Preventing Exposure to Influenza
Steps health care workers can take.

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At the start of this year’s flu season, there was a shortage of flu vaccine available to the United States. The U.S. company Chiron was supposed to provide shipments of flu vaccine, but the license of one of its overseas manufacturing plants was suspended because of contamination, significantly limiting the number of doses available for distribution. The Centers for Disease Control and Prevention (CDC) estimated that only 58 million doses of the flu shot—about half of the expected amount—would be available starting in October 2004, with a small number of doses coming in periodically throughout the rest of the flu season.

Health care workers involved in direct patient care are included on the CDC’s list of priority groups for influenza vaccination. Although health care workers are identified as a priority group every year, the CDC estimates that only 38.4% are vaccinated annually. If the flu shot is not readily available, nurses can protect themselves and their patients in other ways.

Live attenuated vaccine. Live attenuated vaccine (FluMist) is an alternative to the flu shot, which is a trivalent inactivated vaccine. Concerns about receiving the live attenuated vaccine center on the potential to shed the virus to patients, especially those who may be immunocompromised, or to other close contacts, such as family or friends. The CDC says that the live attenuated vaccine is a safe option for health care workers not involved in caring for severely immunocompromised patients and that they don’t have to stay away from work for a period of time. Research supporting this recommendation is minimal.

Antiviral medications. Some antiviral drugs, specifically amantadine (Symadrine and others), and rimantadine (Flumadine), can be taken as chemoprophylaxis for influenza. This is another alternative to the flu shot that the CDC has considered for health care workers. Availability varies among different communities. One concern is that overuse of antiviral drugs might lead to the development of antiviral-resistant influenza virus strains. You should consult a primary health care provider if you wish to pursue this option.

Respiratory etiquette. Covering your nose and mouth with a tissue when coughing or sneezing prevents potential spread of the respiratory agents. It’s also recommended that you sneeze into the inner elbow area of the sleeve to avoid contaminating your hands at all. Further, you should avoid touching your eyes, nose, and mouth whenever possible.

Handwashing. You should wash your hands frequently with soap and hot water after providing care to each patient and before the next. Also, alcohol-based hand cleaners can be used if you have no ready access to soap and water. Further, consider not shaking hands.

Patient identification and isolation. Health care settings should have in place a system of promptly identifying patients with suspected infectious respiratory conditions and isolating them in areas that minimize shared breathing space with staff, other patients, and visitors. Staff responsible for patient intake or admissions should be aware of the reason that patients are seeking care and signs indicating respiratory illness, such as coughing and fever. These patients should be isolated in well-ventilated areas or in negative-pressure isolation rooms when appropriate.

Respiratory protection. Health care staff who may be exposed to communicable respiratory agents, like influenza virus and Mycobacterium tuberculosis, should be fit-tested for respiratory protection according to the OSHA Respiratory Protection Standard (29 CFR 1910.134). Training in the proper use of respirators, including donning and removing, also should be given to all health care workers required to use them. Respiratory protection should be made readily and conveniently available to at-risk health care workers.

Stay home when sick. If you’re feeling ill or suspect that you have the flu, you shouldn’t go to work. Also, employers and managers need to understand that allowing sick employees to stay away from work is one of the most effective ways to prevent an institutional outbreak of influenza.

Consult the CDC at www.cdc.gov and their local health department for the latest information.