

Flu Myths and Realities

"The U.S. Centers for Disease Control and Prevention (CDC) is sending e-mails about a governmental registration program on the H1N1 vaccination"

These e-mails are not from the CDC – they are fraudulent emails referencing a CDC-sponsored Vaccination Program. they are spam e-mails designed by computer hackers to spread a computer virus.

The messages request that users must create a personal H1N1 (swine flu) Vaccination Profile on the cdc.gov website. The message then states that anyone that has reached the age of 18 has to have his/her personal Vaccination Profile on the cdc.gov site.

The CDC has NOT implemented a state vaccination program requiring registration on www.cdc.gov. Users that click on the email are at risk of having malicious code installed on their system. CDC reminds users to take the following steps to reduce the risk of being a victim of a phishing attack:

- Do not follow unsolicited links and do not open or respond to unsolicited email messages.
 - Use caution when visiting un-trusted websites.
 - Use caution when entering personal information online.

"All H1N1 Flu Products Sold Over the Internet Are Safe."

The U.S. Food and Drug Administration (FDA) is warning consumers to use extreme care when purchasing any products over the Internet that claim to diagnose, prevent, treat or cure the H1N1 flu virus. Since the H1N1 virus first emerged last spring, many people are seizing on this as an opportunity to promote fraudulent claims and treatments to the public. Products come in all varieties including dietary supplements, other food products, drugs, devices, and vaccines. What you should do:

Only use FDA-approved or authorized medical products for the prevention, treatment, or diagnosis of the H1N1 flu virus.

Consult your healthcare professional if you have ANY questions about whether a product is an effective treatment of H1N1 before you purchase or take it.

Check FDA's list of fraudulent H1N1 flu products at www.fda.gov/h1n1fraud.
To report suspected fraudulent H1N1 products, please visit www.fda.gov/h1n1fraudreport.



Surgeon General Dr. Anne Schuchat [dispels myths about the H1N1 flu virus](#) on "The Doctors"

“Vaccines that contain thimerosal are unsafe for children and pregnant women.”

It is safe for children and pregnant women to receive a flu vaccine that contains thimerosal.

Thimerosal is a very effective preservative that has been used since the 1930s to prevent contamination in some multi-dose vials of vaccines. There is no convincing evidence of harm caused by the low doses of thimerosal in vaccines, except for minor reactions like redness and swelling at the injection site.

The 2009-H1N1 influenza vaccines that FDA has licensed will be manufactured in several formulations, including pre-filled, single-dose syringes and nasal sprayers along with multi-dose vials. Only multi-dose vials of seasonal influenza vaccine will contain thimerosal to prevent potential contamination after the vial is opened. Single-dose units, however, will not require the use of thimerosal as a preservative. You may request this form of the vaccine if it is available. In addition, the nasal spray version of the 2009 H1N1 vaccine is produced in single-units and will not contain thimerosal.

[Read more about thimerosal.](#)

“The H1N1 vaccine includes adjuvants, such as squalene.”

None of the H1N1 vaccines currently distributed by the U.S. government contain adjuvants.

All H1N1 vaccines used in the United States are licensed by the FDA and are made in the same way as seasonal influenza vaccines are made. Currently, seasonal flu vaccines in the United States are also made without adjuvants.

If needed, an adjuvant is a component that can be incorporated into a vaccine to help to generate a stronger immune response to the vaccine and help prevent disease. Squalene is a compound found in many natural sources, such as olive oil, that can act as an adjuvant and is used as an adjuvant in vaccines in many countries.

The evaluation of any vaccine by the Food and Drug Administration considers the safety, effectiveness, and the immune response and includes consideration of all components of the vaccine.

“The federal government is running a mandatory vaccination campaign.”

The federal government’s vaccination program for H1N1 flu is VOLUNTARY. Some hospitals and localities are requiring that health care workers get vaccinated for the flu, but that is a local decision. HHS and the CDC have included health care workers as one of our top priority groups to receive the vaccine, and several places across the country began offering H1N1 vaccination to health care workers this week.

The petition on a few selected internet sites protesting the federal government’s “mandatory” vaccination campaign is simply false in its claims. Vaccination is highly recommended as a protective measure against the flu, but is absolutely voluntary.

