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### **Healthy for Life Newsletter**

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### **H1N1 Virus (Swine Flu)**

#### **Introduction**

This edition of the Healthy for Life Newsletter is going to focus on the H1N1 virus and give you some insight on this pandemic. The Centers for Disease Control (CDC) is projecting that over 40% of the population will be infected by this virus within the next two years. This viral flu is getting a lot of media attention and it is creating some panic among everyone. However, even though this virus is going to affect many people, I do not feel that there is any need to be overly anxious and concerned because of all the media hype around this infection. Most of it is speculation and to date this virus does not seem to be as virulent or serious as the common seasonal flu. Also, this virus has been shown to be sensitive to some of our anti-viral medication (Tamiflu and Relenza). However, I do share the concerns of the CDC that this viral infection may become more virulent during the winter months, when these infections are normally more serious.

Most people who have been infected with the H1N1 virus have only experienced minor symptoms and have not even seen a doctor let alone been hospitalized. There have certainly been individuals who have contracted this viral illness and required hospitalization and some

have even died. However, it has been documented that those who are experiencing the most serious infections and even death also have an underlying chronic illness. These would be children with asthma, cystic fibrosis, autism, cerebral palsy, diabetes, or undergoing treatment for cancer. In adults, they may have diabetes, COPD, asthma, cancer, HIV, or have a suppressed immune system because of the medications they are taking. It is wise for everyone to become informed about this disease and its potential risk, especially for anyone who has an underlying chronic illness.

#### **2009 H1N1 Flu (Novel H1N1 Flu or Swine Flu)**

In 2009, a new influenza virus has been identified and is causing illness in people throughout the world. The World Health Organization has now labeled this infection a pandemic. This virus was originally referred to as "swine flu" because laboratory testing showed that many of the genes in this new virus were very similar to the influenza virus that normally occurs in pigs (swine). However, further studies have shown that this virus is very different from what normally is found in North American pigs.

#### **How does the H1N1 Virus Spread?**

It appears that the H1N1 virus spreads much the same way as does the seasonal flu. Flu viruses are spread primarily from person to

person through coughing and sneezing or what is referred to as “droplet spread.” This is different from airborne diseases that are simply in the air. This also means that some people may be infected by touching someone or a surface or object that is infected and then touching their nose or mouth.

### **What are the Symptoms and Severity of the H1N1 Virus?**

The symptoms of the H1N1 virus are very similar to the seasonal flu. The most common presenting symptoms are fever, cough, sore throat, runny or stuffy nose, body aches (myalgia), headache, chills, and fatigue. Some people infected with this virus are also experiencing diarrhea and vomiting. As I mentioned in the introduction, the majority of people infected with this virus have a mild clinical course and recover within a few days. However, there are people who become very sick and require hospitalization. Again, this illness can also lead to death; however, this has been seen primarily in people who also have an underlying chronic illness like asthma, diabetes, heart disease, compromised immune system (like patients with HIV or receiving chemotherapeutic drugs), pregnancy, and kidney disease.

Normally with seasonal flu about 90% of the deaths occur in patients who are older than 60. However; with the H1N1 virus very few deaths have occurred in patients older than 64 years of age. The researchers believe this is due to the fact that approximately 30% of the older patients are felt to have some antibodies against this virus. Almost all the deaths in children and adults are seen in individuals who also have an underlying chronic illness or disability.

### **How long can an Infected Person spread this Virus?**

Most researchers feel that an infected person can spread this virus from one day before

getting sick to about five to seven days following becoming ill. Therefore, one of the major plans to limit the spread of this disease is to have people who have the typical symptoms of the flu to stay home and not expose others. You are going to hear and see a lot of reports of people felt to be infected with this virus encouraged to stay home or be isolated in some way. The hope is that the spread of this virus can be slowed.

### **Prevention and Treatment**

#### **What can I do to protect myself from getting the H1N1 virus?**

There are some very common sense things you can do to decrease your risk of getting this viral flu:

- Cover your nose and mouth with a tissue when you cough or sneeze. Obviously, throw the tissue away and if you cover your mouth with your hand, then wash your hands as soon as it is practical.
- Again, wash your hands frequently with soap and water.
- Avoid touching your eyes, hands, nose, or mouth.
- Avoid people who are ill or may be infected with the flu virus.
- If you feel you are becoming ill with a flu-like illness, the CDC recommends that you stay home for a minimum of 24 hours to be sure that you are not developing a more serious illness.

#### **What about taking a Vaccine?**

A vaccine is being developed specifically for the H1N1 virus. However, it is presently not available and is projected to be available sometime this fall (October or November). The CDC is going to be recommending that people get the seasonal flu vaccine even though this is not going to protect against the H1N1 virus. Obviously, they also are going to

be recommending that individuals also get the H1N1 vaccine when it becomes available. Because there will not be enough vaccine available for everyone when it is first released, the CDC is now recommending that the following groups strongly consider getting the H1N1 in this order:

