# 2004–05 Influenza Vaccination Pocket Information Guide — Revised

## Interim Indications (October 5, 2004)

Priority groups for vaccination with inactivated influenza vaccine include the following:

- Adults ages 65 years or older
- Children ages 6 through 23 months
- Persons ages 2 through 64 years with any of the following conditions:
  - a chronic disorder of the pulmonary or cardiovascular system, including asthma
  - diabetes or a chronic disease of the blood, kidneys, or immune system (including HIV), that has required medical follow-up or hospitalization in the preceding year
- Women who will be pregnant during the influenza season
- Children and teens receiving long-term aspirin therapy
- Residents of nursing homes or other chronic-care facilities
- Health care workers with direct patient care
- Household contacts and out-of-home caretakers of infants ages 0 through 5 months

## **Contraindications and Precautions**

- Do not give influenza vaccine to a person who has had a serious reaction (e.g., anaphylaxis) to eggs, to a previous dose of influenza vaccine, or to one of its components. Minor illnesses with or without fever do not contraindicate use of influenza vaccine.
- You can give live attenuated influenza vaccine (LAIV) to healthy, non-pregnant persons 5–49 yrs of age. Trivalent inactivated influenza vaccine (TIV) is preferred for persons who have close contact with severely immunosuppressed persons during periods when the immunocompromised person requires a protective environment.

Supported by unrestricted educational grants from Aventis Pasteur, MedImmune, Inc., and Chiron Vaccines

#### **Vaccine Dosing and Administration**

- TIV may be given to persons ≥6 mos of age. If age 6–35 mos, give 0.25 mL; if age ≥3 yrs, give 0.5 mL. Give IM with a 22–25g, ≥1" needle. (Fluzone<sup>®</sup> is approved for use in persons age ≥6 mos. Fluvirin<sup>TM</sup> is approved for ≥4 yrs only.)
- Healthy non-pregnant persons 5–49 yrs of age may receive LAIV 0.5 mL (0.25 mL sprayed into each nostril).
- Children younger than 9 yrs of age who are receiving influenza vaccine for the first time should <u>normally</u> receive 2 doses; <u>however</u>, for this season, do not hold vaccine in reserve for these 2<sup>nd</sup> doses. If vaccine is available, for TIV, separate by ≥4 wks. For LAIV given to children 5–8 yrs of age, separate by ≥6 wks.

#### **Side Effects**

- The most common side effects from TIV are soreness and redness at the injection site, lasting 1–2 days.
- The most common side effects from LAIV are runny nose and nasal congestion.

### **Talking Points with Patients**

- Influenza is a serious respiratory disease caused by a virus. It is not the same as the common cold or an intestinal illness.
- An average of 36,000 deaths and more than 226,000 hospitalizations related to influenza occur in the U.S. each year.
- Because of the vaccine shortage for the 2004–05 season, only those persons who are likely to experience complications from influenza should be vaccinated as well as close contacts of infants <6 months of age and health care workers who provide direct, face-to-face patient care. For people with risk factors, influenza can be a life-threatening disease.
- Remember to wash your hands often and cover your cough or sneeze. If you suspect you have influenza, stay home and take care of yourself. If your symptoms persist, are worsening, or you have other questions, call your health care provider.
- The best time to get influenza vaccine is during October or November. However, you can still benefit from the protection if you get vaccinated in December or later.

# Health care workers—Get vaccinated and urge your <u>priority</u> patients to do so.

Created by the Immunization Action Coalition (www.immunize.org) in collaboration with the National Influenza Summit October 2004