

# Influenza and IBD



Otherwise known as the flu, influenza is a contagious respiratory illness caused by [influenza viruses](#) which can cause mild to severe illness, and at times can lead to death. Some people, including older people, young children, and individuals with certain health conditions, are at high risk for serious complications from the flu. You can learn more about these groups here: <http://www.cdc.gov/flu/about/disease/index.htm>.

According to the Centers for Disease Control and Prevention (CDC), the best way to prevent the flu is by getting a flu vaccine each year. In their *Guidelines for Immunizations in Patients with Inflammatory Bowel Disease*, the immunization schedule for patients with IBD should not, in most cases, deviate from the recommended schedule for the general population of children and adults. Current guidelines recommend inactivated (organisms have been killed or inactivated with heat or chemicals) flu and pneumococcal vaccines in patients who are immunosuppressed.<sup>(1)</sup>

Therefore, it is important to ask your gastroenterologist, primary care physician, or other health care provider whether you or your child with IBD should be vaccinated against the flu, as well as discuss its risks versus its benefits.

## H1N1 (Swine Flu)

In June 2009, the [World Health Organization](#) (WHO) announced that a pandemic of novel H1N1 flu was underway. H1N1 (referred to as “swine flu” early on) is a new influenza virus causing illness in people. This virus was first detected in the United States in April 2009. H1N1 is spreading from person to person worldwide, most likely in a similar fashion to regular seasonal influenza viruses. Flu viruses primarily spread from through close contact (i.e. coughing or sneezing) with individuals who already have the flu. People also may become infected by touching something—such as a surface or object—with the flu virus on it and then touching their mouth or nose (<http://www.cdc.gov/h1n1flu/qa.htm>).

New H1N1 vaccine(s) will be available in the fall of 2009. Both a live vaccine and inactivated vaccine will be available. Patients on immunosuppressant therapies such as 6MP, methotrexate, and biologic therapies (Remicade, Humira, Cimzia, or Tysabri) should discuss the risks and benefits of the vaccine with their doctor.

The CDC is encouraging the public to take the following **three action steps** to fight the flu (including H1N1):

- **Take time to get vaccinated.** The CDC recommends a yearly seasonal flu vaccine as the most important step in protecting against the flu. A seasonal flu vaccine will not protect against H1N1.
- **Take everyday preventive actions:** Cover your nose and mouth with a tissue when you cough or sneeze; wash hands frequently with soap and water; avoid touching your eyes, nose, or mouth; and try to avoid close contact with sick people.
- **Take flu antiviral drugs if your doctor recommends them.** If you get seasonal or novel H1N1 flu, antiviral drugs can treat the flu. Antiviral drugs are prescription medicines (pills, liquid or an inhaled powder) that fight against the flu by keeping the viruses from reproducing in your body.

For more information on the “Take 3” steps, visit:  
<http://www.cdc.gov/flu/protect/preventing.htm>

The Crohn's & Colitis Foundation of America (CCFA) provides general information about Crohn's disease and ulcerative colitis, such as this fact sheet. CCFA does not endorse specific treatments or vaccinations, and always encourages patients to discuss their treatment options and associated risks versus the benefits with their physicians.

CCFA offers important resources for those with Crohn's disease or ulcerative colitis: information, guidance, support, and the latest clinical and scientific information in the field. Learn more about CCFA at [www.cdfa.org](http://www.cdfa.org). You can join your local chapter, connect with others living with these diseases, and get involved. Most of all, know that we're here for you whenever you need us. You can reach us at our Information Resource Center at **888.MY.GUT.PAIN** (888-694-8872) or [info@cdfa.org](mailto:info@cdfa.org).

**Reference:**

(1) Sands BE; Cuffari C, Katz J, Kugathasan S, Onken J, Vitek C, Orenstein W.  
Guidelines for Immunizations in Patients with Inflammatory Bowel Disease. *Inflamm Bowel Dis*. Vol 10, num 5, Sept 2004

**Additional Information Sources:**

Melmed Gil. Vaccination Strategies for Patients with Inflammatory Bowel Disease on Immunomodulators and Biologics. *Inflamm Bowel Dis* Vol 15 num 9, Sept 2009 <http://www.cdfa.org/ccfaprof/ibd-journal/Sept%202009%20-%20Vaccination%20strategies.pdf>

Ying Lu, Jacobson Denise, Bousvaros Athos. Immunizations in Patients with Inflammatory Bowel Disease. *Inflamm Bowel Dis* Vol 15 num 9, Sept 2009 <http://www.cdfa.org/ccfaprof/ibd-journal/Sept%202009%20-%20Immunizations%20in%20patients.pdf>