

**Novel H1N1 Flu**  
**Updated Key Points**  
**May 3, 2009: 11 a.m.**

**NUMBERS ARE EMBARGOED FOR PUBLIC RELEASE AT 11 AM**

**Situation Update**

- CDC is reporting 226 human infections with novel H1N1 flu in the United States. (Yesterday, CDC reported 160 cases.)
- The list of states with the numbers of people who are confirmed cases is updated daily at approximately 11 a.m. at <http://www.cdc.gov/h1n1flu/>.
- Human infections with novel H1N1 flu virus have been confirmed in 30 states at this time. Testing of specimens from many other states is underway, and more states are expected to be added in upcoming days. (Yesterday, CDC reported cases in 21 states.)
- But at this point, we need to move away from the focus on numbers.
- As I have been saying, we do expect that we will see more cases, more hospitalizations and more deaths from this outbreak over the coming days and weeks.
- Influenza is always serious – each year, in the United States, seasonal influenza results, on average, in an estimated 36,000 deaths from flu-related causes.
- This outbreak certainly poses the potential to be at least as serious as seasonal flu, if not more so.
- Because this is a new virus, most people will not have immunity to it, and illness may be more severe and widespread as a result.
- The situation is indeed sobering, but it's important to keep in mind that we are not helpless.

**We are taking action:**

- The Federal Government is mounting an aggressive response to this outbreak.
- CDC's goals during this public health emergency are to reduce transmission and illness severity, and provide information to assist health care providers, public health officials and the public in addressing the challenges posed by this newly identified influenza virus.

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- To this end, CDC continues to update guidance continuously. CDC will issue updated interim guidance for clinicians on how to identify and care for people who are sick with novel H1N1 flu illness. This guidance will provide priorities for testing and treatment for novel H1N1 flu infection.
- The priority use for influenza antiviral drugs during this outbreak will be to treat people with severe influenza illness and those at risk of severe disease.
- I urge to you visit the CDC website at <http://www.cdc.gov/h1n1flu/> for more information or call 1-800-CDC-INFO.
- This is a rapidly evolving situation and guidance should be considered interim and will be updated frequently.
- In addition, distribution of antiviral drugs, personal protective equipment, and respiratory protection devices from CDC's Division of the Strategic National Stockpile (SNS) to all 50 states and U.S. territories continues.
- As of May 3, deployment to 57 states or project areas has been completed.
- SNS estimates completion of CONUS (Continental United States) shipments by May 3; several Pacific Islands may require additional time to finalize transportation coordination and execution.
- There are currently 71 CDC staff persons deployed in the field to support the outbreak response.
- Everyday, we learn more about this virus and what we learn will continue to inform the actions that we take in response.
- Distribution of the diagnostic test to detect this virus has begun. Assay kits already have been received by 68 laboratories in 42 states.
- This will enable states to increase their capacity to test at the state level.
- But soon, we will likely reach a point where it will become impossible to count individual cases. At that point, we will be transitioning to using reporting systems similar to that used for seasonal flu.
- We don't count individual cases for seasonal flu, we just monitor activity levels through a nationwide surveillance system, which we will be using to monitor spread of illness caused by this new virus.

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**Novel H1N1 Flu Virus Laboratory Testing**

- The hallmark of influenza viruses is their ability to undergo constant and dramatic change.
- Many different animals and, of course, humans get infected with influenza viruses, but the viruses generally stick with one species or another.
- However, sometimes flu viruses jump from one species to another, and sometimes, viruses from different species can infect the same host and result in a new combination of virus genes.
- This last scenario is what happened and resulted in the novel H1N1 flu virus.
- I want to tell you a little bit about what the laboratory has found from exploring this novel influenza A (H1N1) virus.
- This is a very unusual virus. This particular genetic combination of influenza virus segments has not been recognized before in the U.S. or elsewhere.
- Testing of a number of the virus samples submitted to CDC show that they are very similar, which mean that they likely originated from the same source.
- It's too soon to predict what will happen or how the virus might change.
- It is important that we continue to watch this virus carefully to look for changes that may occur.
- The Southern Hemisphere is just going into their flu season and how this virus behaves will give us some clues about what we can expect for the Northern Hemisphere.

**Vaccine**

- We are aggressively taking early steps in the vaccine manufacturing process, working closely with manufacturing and the rest of the government.
- Vaccines are a very important part of a response to influenza, including novel influenza that may become pandemic.

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- CDC has isolated the novel H1N1 flu virus and is working to make a candidate vaccine virus that can be provided to industry so that manufacturers can scale up for production of a vaccine, if necessary.
- There are many steps involved with producing a vaccine and we are committed to going forward with the NIH, and FDA, BARDA, and the manufacturers of influenza vaccines, to see about developing full scale vaccine production.
- If things go well, and we achieve full scale production, it will be several months until the vaccine will be available.
- So a vaccine is an important tool for the future.

**Public:**

- We do have antiviral medications in our arsenal against flu.
- The priority use for influenza antiviral drugs during this outbreak is to treat severe influenza illness.
- Influenza antiviral drugs are prescription medicines (pills, liquid or an inhaler) with activity against influenza viruses, including swine influenza viruses.
- Antivirals work differently than vaccines or antibiotics and need to be taken according to your doctor's directions.
- There are two influenza antiviral medications that are recommended for use against swine influenza. These are oseltamivir (trade name Tamiflu®) and zanamivir (trade name Relenza®).
- Influenza antiviral drugs work best when stated soon after illness onset (within two 2 days), but treatment with antiviral drugs should still be considered after 48 hours of symptom onset, particularly for hospitalized patients or people at high risk for influenza-related complications.

You have a role in protecting yourself and your family.

- Stay informed. Health officials will provide additional information as it becomes available. Visit [www.cdc.gov](http://www.cdc.gov)

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- Everyone should take these everyday steps to protect your health and lessen the spread of this new virus:
  - Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it.
  - Wash your hands often with soap and water, especially after you cough or sneeze. Alcohol-based hand cleaners are also effective.
  - Avoid touching your eyes, nose or mouth. Germs spread this way.
  - Try to avoid close contact with sick people.
  - Stay home if you are sick for 7 days after your symptoms begin or until you have been symptom-free for 24 hours, whichever is longer. This is to keep from infecting others and spreading the virus further.
- Children, especially younger children, might potentially be contagious for longer periods. CDC is studying the virus and its capabilities to try to learn more and will provide more information as it becomes available.
- Follow local public health advice regarding school closures, avoiding crowds and other social distancing measures based on illness in specific communities.
- If you haven't developed a family emergency plan yet, consider developing one now as a precaution. This should include storing a supply of extra food, medicines, facemasks and other essential supplies.
- CDC continues to issue and update interim guidance daily on the website and through health alert network notices as information becomes available.

**Other Key Points**

**Virus Name**

- This is a rapidly evolving situation and current guidance and other web content may contain variations in how the novel H1N1 flu virus is referred to. Over the coming days and weeks, these inconsistencies will be addressed, but in the interests of meeting the agency's

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response goals, all guidance will remain posted and new guidance will continue to be issued. CDC's highest priority is on providing guidance to save lives and limit the impact of this outbreak on public health.

**Pork**

- The novel H1N1 flu virus is not transmitted by food. You cannot get novel H1N1 flu from eating pork products.

**Seasonal Flu Vaccine**

- Production of the seasonal flu vaccine for next season is nearly complete and will be completed. Seasonal flu is responsible for causing an estimated 36,000 flu-related deaths and 200,000 flu-related hospitalizations in the U.S. each year. Seasonal flu vaccine is always a public health priority.