

H1N1 Influenza 09 (Human Swine Flu)

FAQs - Aboriginal people in Victoria

1. Who is at risk of more severe illness or complications? Why?

Human Swine Flu, like human or seasonal flu, can make underlying medical conditions worse. A potentially life-threatening complication of Human Swine Flu is pneumonia (a type of lung infection). Some people in the community such as people in aged care facilities, hospitals and special developmental schools and Aboriginal people may be at greater risk from the virus or its complications.

2. Why are Aboriginal people at greater risk?

Aboriginal people may be at greater risk because within the Aboriginal community there are higher rates of chronic or underlying medical conditions, which Human Swine Flu can make worse.

3. What's being done to protect those in the community who are at greater risk?

The illness is classified as 'moderate'. This means approximately 95% of cases will be mild with 5% of cases severe. DHS is still focusing its prevention and treatment on members of the community most at risk to viral infections, such as the elderly, students at special development schools, hospital patients and people with a chronic illness.

4. How can I reduce the risk of contracting Human Swine Flu?

We all have a role to play. Protect yourself. Protect others.

Personal hygiene remains vital. Following flu season hygiene procedures can greatly reduce the chances of getting influenza or passing it on to others.

- Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in a plastic lined rubbish bin after you use it.
- Wash your hands with soap and water, especially after you cough or sneeze and before meals. Alcohol-based hands cleaners are also effective.
- Avoid touching your eyes, nose or mouth. Germs spread that way.
- If you have the flu, you should avoid public places and close contact with others, especially children.

In addition, Aboriginal people are strongly encouraged to follow the advice of their doctor, health care professional, or Aboriginal Health Worker regarding treatment of any chronic illnesses and, for those aged 50 years or older, to be up to date with your pneumococcal and flu vaccines. If you are unsure about this, or your vaccines are not up to date, it is very important that you speak with your doctor, health care professional or staff at your Aboriginal Community Controlled Health Organisation as soon as possible.

5. Why is DHS communicating with Aboriginal communities now?

DHS is in the process of identifying those groups within the community who are at greater risk and developing appropriate strategies. To date we only have a very low number of recorded cases of H1N1 09 Influenza (Human Swine Influenza) among Aboriginal people in Victoria. However it's important we work with the Aboriginal community and be proactive and vigilant in maintaining your wellbeing.

6. What should I do if I am ill?

People with mild flu-like illness should stay home. People who are moderately unwell with influenza-like symptoms should call ahead then visit their GP or Aboriginal Community Controlled Health Service. Only people who are seriously unwell should visit a hospital emergency department.

FOR MORE INFORMATION:

Visit www.health.vic.gov.au

Call the Swine Influenza Hotline Tel 180 2007

Call Nurse-on-Call Tel. 1300 606 024 – for expert health information and advice (24 hours, 7 days)

Follow us on Twitter - www.twitter.com/VicGovHealth