INFORMATION ABOUT INFLUENZA AND YOUR PREGNANCY

This information has been collected by your midwives to help you to both prevent influenza illness during your pregnancy, and manage ‘the flu’ if you do get sick. Please read it carefully.

General information:

- 20-40% of the general population will get sick with the H1N1 flu this season, most of these people will be in their 20’s to 40’s. Most cases will be mild in nature.
- The virus is spread through secretions from the mouth, nose and in cases of bowel upset (vomiting/diarrhea).
- Influenza symptoms include: fever, nausea, vomiting, diarrhea, cough, muscle aches, fatigue and extreme weakness.
- Influenza affects pregnant women differently due to a difference in your immune system which makes it more difficult for you to fight off viral infections.
- Influenza can live for hours on skin surfaces and on hard surfaces for up to 24 hours.
- An infected person can shed the virus for up to 7-10 days, therefore it is recommended that if you become sick with influenza, you stay away from work for 7 days.

How can I prevent getting the influenza virus?

- This year the H1N1 flu is spreading around the world in what is called a ‘pandemic’. Therefore it will be very widespread in the community, no matter where you live or work. It is very difficult to completely prevent getting exposed.
- Hygiene is VERY important- wash your hands frequently, avoid touching your face with your hands, and carry an antiseptic hand cleanser.
- If someone in your household gets the influenza virus, try to isolate yourself from that person as much as possible, practice hand hygiene and use a separate washroom if possible.

What happens if I think that I have become sick with influenza?

- Call your midwife and speak with them directly about your symptoms. From there, your midwife may recommend that you DO NOT attend your
scheduled prenatal or postpartum visit so as not to spread the infection to other women or new babies.

- Your midwife may recommend that you call your family doctor or local walk in clinic. It may then be necessary for you to be assessed in person by a doctor.
- If it deemed likely that you have H1N1, a sample of the secretions in your nose and mouth will be collected. The sample can provide a tentative result within a few hours, and will be sent away for a confirmation test at the Centre for Disease Control which can take some time to come back.
- If your doctor feels that treatment is needed, you will receive ‘Tamiflu’, an antiviral drug with minimal side effects for you (nausea, vomiting, diarrhea) and no side effects to your baby whether you are pregnant or breastfeeding. If your flu testing comes back negative, you may be instructed to stop your medication.
- **REMEMBER TO USE GOOD HAND HYGIENE** so that you do not spread the infection to others and **STAY HOME!**

**What about the flu vaccine?**
- The H1N1 vaccine is recommended by Public Health for **ALL** pregnant women, regardless of type of work or number of weeks into the pregnancy. It should be available starting in October.
- The flu vaccine is in 3 parts, one month apart each time. The first two are specifically for the H1N1 virus and the 3rd is for the seasonal influenza. So far only family doctors can administer the vaccine, but possibly pharmacists and midwives may be able to do this at some point in the future.
- Studies are just coming out on the safety and efficacy of the vaccine. At this time, we speculate that the vaccine is safe, however we do not know how effective it is, in particular if women do not receive all 3 parts of the vaccine before being exposed.
- Pregnant women receive a special ‘version’ of the vaccine which is meant not to create enough of an immune response where the woman actually gets sick. However, if the woman becomes sick, Tamiflu can be given to treat the illness.
- There is no resistance of the virus to Tamiflu as of right now.

**What about my baby if I become sick?**
- Influenza cannot be transmitted to the baby through the amniotic fluid if a mom becomes sick. It is also not transmitted through breast milk.
• Your baby will be watched carefully for signs of infection like high breathing rate and fever. Contact your midwife if you suspect your baby might be getting sick.
• It is suspected that newborns may have some protection against the flu virus if the mother is vaccinated in pregnancy.
• Recommendations have not yet been set regarding the safety of newborns being in close contact with a mother who is sick. We will advise you of any new information on this topic as necessary.

This information is courtesy of Dr. Roanne Preston, BCWH Dept of Anesthesiology

For more information, you can visit the following websites:

BC Perinatal Health Program:  
http://bcphp.ca/sites/bcrca/files/spotlight/guideline_h1n1_interim_draft.pdf

Public Health Agency of Canada:  
http://www.phac-aspc.gc.ca/alert-alerte/h1n1/index-eng.php