

## IMMUNIZATION FACTSHEET



### Important Facts About Influenza & Flu Vaccinations

Adapted from the National Foundation for Infectious Diseases and the Centers for Disease Control

#### ***What is influenza?***

Influenza (flu) is a contagious viral infection of the nose, throat and lungs that usually occurs in the winter months and can cause severe illness. In the Northern Hemisphere, influenza activity generally occurs December through March, but can occur as early as October and as late as May, although usually in limited areas. Influenza is most commonly spread from person to person, primarily when an infected person coughs or sneezes. Influenza may lead to hospitalization or death, especially among the elderly. On average, between 5 percent and 20 percent of Americans contract influenza each year. More than 200,000 are hospitalized and 36,000 die from influenza-related complications annually.

#### ***How is Influenza best prevented?***

Getting a flu vaccine is the best way to prevent influenza. Two different types of influenza vaccines are available. Guidelines for use of both vaccines are posted by the Centers for Disease Control and Prevention at [www.cdc.gov/vaccines/pubs/ACIP-list.htm](http://www.cdc.gov/vaccines/pubs/ACIP-list.htm).

#### **Injectable inactivated influenza vaccine (TIV)**

The injected vaccine can be given to persons 6 months or older, usually as a shot in the upper arm or thigh. There may be mild soreness, redness or swelling at the injection site for 1-2 days after the injection. Other possible side effects include mild headache and low-grade fever the following day.

#### **Live attenuated influenza vaccine (LAIV) administered as a nasal spray**

Intranasal vaccine can be given to healthy persons 2 to 49 years of age. There may be a runny nose, headache, low-grade fever, sore throat, fatigue or cough after vaccination.

#### ***Who should be vaccinated?***

Anyone can contract influenza, but certain groups have elevated risk for the disease or its complications. Anyone who falls into one of the following groups, or is a close contact of someone from any of the groups, should be vaccinated for influenza each year:

- Persons 50 years of age or older;
- Women who will be pregnant during the flu season;
- Those with chronic pulmonary (including asthma), cardiovascular (except hypertension), renal, hepatic, hematological or metabolic disorders (including diabetes);
- Persons who have immunosuppression, including that caused by medications or HIV;

- Persons who have any condition (e.g., cognitive dysfunction, spinal cord injuries, seizure disorders or other neuromuscular disorders) that can compromise respiratory function, the handling of respiratory secretions or that can increase the risk for aspiration;
- Residents of nursing homes and other chronic-care facilities;
- Health-care personnel;
- Household contacts and caregivers of children younger than 5 and adults 50 or older, with particular emphasis on vaccinating contacts of children younger than 6 months of age; and,
- Household contacts and caregivers of persons with medical conditions that put them at high risk for severe complications from influenza.

**Summary of vaccination recommendations for children and adolescents aged 6 months – 18 years:**

Children and adolescents at high risk for influenza complications should continue to be a focus of vaccination efforts as providers and programs transition to routinely vaccinating all children and adolescents. Children and adolescents at higher risk for influenza complications are those:

- Aged 6 months up to their 5th birthday;
- Who have chronic pulmonary (including asthma), cardiovascular (except hypertension), renal, hepatic, hematological or metabolic disorders (including diabetes mellitus);
- Who are immunosuppressed (including that caused by medications or HIV);
- Who have any condition (e.g., cognitive dysfunction, spinal cord injuries, seizure disorders, or other neuromuscular disorders) that can compromise respiratory function or the handling of respiratory secretions or that can increase the risk for aspiration;
- Who are receiving long-term aspirin therapy and might therefore be at risk for experiencing Reye syndrome after influenza virus infection;
- Who are residents of chronic-care facilities; or
- Who will be pregnant during the flu season.

Children and adolescents who are household contacts of any of the high-risk groups above are also recommended for annual vaccination

***When and how often should the vaccine be given?***

Immunizations should be given as soon as vaccine is available and throughout the flu season. Because the vaccine is updated every year to keep up with changes in circulating viruses and because immunity to flu viruses declines within a year after vaccination, **it is important to be vaccinated every year.**

***Who should not be vaccinated?***

With the noted exception of infants under six months of age (see below), virtually anyone who is at risk of contracting influenza or transmitting it to others may safely receive the injected flu vaccine.

**The intranasal vaccine should not be given to:**

- Any child under the age of 2;
- Anyone with a chronic medical condition;
- Pregnant women or teens; or
- Anyone who lives or works in close contact with those with severe immunosuppression.

**Note: Children younger than 6 months of age are the pediatric group at highest risk of influenza complications, yet they are too young to receive the influenza vaccine.** The best way to protect these children is to vaccinate their close contacts, including siblings and out-of-home care givers.