



Galen Health Flu Immunisation Clinics

At Galen Health we continually look to prevent health complication for our patients and our clients. As a result we are proactively addressing the Flu in advance of winter, as this is an annual condition that affects many individuals and businesses. From 25th September Galen Health will be offering the following to any individual, club or corporate business regardless of whether they are registered with Galen Health or not, as it is vital to protect those who need it and reduce the overall risk of people suffering the symptoms and putting themselves, their family's or their co-workers at risk.

Come to Galen Health: If you come to us at number 9 Harley Street, we will offer you the best price for either the Flu jab and or the Pneumococcal Jab. (Read below to find out more)

Or

Galen Health will come to you: If you, your club or your business requires more than one individual to be vaccinated we will provide you with a Galen Health Nurse who will come to your venue or place of work and run a vaccination clinic.

The above vaccinations will not treat Swine Flu. Currently Galen Health has no vaccines for H1N1 (Swine Flu), however we are looking to purchase these vaccinations as soon as these are made available for our patients - Keep checking our live website news feed as updates will be posted regarding this development.

Below is some background information on Influenza, Pneumococcal & H1N1 (Swine Flu)

About Influenza

Influenza, which is commonly called "the flu", is a potentially fatal illness caused by a virus that infects the respiratory tract. The influenza virus is commonly wrongly associated with the common cold. The death rate with influenza is about 0.1% with people who are infected. It was only in recent years that the virus has been identified, and not until 1933 was it recognised as a major worldwide illness. Scientists have had the opportunity to look at lungs from previous deaths due to illness and have identified that influenza caused between 40 - 100 million deaths in 1918.

The Virus

The term Virus comes from the Latin meaning for toxin or poison. Viruses are microscopic agents that can only survive and replicate inside living cells, the host. The influenza virus is divided into 3 types, A, B and C. Types A and B are the more serious forms that are responsible for epidemics of the respiratory system every winter. The influenza virus continually changes over time by mutation

and allows the virus to infect the hosts and cause illness. The continuing changing aspect of the virus causes it to be an extremely difficult illness to treat and prevent without medical input.

The virus is spread by droplets in people who cough, sneeze, or direct hand to hand contact with someone infected with the virus. The peak rise in cases is in December to March in the northern hemisphere and May to September in the southern hemisphere.

The symptoms

Typical features include:

- Fever
- Cough
- Sore throat
- Headaches
- Muscle aches
- Fatigue
- Nausea, vomiting, diarrhoea
- Nasal congestion and discharge

Some people can develop serious life threatening medical complications such as pneumonia and respiratory distress which can lead to death in many cases. It is reported that there are up to 20,000 deaths a year related to influenza.

About Pneumococcal

Pneumococcal and Influenza are leading killer diseases around the world. They can affect large proportions of a population and the associated rate of morbidity and mortality causes longstanding health problems. These epidemics have enormous impacts on health care and the economy when large proportions of its work force have been affected. Reactively treating these diseases is costly, but preventative immunisation is both a safer and far better way to minimise the impact on an individual's health.

The current Pneumococcal vaccination gives protection against 23 serotypes of pneumococcus for five years.

Pneumococcal infections are acute infections that are caused by the bacteria known as streptococcus pneumoniae (s. pneumoniae).

There are over 90 different strains of s. pneumoniae, but it is thought that most infections are caused by 10 strains.

Types of pneumococcal infection

Pneumococcal infections are usually one of two types:

- **non-invasive pneumococcal infections**, which occur outside the major organs or the blood, and tend to be less serious, and
- **invasive pneumococcal infections**, which occur inside a major organ, or in the blood, and tend to be more serious.

Non-invasive pneumococcal infections

Non-invasive pneumococcal infections include:

- middle ear infection (otitis media),
- infection of the sinuses (sinusitis), and
- infection of the airways (bronchitis).

Invasive pneumococcal infections

Invasive pneumococcal infections include:

- pneumonia (lung infection),
- meningitis (infection of the brain), and
- infection of the blood (sepsis).

How common are pneumococcal infections?

