



> Key Differences Between Seasonal Flu & Pandemic Flu

SEASONAL FLU	PANDEMIC FLU
Occurs every year during the winter months.	Occurs three to four times a century and can take place in any season and often comes in waves. On June 11, 2009, the World Health Organization (WHO) raised the worldwide pandemic alert level to Phase 6 in response to the ongoing global spread of the influenza H1N1 virus. A Phase 6 designation signifies that a global pandemic is under way.
Affects 5% to 20% of the U.S. population.	In places where the H1N1 flu circulated this past spring, the infection rate was 6% to 8%. During the winter, the attack rates could be two to three times as high because members of the workforce are sick or they are staying home to care for a sick person.
Globally, kills 500,000 to 1 million people each year, including 36,000 to 40,000 in the United States.	The worst pandemic of the last century—the Spanish Flu of 1918—killed 500,000 in the United States and 50 million worldwide.
Most people recover within a week or two.	H1N1 may be associated with a higher severity of illness and, consequently, a higher risk of death. At present, it is a relatively mild virus, but this can change quickly if the virus mutates into a more severe strain.
Deaths generally confined to at-risk groups, such as the elderly (65 years and older); the young (children ages 6 to 23 months); those with existing medical conditions like lung diseases, diabetes, cancer, kidney, or heart problems; and people with compromised immune systems.	No natural immunity exists against the new flu virus, so all age groups may be at risk for infection, not just at-risk groups. Otherwise fit adults could be at relatively greater risk based on patterns of previous epidemics. So far, the H1N1 flu appears to be infecting healthy young adults disproportionately, while sparing the elderly to a large extent.
Vaccination is effective because the virus strain in circulation each winter can be reliably predicted.	Sufficient vaccine against pandemic flu will not be immediately available if a new outbreak begins early this coming fall. New strains of viruses must be accurately identified, and producing an effective vaccine could take approximately six months.
Antiviral drugs are available for those most at risk of becoming seriously ill.	Antiviral drugs may be in short supply. Thus far, they are generally effective against the new H1N1 flu strain.



Source: "It's Not Flu as Usual";
U.S. Chamber of Commerce 2009.