

# H1N1 "Swine" Flu

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Since first uttering the words "swine flu" in April of 2009, media treatment of the story has left many Americans with apprehension and fear of exposure. This was increased by the World Health Organization declaring a world-wide pandemic level 6, but consider this, in the U.S. approximately 200,000 people are hospitalized from flu-related causes and 36,000 people die from flu-related complications each year. In the past six-months the CDC confirmed just under 10,000 cases of the new flu (however they estimate one-million people became ill from the strain without seeking medical care) with 539 people admitted to hospitals, and a total of 53 deaths. They say most people are able to recover from the illness without medical intervention.

The fact is this virus is relatively mild, even more so than the regular strains of flu passed around each year. Declaring the world-wide pandemic was not a reflection of the severity of the illness, but its wide-spread effects with confirmed cases in 70 countries around the world. The broad effects of this flu are due in large part to the fact that it's a new strain and our bodies have not yet built up antibodies specific to this disease.

Originally dubbed "swine flu" due to laboratory testing which showed many genes in the new virus similar to influenza viruses found in pigs, further study showed it to be a quadruple reassortant virus and it is now referred to as the H1N1 virus. It has two genes from flu viruses which normally affect swine in Europe and Asia as well as avian and human genes.

The H1N1 virus is spreading from person-to-person, probably in much the same way that regular seasonal influenza viruses spread – coughing, sneezing, touching infected surfaces then touching the mouth/nose/eyes, etc. Symptoms are also similar to the seasonal flu including fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills and fatigue. Reports of diarrhea and vomiting are also common. Unlike seasonal viruses which typically take their toll on children younger than 5 years old and adults over the age of 65, the H1N1 burden seems to fall on those <25 years old with few cases reported in citizens 64 and older. According to the CDC, no children and very few young adults have existing antibody to the 2009 H1N1 virus, but 1/3 of adults >60 years old do.

Because of this, CDC's Advisory Committee on Immunization Practices says those 6 months to 24 years old should be some of the first in line for the H1N1 Influenza vaccination. Others topping their list are pregnant women and adults with a compromised immune system or chronic health disorders.

However, be aware that this vaccine is just as new as the H1N1 strain and could have more detrimental effects on your health than the virus itself. Plus the chances that a new flu shot will be overwhelmingly effective are small. Think about the timeline during which this new vaccine came into play. The virus made its debut in Mexico in March of 2009 before hitting the U.S. shortly after. At the end of April, the government declared a public health emergency and researchers frantically began working on an H1N1 vaccination. Now 6 short months later, the vaccine is ready to hit the market.

In that time frame, there is no way to determine the effects (good or bad) of a vaccine as it could have only been tested on a few thousand people (if that many) for a few weeks. Yet the CDC is recommending millions of people line up for this shot. Getting the vaccination will make you a guinea pig. Furthermore, a recent poll on Medscape found that at least 1/3 of health care workers do not plan to get the H1N1 virus due to skepticism about the vaccine's effectiveness and its possible adverse effects.



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Right now the H1N1 strain is very mild. If the virus mutates (as they often do) into a more virulent form of influenza, those who have built up antibodies against the 2009 version may have a much higher chance of fighting off the supersized version. Antiviral medications like Tamiflu work by stopping the flu virus from reproducing within the body. Not only does this prevent the creation of natural antibodies, but this drug has some serious potential side effects including confusion, delirium, hallucinations, unusual behavior, or self-injury most often occurring in children. Our practitioners do not recommend the H1N1 shot or regular flu shot for anyone and also advice against the use of Tamiflu or other medications. There are better options. Use the following tips to help prevent and treat cold or flu symptoms. If your body doesn't respond or is slow to recover, call our office for further recommendations.

**Infants:**

Babies who are breastfed typically do not get the flu as often and suffer less severe symptoms than babies not breastfed. This is because mother's milk passes on infection fighting antibodies from the mother to the baby. This is very important in young babies whose immune systems are still growing. Mothers - if you are ill keep breastfeeding or bottle feed breast milk to pass these antibodies on to your child. Be careful not to cough or sneeze in the baby's face and be sure to wash your hands beforehand with soap and water. The following protocols are safe for breast feeding and pregnant women.

**To Prevent Colds & Flu (Adults 150lbs)**

1. Wash your hands!
2. Strictly avoid all dairy: review our March 2008 and April 2008 newsletters on Dairy.
3. Stay hydrated: drink 1 qt of water per 50lbs of body weight not to go over 3 qts per day.
4. Get adequate protein: 1 out of 4 bites should be good protein sources like seeds, nuts, sprouts, quinoa, chicken, eggs, fish, etc.
5. Exercise at least 30 minutes, 3 days per week.
6. Supplementation (spread dosages throughout the day & take with meals)
  - a. Take a high potency multiple. Review our May 2008 newsletter on Choosing a Multiple Vitamin.
  - b. Lauricidin: one scoop each day.
  - c. Vitamin C: 3000mg each day.
  - d. Vitamin D<sub>3</sub>: 5000IU (cholecalciferol) each day.
  - e. Zinc lozenge: one 15mg lozenge per day. Watch out for hidden artificial colors and sweeteners.



**Prevention for kids (40-100lbs)**

1. 1-5 are the same
2. Supplementation (spread dosages throughout the day & take with meals)
  - a. Take a high potency multiple for kids.
  - b. Lauricidin: ½ scoop each day.
  - c. Vitamin C: 500-1000mg each day. Try Emergen-C for kids.
  - d. Vitamin D<sub>3</sub>: 1000IU (cholecalciferol) each day.
  - e. Zinc lozenge: ½ of a 15mg lozenge per day. Watch out for hidden artificial colors and sweeteners.

**Cold and Flu Relief (Adults 150lbs)**

1. Strictly avoid all dairy.
2. Stay hydrated: drink 1 qt of water per 50lbs of body weight not to go over 3 qts per day.
3. Supplementation (spread dosages throughout the day & take with meals)
  - a. Take a high potency multiple.
  - b. Lauricidin: 3 scoops per day.
  - c. Vitamin C: 4000mg per day. Try Emergen-C it helps you stay hydrated, and is effervescent-settling to the stomach.
  - d. Vitamin D<sub>3</sub>: 5000IU (cholecalciferol) each day.
  - e. Echinacea: 150mg, 6 times per day.
  - f. Zinc Lozenges: Take 4-6, 15mg zinc lozenges for a few days. Watch out for hidden artificial colors and sweeteners.

**Relief for kids (40-100lbs)**

1. #1 and #2 are the same.
2. Supplementation (spread dosages throughout the day & take with meals)
  - a. Take a high potency multiple vitamin.
  - b. Lauricidin: take 1-2 scoops per day.

Federal Law requires that we warn you of the following:  
 1. Your individual health status and any required health care treatments can only be properly addressed by a professional healthcare provider of your choice. Remember: There is no adequate substitution for a personal consultation with your chosen health care provider. Therefore, we encourage you to make your own health care decisions based upon your research and in partnership with a qualified health care professional.  
 2. The Constitution guarantees you the right to be your own physician and to prescribe for your own health.