

New Jersey Department of Health and Senior Services

2011-2012 Influenza Season

What is your Flu IQ?

It's that time of the year again—Flu Season. Listed below are some commonly asked questions regarding this upcoming flu season. So get ready to test your Flu IQ!

Q: What will be included in the 2011-2012 flu vaccine?

A: The seasonal flu vaccine protects against three influenza viruses that research indicates will be most common during the upcoming season. The 2011-2012 influenza vaccine will protect against the following 3 viruses:

- an A/California/7/2009 (H1N1)-like virus;
- an A/Perth/16/2009 (H3N2)-like virus; and
- a B/Brisbane/60/2008-like virus.

These are the same viruses that were selected for the Northern Hemisphere for the 2010-2011 influenza vaccine.

Q: If the influenza vaccine composition is the same for the upcoming season as it was last season, do I need to get vaccinated again?

A: Yes. People should get vaccinated every year because even if the viruses in the vaccine are the same as the year before, immunity to influenza viruses declines over time and may be too low to provide protection after a year. Several studies conducted over different flu seasons and involving different influenza viruses and types of flu vaccine have shown that a person's protection against influenza viruses declines over the course of a year after vaccination. This fall, everyone 6 months and older should get vaccinated against the flu as soon as 2011-2012 influenza vaccines become available, even if they got vaccinated last season.

Q: What types of flu vaccines are available?

A: There are two types of flu vaccine available. The first is an inactivated vaccine given as a shot, which has been used for many years. It is also known as a trivalent influenza vaccine (TIV). The flu shot is approved for use in people older than 6 months, including healthy people and people with chronic medical conditions.

The second is a live, attenuated (weakened) vaccine, which is sprayed into the nose and was licensed in 2003. It is also known as a live, attenuated, influenza vaccine (LAIV). The brand

name for the LAIV is FluMist™. The LAIV is not for everyone. LAIV is approved for use in healthy people 2 through 49 years of age who are not pregnant.

Q: What is the intradermal flu shot?

A: Fluzone Intradermal® was licensed by the Food and Drug Administration (FDA) for use in the United States for the 2011-2012 flu season. The intradermal flu vaccine is a shot that is injected into the skin instead of the muscle. The intradermal shot uses a much smaller needle than the regular flu shot, and it requires less antigen to be as effective as the regular flu shot. The intradermal vaccine has been approved by the FDA for use in adults 18 through 64 years of age.

For more information, please visit:

http://www.cdc.gov/flu/protect/vaccine/qa_intradermal-vaccine.htm

Q: What is the high dose flu vaccine?

A: Fluzone High-Dose is an influenza vaccine designed specifically for people 65 years and older. Fluzone High-Dose vaccines contain 4 times the amount of antigen contained in regular flu shots. A higher dose of antigen in the vaccine is supposed to give older people a better immune response and therefore better protection against flu although studies are still underway. The CDC has not expressed a preference for this product or another TIV product for people over the age of 65.

For more information, please visit:

http://www.cdc.gov/flu/protect/vaccine/qa_fluzone.htm

Q: How effective is the flu vaccine?

A: The flu vaccine is the best protection against the flu. The ability of the flu vaccine to protect a person depends on at least two things: the age and health of the person getting the vaccine and, the similarity or “match” between the virus strains in the vaccine and those being spread in the community. Vaccine effectiveness is not 100%, and some people can still get the flu. For instance, some older people and people with certain chronic illnesses might develop less immunity than healthy young adults after vaccination. However, even for these high-risk individuals, the flu vaccine still can provide protection against getting severe complications from the flu. We can protect our communities including individuals too young to be vaccinated and those who have cannot mount an immune response by vaccinating everyone over the age of 6 months.

