

TO: ALL MEDIA
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EMBARGO: NONE

PREGNANT WOMEN AND PEOPLE WITH UNDERLYING CONDITIONS MUST SEEK URGENT MEDICAL ATTENTION

KwaZulu-Natal has a second confirmed death, in pregnancy, from H1N1 influenza and the number of confirmed cases reaches more than 607 cases.

The patient was 29/40 weeks pregnant and was ill since the 2nd of August 2009. She had been in contact with the boys that had visited Botswana and back on 01/08/2009 for school choir competition. There was also a visiting choir from Gauteng that came and one of the boys stayed over with her and now apparently ill as well. Patient was seen by her General Practitioner on the 5th August 2009 and put on treatment; however she became ill and was admitted at St. Anne's on the 7th August 2009 in the Maternity unit. The patient was seen by Physician and transferred to ICU- isolation as a suspect H1N1. She was later confirmed as having H1N1 influenza. She passed away on the 22 August 2009 after the baby was removed through a caesarian section and in a ventilator. The department is following up on the family to check if any contracted the disease.

There are 182 166 confirmed cases in the world and 1799 deaths from this diseases and in Africa, there are 1469 cases and three deaths. In South Africa the number of confirmed cases is 5118 with 15 deaths.

The World Health Organization (WHO) advises that pregnant women, people with underlying conditions or diseases and those providing home-based care need to be alert to danger signs that can signal progression to more severe disease. As progression can be very rapid, medical attention should be sought when any of the following danger signs appear in a person with confirmed or suspected H1N1 infection:

- shortness of breath, either during physical activity or while resting
- difficulty in breathing
- turning blue
- bloody or coloured sputum
- chest pain
- altered mental status
- high fever that persists beyond 3 days
- low blood pressure.

In children, danger signs include fast or difficult breathing, lack of alertness, difficulty in waking up, and little or no desire to play.

The KwaZulu-Natal Department of Health will continue to lead government's public education programme underpinned by the urgent need to reduce the impact of the outbreak. We have already identified populations at increased risk of the disease, and our greater effort would be inform and educate them about the disease. We would also advise all our health facilities and private medical practitioners to treat all acute respiratory illnesses in order to reduce deaths as a result thereof.

The government's communication plan is geared towards prevention measures; i.e. promoting home-care of mild cases, encourage reduction of time in crowded places, especially by high risk groups; and coughing etiquette, healthy living and hand hygiene in order to reduce the spread of the disease.

"Under the unique conditions of our highly mobile and closely interdependent communities, the threat of an outbreak deserves attention from all sectors lead by government, and many partners. We are all under pressure to make urgent and far-reaching decisions in an atmosphere of considerable scientific uncertainty. For an outbreak of moderate severity, this is one of our greatest challenges: helping people to understand when they do not need to worry, and when they do need to seek urgent care. This is one key way to help save lives.

Between the extremes of panic and complacency lies the solid ground of vigilance. We have the advantages of science, and of rational and rigorous investigation, on our side, supported today by tools for data collection, analysis, and communication that are unprecedented in their power. We have another advantage on our side: collaboration and solidarity” believes Dr Sibongiseni Dhlomo, MEC for Health; KwaZulu-Natal

ENDS

ISSUED BY:
KWAZULU-NATAL: DEPARTMENT OF HEALTH