

INFLUENZA IN PREGNANCY: COVERT FOE, OVERT ENEMY

DR. CHIRAG AMIN

M.D. DGO Dip. In Endoscopic surgery(Kiel, Germany)

Influenza like illness caused by Influenza A [H1N1], was reported from Mexico on 18th March, 2009 India reported its first case on 13th May, 2009

- It is an **Orthomyxovirus** that contains the glycoproteins : Haemagglutinin and Neuraminidase. For this reason, they are described as H1N1, H1N2 etc. depending on the type of H or N antigens they express. Influenza virus can change in 2 different ways: Antigenic shift & antigenic drift
- **Risk of severe illness is highest in:** Pregnant women especially during third trimester
- **Investigations:** CBC, LFTs, RFTs, Coagulation profile, X-ray Chest, CT scan (when required.) Real-time Reverse Transcriptase (RT-PCR) is done for confirmation of diagnosis.
- **Pregnancy:** Pregnancy does not predispose women to an increased risk of acquiring influenza infection. But, pregnant women are at 4-5 times increased risk of morbidity and mortality as compared to women who are not pregnant. risk is highest in third trimester.
- **CATEGORIES: WHO GUIDELINES:**
- **Category A :**
- **Mild Symptoms:** fever, cough, sore throat with or without body ache, headache, diarrhea and vomiting. Not a high risk for severe disease. Non- pregnant patients. No testing recommended.
- The patients should be monitored for their progress and reassessed at 24 to 48 hours by the doctor. Confine at home. Patient should avoid mixing up with public. Anti Viral therapy not indicated.
- **Category B:**
- All category A symptoms in high risk group: Pregnancy, Age < 5 & > 65yrs, Co morbid conditions: lung diseases, heart disease, liver disease, kidney disease, blood disorders, diabetes, neurological disorders, cancer and HIV/AIDS; Immunosuppressed: on long term corticosteroid therapy. The patients should confine themselves at home and avoid mixing with public and high risk members in the family
- **Category C**
- Category A & B with any of the following:
- Chest pain, breathlessness, drowsiness, cyanosis, - blood stained sputum, hypotension. Testing is mandatory; admission to ICU; start anti viral therapy
- **Complications:**
- Influenza in pregnancy is associated with increased risk of adverse pregnancy outcomes such as spontaneous abortion, preterm birth, and fetal distress. Fever (> 38° C) in early pregnancy is associated with increased risk of fetal anomalies. Treat with paracetamol only.
- Respiratory failure & Refractory shock are the most common causes of death
- **Management:** Prevention is better than cure. **Vaccinate all pregnant women!!**