“It costs too much money to get an H1N1 vaccine.”

The federal government has purchased the H1N1 vaccine and is providing it to the states free of charge. This is different in many places from the seasonal flu vaccine.

Public vaccination clinics (sponsored by local health departments at schools or other places) will offer vaccine at no charge. Some private providers may charge a small fee to administer the vaccine, but cost should not be a barrier to getting immunized. Many, many people and businesses have stepped up to the public health challenge we all face

and are working together for the overall public good to make this vaccine free – or at least affordable – for all those who want it.

“You need to get two doses of the H1N1 vaccine, and it takes a month between each dose.”

There is really good news that has come out of our clinical trials being run by the National Institutes of Health and the flu vaccine manufacturers. The H1N1 vaccine is a really good match with the H1N1 virus currently circulating across the country, and healthy adults and children 10 and older will need only one dose of vaccine.

Though scientists initially thought that two doses might be required, information from clinical trials has since demonstrated the H1N1 vaccine works faster than we expected and works well against the H1N1 virus, which is making millions of Americans sick.

It's also fine to get the seasonal flu shot and the H1N1 shot at the same time. It is true that if you get the nasal spray form of the vaccine, you need to wait three to four weeks before getting another nasal spray vaccine.

“This new vaccine is not safe and is untested.”

Clinical trials conducted by the National Institutes of Health and the vaccine manufacturers have shown that the new H1N1 vaccine is both safe and effective. The FDA has licensed it. There have been no safety shortcuts.

It is produced exactly the same way the seasonal flu vaccine is produced every year. It is simply a new virus strain. In fact, had H1N1 struck this country earlier than this spring, the H1N1 strain probably would have been included as part of this year's seasonal flu shot.

Millions of Americans get the seasonal flu vaccine each year without any problems. Still, understanding that some Americans have concerns about “new” vaccines, the National Institutes of Health and the vaccine manufacturers have conducted more rigorous tests on the H1N1 vaccine than they do on other flu vaccines, and there have been no red flags from these clinical trials.

Also, CDC has stepped up surveillance efforts to track the H1N1 vaccine and any possible adverse events. Since it is so closely related to the seasonal flu vaccine, we do not expect to see serious side effects. But we are taking all the necessary steps to promote and monitor safety.

Our top doctors and scientists believe the risk of the flu, especially for pregnant women, children, and people with underlying health conditions, is higher than any risk that might come from the H1N1 vaccine.

“I got an email that tells the story of someone who got a flu shot and had a miscarriage two days later.”

Tragically, every day in the U.S., people suffer from heart attacks, miscarriages, strokes, and other health-related events. Some result in serious illness, even death. For example, there are approximately 8,700 deaths from heart attack, 140 cases of Guillain-Barre, and 14,000 miscarriages in the U.S. every week. These events are no more common among people who have received seasonal flu vaccine than in people who have not.

The CDC has received no reports of serious adverse events from people who have received the H1N1 vaccine to date in the clinical trials or in the few places across the country where vaccinations have begun. We have created a strong new surveillance system that will allow us to track adverse reactions and quickly analyze whether there is a link to the vaccine.

“You can get infected with H1N1 virus from eating pork.”

False. The 2009-H1N1 virus is not spread by food. Eating properly handled and cooked pork products is safe.

“You can get flu from drinking water or swimming pools.”

Chlorinated tap water and swimming pool water does not put you at risk for flu. To date, we don't know of anyone who has acquired flu from drinking water or from a swimming pool.

“A 14-year old girl in the United Kingdom died after being vaccinated with the HPV vaccine.”

British scientists report this particular event was unrelated to the HPV vaccine and definitely unrelated to the H1N1 flu vaccine.

Public health officials in the UK have said the safety of the HPV vaccine was not in question, and no link can currently be made between the girl's death and the vaccine. According to the Medicines and Healthcare Products Regulatory Agency—their counterpart to the FDA—the girl had a rare serious underlying medical condition that was likely to have caused her death.

Licensed seasonal flu vaccines have a long track record of safety based on use in hundreds of millions of people. H1N1 vaccines are being manufactured by the same methods as the seasonal flu vaccines administered every year.

Provided by: Flu.gov, visit <http://www.flu.gov/myths/index.html>