



Carlsbad Unified School District

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H1N1 Flu Update - October 15, 2009

At this time of year, these flu viruses join the list of health concerns in our schools. Both “regular” flu (called “seasonal” flu) and H1N1 flu (also called “swine flu” or Novel H1N1) are health concerns for CUSD students, families, and staff. These non-flu concerns include a number of infectious conditions, including strep throat, pneumonia, drug resistant staph infections, and Asian flu. Although swine flu has not proven to be more dangerous than these other diseases, it has received tremendously more attention in the media.

Prevention

As a community, our most effective efforts to protect children from infectious diseases center on prevention. The national Center for Disease Control, the California Department of Public Health, and the San Diego County Department of Public Health all agree that schools and families should consistently practice the following prevention safeguards:

1. Covering coughs and sneezes. Flu viruses—and many other infectious diseases—are often spread through coughing or sneezing by infected individuals. Therefore, everyone who coughs or sneezes should cover his mouth and nose with a tissue, then immediately dispose of the tissue. If no tissue is immediately available, cough or sneeze into the arm rather than the hand.
2. Hand washing. Flu viruses may also be spread by hands contaminated with the virus (usually by coughing or sneezing into the hand). Therefore, frequent hand-washing with both soap and water is highly recommended, especially after coughing, sneezing, or toileting.
3. Hand sanitizers. Alcohol-base sanitizers have been recommended by the California Department of Public Health for use in schools. These sanitizing gels, foams, or wipes are very effective against viruses—including flu viruses—and bacteria as well.
4. Separation. Separating ill students and staff from others is a critical part of our prevention strategy. Students who appear to have flu-like symptoms when they arrive at school or become ill during the school day should be promptly separated from other students and staff and sent home.

Parents should keep students with flu symptoms at home for at least twenty-four hours after they are fever-free without the use of fever-reducing medicines. Most people who had the 2009 H1N1 influenza virus last spring (but were not hospitalized) had a fever that lasted 2 to 4 days; this would require an exclusion period of 3 to 5 days in most cases. **Because there are wide variations in how quickly each person recovers from the flu, there is no fixed number of days for sick students or staff to stay home. The “twenty-four hours fever-free” standard is the best criteria (set by CDC and public health)...** Sick staff should follow the same criteria

for returning to work.. When students or staff who have had the flu return to work or school, they should continue to practice good respiratory etiquette and hand hygiene and avoid close contact with people they know to be at increased risk of flu-related complications. They may still be shedding the flu virus (contagious) –although at a much lower level—even after the 24-hour fever-free period.

5. **Cleaning.** The flu virus is actually extremely fragile. It dies within minutes of being exposed to air, and can easily be killed by the cleaning products routinely used in CUSD schools. However, cleaning surfaces that are often touched by multiple people is an important part of our disease and infection prevention strategy. These surfaces include doorknobs, keyboards, tables, and shared equipment. Using new stronger or harsher cleaning chemicals—including bleach—in schools in response to flu concerns is not recommended by the public health department. No additional disinfection beyond our schools’ normal thorough cleaning routines using our normal cleaning agents is required.
6. **Vaccination.** According to the national Center for Disease Control, “a flu vaccine is the single best way to protect against influenza illness.” Vaccination is recommended for children and young adults from six months to twenty-four years old. There are two different flu vaccines. In order to be protected against both flu varieties, children and adults should receive both vaccines.
 - A. **Seasonal flu.** In Northern San Diego County, seasonal flu vaccine is now available from your health provider and at community locations including some Walgreens, Vons, and Costco, Wal-Mart, and CVS pharmacies. You may find the nearest of these alternative locations at <http://ala.findaflushot> or buy calling 211.
 - B. **Swine flu.** In Northern San Diego County, the H1N1 flu vaccine should be available by the end of October. Vaccinations may be obtained from your health care provider or at Walgreens, CVA pharmacies, Wal-Mart, Rite-Aid locations.

Response

1. **Identification.** Even doctors find it difficult to determine whether a person with flu-like symptoms has swine flu, seasonal flu, a cold, or a bacterial respiratory infection. Quick tests performed in a doctor’s office can confirm that the patient has a flu—not a cold or bacterial infection—but cannot determine whether the patient has swine flu or seasonal flu. The only conclusive test for swine flu vs. seasonal flu has to be conducted by a medical lab, requires an uncomfortable deep nasal swab, and takes several days before results are available. In Carlsbad, some doctors use the quick office test. Some doctors use the longer, more exact lab-dependent test. Some doctors do not use either test; they simply diagnose and treat based on the patient’s symptoms. For our schools, our prevention and response strategies are the same regardless of which variety of flu—H1N1 swine flu or “regular” seasonal flu—our students and staff are experiencing. **Because students and staff may shed flu virus (be contagious) before they show any symptoms, and some people with the flu may not have a fever, it is critical that all students and staff follow the prevention strategies of hygiene (hand and cough) and separation.**
2. **Treatment.** Response to flu outbreaks is a medical issue. Physicians have been successful in treating H1N1 swine flu with anti-viral drugs—usually zanamir or oseltamivir (Tamilflu).

3. School closures. Because flu outbreaks are medical issues, the decision to close schools to prevent the spread of swine flu would not be left up to individual schools or school districts. California and San Diego County public health departments are carefully monitoring flu-related doctor-visits, hospitalizations, and deaths. The public health agencies would be responsible for recommending school closures. The Center for Disease Control and the California Department of Public Health do not recommend closing schools “unless there is a magnitude of faculty or student absenteeism that interferes with the school’s ability to function.” There is no official “trigger point” for a specified percentage of students with swine flu that would automatically trigger the closure of any given school.
4. Notification. The Carlsbad Unified School District does not conduct blanket announcements or notifications of student illness in specific classrooms, schools, or groups for most infectious diseases—including flu and strep throat. In addition to raising medical confidentiality issues, such notifications are after-the-fact responses that cannot undo the exposure that has already taken place before an infected student’s illness is known to the now-sick student’s teachers, school staff (including Health Techs) and administration. However, a significant jump in the virulence (as measured by hospitalization and mortality rates) or spread of H1N1 could lead to a re-evaluation of this procedure by state and local public health agencies.