What You Need to Know About Asthma and Pandemic H1N1 Influenza

If you have a long-term lung disease like asthma, you may have increased risk for complications from influenza, including pandemic H1N1 influenza virus. Catching the regular seasonal flu or pandemic H1N1 influenza virus can make your asthma symptoms worse. So you should pay extra-close attention to your symptoms, and be extra careful about germs. Listed below are some things people with asthma can do in order to lessen your chances of catching pandemic H1N1 influenza virus and developing complications.

Wash Your Hands Often and Ask Your Family and Co-Workers to do the Same

- Scrub for at least 20 seconds (sing “Happy Birthday” twice).
- Wash between your fingers, under your nails and the tops of your hands.
- To print off a hand washing poster to hang in your home and work, go to: http://www.lung.ca/protect-protegez/germs-microbes_e.php.

Get Vaccinated

The Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention recommends the influenza vaccine for persons who have asthma (6 months and older). This vaccine will not prevent you from catching pandemic H1N1 influenza virus; however, it can help prevent seasonal influenza and lessen the complications. You should also ask your doctor about getting the pneumococcal vaccine.

Take CONTROL of Asthma

- **Care for yourself.** Know your body’s reactions to stress, exercise, and illness. Learn to recognize the warning signs that something might be wrong with your breathing. Reduce the chance of these signs happening by taking your daily controller medicine. Educate yourself and the people around you about asthma. Additional resources are available at: www.injac.org.
- **Own and use an asthma action plan.** Everyone should have an asthma action plan. An asthma action plan tells you and your caretakers what to do when you are having and are not having asthma symptoms. To download an asthma action plan please go to: http://www.injac.org/breatheasyville/asthmaactionplan.html.