- **Anyone between the ages of 6 months and 64 years old** who have a serious underlying chronic disease as mentioned above.
- **Healthcare and emergency medical services personnel** because infections among healthcare workers have been reported and this can be a potential source of infection for vulnerable patients. Also, increased absenteeism in this population could reduce healthcare system capacity.
- **Pregnant women** because they are at higher risk of complications and can potentially provide protection to infants who cannot be vaccinated;
- **Household contacts and caregivers for children younger than 6 months of age** because younger infants are at higher risk of influenza-related complications and cannot be vaccinated. Vaccination of those in close contact with infants less than 6 months old might help protect infants by “cocooning” them from the virus;
- **All people from 6 months through 24 years of age**
- **Children from 6 months through 18 years of age** because we have seen many cases of novel H1N1 influenza in children and they are in close contact with each other in school and day care settings, which increases the likelihood of disease spread, and
- **Young adults 19 through 24 years of age** because we have seen many cases of novel H1N1 influenza in these healthy

young adults and they often live, work, and study in close proximity, and they are a frequently mobile population; and,

- **Persons over the age of 64 years who have health conditions associated with higher risk of medical complications from influenza.**

Now, if the supply of vaccine is great enough to cover these groups, then they are going to be recommending that other groups also consider getting this vaccine—especially the elderly or those over 65 years of age.

It is my opinion that anyone with a significant underlying chronic disease needs to strongly consider getting both the seasonal flu vaccine along with H1N1 vaccine when it is available. Healthcare providers, mothers with children under the age of 6 months, and pregnant women should also strongly consider getting these vaccines when available. I feel if you are in good health and follow the preventive guidelines in this newsletter that taking either vaccine is optional.

#### **Are there any medications that can treat the H1N1 virus?**

Not only are the majority of infections from the H1N1 virus a minor illness, but this viral infection also responds to anti-viral medication. This virus has responded favorably to both Tamiflu (oseltamivir) or Relenza (zanamivir). Therefore, it is critical to realize that even if you decide not to have the vaccination for the H1N1 virus, that you still have the option to take the anti-viral medication if you become seriously ill. However, I need to point out that the sooner you start this medication, the better. Therefore, if you become ill and are staying home, you need to watch your clinical course very closely. Any signs that this illness is become worse and worse requires that you seek out medical attention immediately.

## My Personal Recommendations Regarding the H1N1 viral Pandemic

I personally believe the greatest defense against the H1N1 virus is to optimize your body's natural defense system. This is best accomplished by taking what I refer to as [cellular nutrition](#). In my book, *What Your Doctor Doesn't Know about Nutritional Medicine*, I point out how you can significantly build up your natural immune system with the use of nutritional supplements. Vitamin E, Vitamin C, Selenium, Zinc, Carotenoids, Glutathione, Coenzyme Q10, and several other nutrients are known to improve the immune system. Dr. Karlheinz Schmidt stated, "The optimal function of the host defense system depends upon an adequate supply of antioxidants micronutrients." When all of the players of our immune system are functioning at their peak capacity, our overall health is obviously the beneficiary and offers the best protection against the H1N1 viral pandemic. The medical literature shows us that it takes six months for anyone under the age of thirty to optimize their immune system and one year for those individuals over the age of thirty.

Therefore, any individual who has been taking the [Cellular Nutrition](#) during the past year is already optimizing his or her immune system. I have learned over the past ten years of reviewing the medical literature that cellular nutrition does not only enhance our natural antioxidant system but also the natural immune system, and repair system. Therefore, you want to be taking all these nutrients at optimal levels.

Also one of the greatest enhancers of our immune system is Coenzyme Q10. I would recommend for everyone who is truly concerned about protecting themselves against the H1N1 virus to consider adding 60 mg of gel form of CoQ10 daily. Therefore, the absolute best way to protect yourself from getting or surviving the H1N1 virus is to enhance your natural immune system via cellular nutrition and adding CoQ10 as an

optimizer. Many of my patients also take 100 to 200 mg of a grape seed extract as a way to optimize their immune system. Another thing to consider, if you are becoming ill, is to add some additional vitamins C to your cellular nutrition for several days or until you have completely recovered.

Now if you feel you are coming down with the viral flu, I strongly recommend that you immediately start taking 250 to 500mg daily of Olive Leaf Extract and/or a Grapefruit nasal spray, both of which have been shown to be capable of killing viruses and bacteria in the nasopharyngeal area, reducing the viral load that the body needs to handle. My patients who travel via airlines frequently have used this regimen preventively for a day or two while flying and have been very successful in avoiding other more common upper respiratory infections and sinusitis. One of the worst environments for viruses and bacteria is an airplane. Not only are passengers very close together and many may be sick but the airlines tend to re-circulate the air to save on fuel.

## Conclusion

I believe that anyone who is pregnant, a healthcare provider, has an underlying chronic illness, or is a mother of young children should certainly consider taking the H1N1 vaccine when it becomes available. If you are otherwise healthy and have been taking high quality, complete and balanced nutritional supplements for over one year, you are providing the best defense against this disease and taking the vaccination is optional. The main reason I say this is the fact that even if you become infected with the H1N1 virus, you most likely will only have a mild case. If you find yourself becoming more and more ill, you should quickly seek out professional medical advice and start taking the anti-viral medication that has been so effective against this H1N1 virus.

No one knows how severe or how widespread the H1N1 viral pandemic will be; however, it is known that the immune system is our great protector and having it "firing on all cylinders" will only improve our chances to avoid getting this infection in the first place and even if we become infected, it gives us the best chance to fight it off so it is only a minor illness.