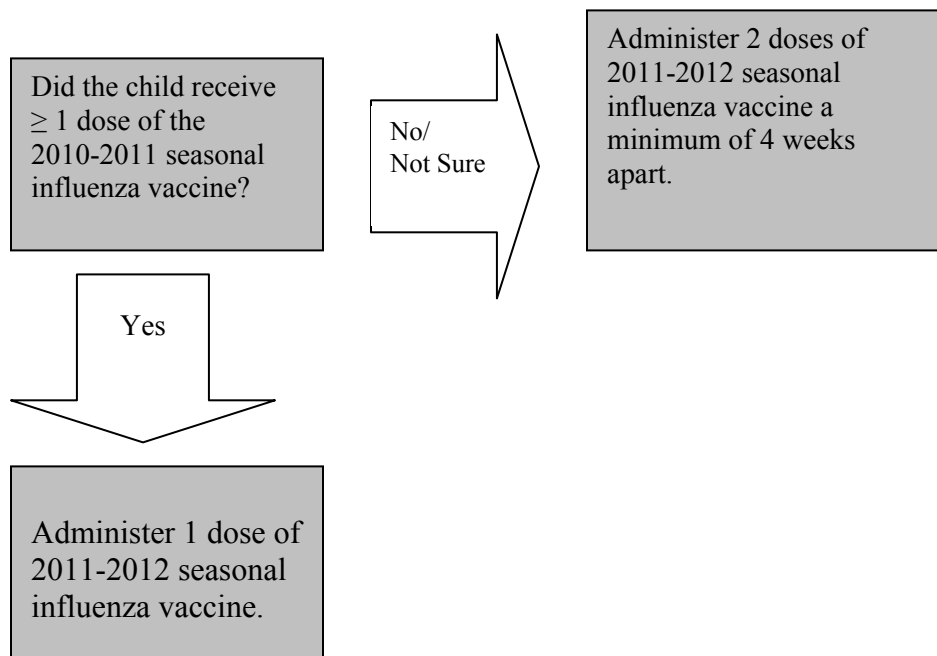
Q: Who should get the flu vaccine?

A: The CDC/Advisory Committee on Immunization Practices (ACIP) currently recommends everyone 6 months and older to receive a flu vaccine each year. The purpose of “Universal” flu vaccination in the U.S. is to expand protection against the flu to more people.

Q: How do you determine the number of doses of 2011-2012 flu vaccine needed for children 6 months through 8 years?

A: All children ages 6 months through 8 years who receive a seasonal influenza vaccine for the first time should be given 2 doses administered a minimum of 4 weeks apart to optimize immune response. Since the 2011-2012 vaccine strains are unchanged from the 2010-2011 season, children in this age group who received at least 1 dose of the 2010-2011 seasonal vaccine will require only 1 dose of the 2011-2012 seasonal vaccine. Children in this age group who did not receive at least one dose of the 2010-2011 vaccine, or whom it is not certain whether the 2010-2011 vaccine was received, should receive 2 doses of the 2011-2012 seasonal vaccine. The following diagram will assist you in determining the number of doses required in this age group.

2011-2012 Influenza Vaccine Dosing Algorithm for Children 6 Months through 8 Years of Age



Q: How long after I receive a flu vaccine will I become immune to the flu virus?

A: Once you get vaccinated, your body makes protective antibodies in about two weeks.

Q: Does getting a flu vaccine early in the season mean that I will not be protected later in the season?

A: No. Flu vaccination provides protection against the influenza strains contained in the seasonal vaccine for the entire season. Vaccination can begin as soon as vaccine becomes available.

Q: Can individuals with egg allergies now receive the flu vaccine?

A: A severe allergic reaction (e.g., anaphylaxis or a reaction involving angioedema (similar to hives but swelling is under the skin), respiratory distress, lightheadedness, or recurrent vomiting; or which required emergency medical care or epinephrine), no matter what component may have caused the reaction, is a contraindication to future receipt of the vaccine. However, several recent studies have documented safe receipt of TIV (flu shot) in people with egg allergy, particularly those with a history of less severe reactions to egg. Egg allergic people who experience mild reactions to egg—specifically, those who have only experienced hives—can and should receive the influenza vaccine with some additional safety measures: vaccine should be given by a health care provider who is familiar with the subject of egg allergy; TIV should be used rather than LAIV because studies published to date involved TIV; and the recipient should be observed for at least 30 minutes (after the last dose, if vaccine is divided) by their health care provider to monitor for possible reactions. Please refer to the CDC for further guidance.

For more information, please visit:

CDC Seasonal Flu webpage:

<http://www.cdc.gov/flu/>

Vaccine Information Statements:

Inactivated Influenza Vaccine

<http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-flu.pdf>

Live, Intranasal Influenza Vaccine

<http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-flulive.pdf>