore throat, feeling lethargic, aching muscles and joints.

Some children may also feel sick (nausea), or have diarrhoea. Tiredness can last two to three weeks.

The symptoms are different from a cold as a cold is often limited to a runny nose, sneezing, watery eyes and throat irritation. The symptoms usually occur gradually and do not cause a fever or body aches. Usually what people call "gastric flu" is a gastrointestinal infection with another virus – usually norovirus or rotavirus.

### **Who catches flu?**

Anyone can catch flu. The highest rate of infection is usually in school age children and mostly occurs during the winter months.

Many children and young people with special educational needs and disabilities (SEND) have one or more conditions which place them at increased risk of severe flu infection. They may require prevention (through seasonal flu vaccination) & prompt treatment if they become unwell – as outlined in more detail below.

The amount of illness occurring each year varies, depending on the particular strain that is circulating. Some flu viruses cause more severe illness than others. This is why in some winters people may be more unwell with flu than in other years.

### **How do you catch flu?**

Flu is very infectious and can spread rapidly from person to person. It is mostly caught by breathing in air containing the virus when an infected person coughs/sneezes or by touching a contaminated surface and then touching your mouth or nose.

### **How serious is flu?**

Most people recover completely from flu in a matter of days or a week. Vulnerable groups for example older people, pregnant women, children and young people with SEND, as well as those with other illnesses (such as chest or heart disease, neurological condition, or diabetes) and newborn babies and those with learning disabilities are at greater risk of having serious flu illness.

Serious illness from flu can range from the virus itself causing a severe viral pneumonia, to a secondary bacterial

infection causing bronchitis and pneumonia or to a worsening of any underlying chronic medical condition such as heart disease. Serious infections are likely to end up in hospital admission.

### **Can you prevent flu?**

Flu immunisation is one of the most effective interventions we can provide to reduce harm from flu and pressures on health and social care services during the winter

The vaccine is very safe and side effects are uncommon and usually mild. The vaccine is not recommended for everyone, but it is advisable for those with serious medical conditions who may be more likely to be seriously affected by flu and it is also recommended for all pregnant women.

### **Flu vaccination for children**

Having the vaccine will help protect your child from what can be a very nasty illness in children. Children under the age of five have the highest rate of hospital admissions due to flu.

It will reduce the chance of others in your family, who could be at greater risk from flu, such as grandparents or those with long term health conditions, getting flu from your child. It can help you avoid having to take time off work or other activities because you are ill or need to look after your sick child.

The flu vaccine is recommended for all children aged two to nine (but not ten years or older) on 31 August 2018. Preschool children aged 2 and 3 years old are provided for at GP Practices. School aged children (in reception class & years 1 to 5) are usually provided for by health professionals at school. Children from 6 months to 18 years and upwards in risk groups – vaccination is usually provided at school and can also be obtained from GP practice if parents prefer.

### **Flu immunisation for people with learning disabilities**

Flu and the importance of flu immunisation for people with learning disabilities (LD) are:

- Those with LD are more likely to become seriously ill if they get flu.
- People with LD and those who care for them are entitled to a free flu vaccination
- There's a need to increase awareness of the risks to those in this group and to increase the uptake of the flu vaccination for people with LD and their carers.

### **How will the vaccine be given?**

Most children at school will be given a nasal spray.

The nasal spray contains viruses that have been weakened to prevent them from causing flu but will help your child to build up immunity. When your child comes into contact with flu viruses they will be better able to fight off the infection.

The vaccine is absorbed quickly in the nose so, even if your child sneezes immediately after having had the spray, there's no need to worry that it hasn't worked.

### **Can the vaccine cause flu?**

No, the vaccine cannot cause flu because the viruses in it have been weakened to prevent this from happening.

This vaccine is recommended for:

- Those aged 65 years and over
- Pregnant women
- Children aged 2-4 and all school-aged children in years 1-5
- Frontline health care workers, including those who work in care homes
- People of any age with chronic heart, lung, neurological, metabolic disorders (including severe asthma)

and diabetes), kidney problems or a lowered immune system due to treatment or disease

- Those who are very obese
- Those in long stay residential care accommodation where influenza, once introduced, may spread rapidly
- It is recommended that immunisations be offered to health and social care workers involved in direct care of and/or support to patients and also anyone caring for a person in the at risk groups
- Fit adults under the age of 65 years who are not in one of the groups mentioned above are not offered the vaccine as part of the national programme. This list is not exhaustive and if you are unsure if you should have the seasonal influenza immunisation then please discuss this with your pharmacist or GP

#### How can you reduce the risk of flu transmission in schools?

- Staff and children with flu should be kept away from school until they are symptom free.
- Wash hands frequently with soap and water and dry thoroughly
- Avoid touching surfaces (such as door handles) and then the face
- Cover your mouth and nose with a tissue when coughing or sneezing and dispose of used/dirty tissues in a bin – **“Catch it, Bin it, Kill it”**



#### How soon should a child be back at school after influenza?

Flu is most infectious when symptoms start until about three to five days later. There are no recommended times of exclusion for an infected child: a child should return once they are well enough.

#### What is the treatment for flu?

Most people with the flu need no special treatment. Flu is caused by a virus so antibiotics do not help unless there is a complication.

Occasionally a special 'antiviral' medicine is given to people who have underlying medical conditions, which means they are at risk of having serious flu infection or whose illness is getting worse.

Someone who is ill with flu should keep warm, rest and drink lots of fluids to prevent dehydration. It is best to stay at home while feeling ill with flu as this reduces the chance of spreading the infection to others.

Medication can be given to reduce fever, ask your pharmacist or GP for advice.

#### More information:

**Stay Well This Winter campaign:**  
<https://www.nhs.uk/staywell/#OZuZe6r38EZIDlbq.97>

#### NOROVIRUS

Norovirus, also called the 'winter vomiting bug' because it usually occurs during the winter months, is the most frequent cause of infectious gastro-enteritis in England and Wales and affects 600,000 to two million people in the United Kingdom every year.

Cases usually start to appear during the autumn, peaking during January.

**How does norovirus spread?**

The virus is very infectious and is easily spread from one person to another. It can be spread by contact with an infected person, by consuming contaminated food or water or by touching surfaces or objects which have become contaminated with the virus.

**What can be done to prevent infection?**

It is impossible to prevent norovirus. However taking good hygiene measures such as frequent hand washing around someone who is infected is important.

Other measures include the implementation of basic hygiene, food handling measures, prompt disinfection of contaminated areas, and staying at home for 48 hours after the symptoms have stopped.

**If I'm suffering from norovirus, how can I prevent others from becoming infected?**

Good hygiene is important in preventing others from becoming infected – this includes thorough hand washing with warm water and soap after using the toilet, touching pets and playing outside. Food preparation should also be avoided until 48 hours after the symptoms have subsided.

**How is norovirus treated?**

There is no specific treatment for norovirus apart from letting the illness run its course. It is important to drink plenty of fluids to help prevent dehydration.

**Are there any long term effects?**

No, there are no long term effects from norovirus.