

What You Should Know About Influenza (Flu) Antiviral Drugs

Can the flu be treated?

Yes. There are prescription medications called “antiviral drugs” that can treat flu illness.

What are antiviral drugs?

Antiviral drugs are prescription medicines (pills, liquid, or an inhaled powder) that fight against the flu in your body. Antiviral drugs are not sold over-the-counter. You can only get them if you have a prescription from your doctor or health care provider. Antiviral drugs are different from antibiotics, which fight against bacterial infections.

What should I do if I think I have the flu?

If you get the flu, antiviral drugs are a treatment option. Check with your doctor promptly if you are at high risk of serious flu complications (see box on next page for full list of high risk factors) and you get flu symptoms. Flu symptoms can include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills, and fatigue. Your doctor may prescribe antiviral drugs to treat your flu illness.

Should I still get a flu vaccine?

Yes. Antiviral drugs are not a substitute for getting a flu vaccine. While flu vaccine can vary in how well it works, a flu vaccine is the first and best way to prevent influenza. Antiviral drugs are a second line of defense to treat the flu if you get sick.

What are the benefits of antiviral drugs?

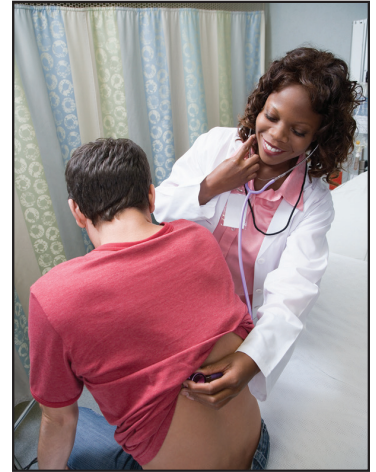
When used for treatment, antiviral drugs can lessen symptoms and shorten the time you are sick by 1 or 2 days. They also can prevent serious flu complications, like pneumonia. For people at high risk of serious flu complications, treatment with an antiviral drug can mean the difference between having a milder illness versus a very serious illness that could result in a hospital stay.

What are the possible side effects of antiviral drugs?

Some side effects have been associated with the use of flu antiviral drugs, including nausea, vomiting, dizziness, runny or stuffy nose, cough, diarrhea, headache, and some behavioral side effects. These are uncommon. Your doctor can give you more information about these drugs or you can check the CDC or the Food and Drug Administration (FDA) websites.

When should antiviral drugs be taken for treatment?

Studies show that flu antiviral drugs work best for treatment when they are started within 2 days of getting sick. However, starting them later can still be helpful, especially if the sick person is at high risk of serious flu complications or is very sick from the flu. Follow instructions for taking these drugs.



**Centers for Disease
Control and Prevention**
National Center for Immunization
and Respiratory Diseases

What antiviral drugs are recommended this flu season?

There are three FDA-approved antiviral drugs recommended by CDC this season. The brand names for these are Tamiflu® (generic name oseltamivir), Relenza® (generic name zanamivir), and Rapivab® (generic name peramivir). Tamiflu® is available as a pill or liquid and Relenza® is a powder that is inhaled. (Relenza® is not for people with breathing problems like asthma or COPD, for example.) Rapivab® is given intravenously by a health care provider.

How long should antiviral drugs be taken?

To treat the flu, Tamiflu® and Relenza® are usually prescribed for 5 days, although people hospitalized with the flu may need the medicine for longer than 5 days. Rapivab® is given intravenously for 15 to 30 minutes.

Can children and pregnant women take antiviral drugs?

Yes. Children and pregnant women can take antiviral drugs.

Who should take antiviral drugs?

It's very important that antiviral drugs be used early to treat people who are very sick with the flu (for example people who are in the hospital) and people who are sick with the flu and have a greater chance of getting serious flu complications, either because of their age or because they have a high risk medical condition. Other people also may be treated with antiviral drugs by their doctor this season. Most otherwise-healthy people who get the flu, however, do not need to be treated with antiviral drugs.

Following is a list of all the health and age factors that are known to increase a person's risk of getting serious complications from the flu:

Asthma

Neurological and neurodevelopmental conditions

Blood disorders (such as sickle cell disease)

Chronic lung disease (such as chronic obstructive pulmonary disease [COPD] and cystic fibrosis)

Endocrine disorders (such as diabetes mellitus)

Heart disease (such as congenital heart disease, congestive heart failure and coronary artery disease)

Kidney disorders

Liver disorders

Metabolic disorders (such as inherited metabolic disorders and mitochondrial disorders)

Extreme obesity (with a body mass index [BMI] of 40 or higher)

People younger than 19 years of age on long-term aspirin therapy

People with a weakened immune system due to disease or medication (such as people with HIV or AIDS, or cancer, or those on chronic steroids)

Other people at high risk from the flu:

Adults 65 years and older

Children younger than 5 years old, but especially children younger than 2 years old

Pregnant women and women up to 2 weeks after the end of pregnancy

American Indians and Alaska Natives

People who live in nursing homes and other long-term care facilities



For more information visit www.cdc.gov/flu or call 1-800-CDC-INFO.