

Information regarding influenza and people living with HIV/AIDS

People living with HIV/AIDS – as well as those living with heart disease, asthma, liver disease, diabetes, and kidney disease – have a greater risk for more severe influenza illness and complications. If you are HIV-infected, you should take steps to be aware of your health status and prevent influenza infection during the influenza season (October-March) and when there is an influenza outbreak, regardless of the time of year. It is not clear whether people living with HIV/AIDS have any more or less risk of infection or illness from H1N1 or swine flu.

Tips on keeping preventing any kind of influenza infection:

- 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.

If you think you are sick with influenza, **call your doctor immediately**. The CDC recommends that you stay home from work or school and limit contact with others.

Antiviral medications against influenza are used to aid in recovery of illness (they work best if taken within 48 hours of when your symptoms start). These antiviral medications are safe for HIV-infected individuals. Your doctor must prescribe these medications.

HIV-infected individuals are recommended to receive the annual influenza vaccination (available every fall and winter, usually starting in October). At this time, a vaccine against H1N1 or swine flu is **NOT** currently available.