Non-invasive pneumococcal infections are thought to be quite common, although it's hard to estimate the exact number of cases that occur each year in England. This is because infections usually clear up within a few days, so people don't usually have to visit their GP.

Invasive pneumococcal infections are less common than the non-invasive variety, but they can place a considerable strain on health services. For example, in England and Wales it's estimated that 40,000 people require hospital treatment due to pneumonia every year.

Meningitis is a medical emergency that requires immediate treatment in an intensive care unit (ICU). However, it's much rarer than pneumonia, with only one in 100,000 people developing the condition each year.

Cases of invasive pneumococcal infection usually peak in the winter, during December and January.

Vaccinations

There are two vaccinations that are used for the most common strains of pneumococcal infections. They are:

- the **pneumococcal conjugate vaccine (PCV)**, which all children under the age of two should receive as part of their childhood vaccination programme, and

- the **pneumococcal polysaccharide vaccine** (PPV), which is recommended for all adults over 65 years of age. This is also recommended for those who are over two years of age and in a high risk group for developing a pneumococcal infection, such as people with diabetes or heart disease.

See the causes section for more information about who is recommended to receive a PPV vaccine.

Trends in pneumococcal infections

Since the introduction of the PCV in 2002 and the PPV in 2003, the number of cases of invasive pneumococcal infection has fallen by 50%.

However, there is concern about the number of *s. pneumoniae* that have developed a resistance to antibiotics. These types of bacteria are known as drug-resistant streptococcus pneumoniae (DRSP).

In England and Wales it is estimated that about 4% of *s. pneumoniae* are resistant to drugs. Infections that are caused by DRSPs can be much more challenging to treat.

GPs are becoming increasingly reluctant to prescribe antibiotics for cases of mild non-invasive infection because each time an antibiotic is used the chances of the bacteria developing a resistance to it are increased.

H1N1 (Swine Flu)

A new strain of Influenza A (H1N1), also known as swine flu, was confirmed in the UK in April and has spread to more than 100 countries around the world.

Although symptoms have generally proved mild, a small number of patients will develop more serious illness. Many of these people have other underlying health conditions, such as heart or lung disease, that put them at increased risk.

Symptoms

Flu symptoms can include:

- fever
- cough
- headache
- weakness and fatigue
- aching muscles and joints
- sore throat
- runny nose

As with any sort of influenza, how bad and how long the symptoms last will depend on treatment and the patient's individual circumstances.

Most cases reported in the UK have been relatively mild, with those affected starting to recover within a week.

Who is at risk?

Some groups of people are more at risk of serious illness if they catch swine flu. It is vital that people in these higher risk groups get anti-viral drugs and start taking them as soon as possible – within 48 hours of the onset of symptoms.

Health authorities are still learning about the swine flu virus, but the following people are known to be at higher risk:

- pregnant women
- people aged 65 years and older
- young children under five years old

People suffering from the following illnesses are also at increased risk:

- chronic lung disease
- chronic heart disease
- chronic kidney disease
- chronic liver disease
- chronic neurological disease
- Immunosuppression (whether caused by disease or treatment)
- Diabetes mellitus
- patients who have had drug treatment for asthma within the past three years

What is an epidemic and a pandemic?

An epidemic is a sudden outbreak of disease that spreads through a single population or region in a short amount of time.

A pandemic occurs when there is a rapidly-spreading epidemic of a disease that affects most countries and regions of the world.

Swine flu is now a pandemic. Pandemic flu occurs when an influenza virus emerges that is so different from previously circulating strains that few, if any, people have any immunity to it. This allows it to spread widely and rapidly, causing serious illness.

Ordinary flu and pandemic flu - the differences

Ordinary flu:

- occurs every year during the winter

- affects 10 to 15 per cent of the UK population
- most people recover within 1 or 2 weeks without medical treatment
- can be identified in advance and a vaccine can be made (this immunisation is known as the flu jab and helps protect people from ordinary flu)

Pandemic flu:

- occurs during any season
- affects more people than ordinary flu (up to half the population)
- is a more serious infection
- people of all ages may be at risk of infection
- a vaccine cannot be made because the virus strain has not been identified
- antiviral medicine is stockpiled to treat people