

In addition to the standard measures we take every year to prepare for and prevent the spread of seasonal influenza, we face a unique flu challenge this year with the H1N1 virus.

Since the initial outbreak of H1N1, our nation's public health officials have taken proactive steps to ensure the public was well-informed about the virus and its extent, and to make sure we would be prepared when our influenza season arrived. And it's a good thing we have. According to the Centers for Disease Control (CDC), visits to doctors and hospitalizations for influenza-like illnesses are higher than expected for this time of year. Maryland is among twenty-one states reporting widespread flu activity, with 198 hospitalizations (43% of which were children 18 or younger) and at least nine H1N1 flu-related deaths.

Unlike seasonal flu, the H1N1 virus is more prevalent among those in the 24 and under age group. That is why many of the efforts for prevention are being targeted to students, and school systems are working to set up flu clinics and make sure parents are well-informed. Parents must be especially vigilant this year by keeping kids home when sick and giving consideration to the H1N1 vaccine. In addition to younger populations, those most vulnerable to the virus are pregnant women and individuals with neurological and respiratory conditions.

This week, I met with representatives of state and local health agencies for an update on plans for H1N1 preparation and prevention. In coordination with the state, counties have developed extensive plans to deal with the pandemic, including aggressive outreach and coordination to ensure targeted populations are prepared. Please check with your county health departments for more information on local H1N1 information and vaccine availability.

Also this week, the first shipments of the H1N1 vaccine were delivered to our state. More shipments will follow in the weeks ahead, and Maryland expects to have approximately 900,000 doses by the end of the month. It is important to note that while the vaccine is voluntary, it is the single best way to protect against influenza illness and is highly recommended by the CDC, particularly for vulnerable populations, as well as health professionals and caregivers.

The H1N1 vaccine will be available in the form of a nasal spray in addition to an injection. While the spray has not been approved for use by pregnant women, it is approved for use by people ages 2-49. The CDC has also released to states 11 million treatment courses of the antiviral drugs Tamiflu and Relenza, both of which are proven effective for confirmed cases of H1N1 requiring hospitalization.

Outside of the vaccine, the most important action you can take to protect you and your family is the same as with any flu virus: washing your hands frequently; covering your mouth when you cough; sneezing into a sleeve; and staying home from school or work if you get sick. In order to most effectively isolate the virus, schools have emphasized the need for children to have absolute social isolation when they stay home, and that they only return when a fever has been gone for more than 24 hours without medication.

Most employers are also preparing to make accommodations to minimize the spread of H1N1 in the workplace. For federal employees, the Office of Personnel Management has outlined instructions for supervisors to work with employees to use sick leave or make alternative arrangements, such as telework.

As this extraordinary flu season gets underway, it is important that we all take the recommended precautions to minimize the spread of both the seasonal and H1N1 viruses. For additional information, I encourage people to visit flu.gov or the Maryland Department of Health and Mental site <http://dhmh.maryland.gov/swineflu/>.