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and preventing disease.*

Immunization Program Update

Please distribute to each physician, NP, PA and Vaccine Coordinator in your office

Subject: Seasonal Influenza Vaccination Recommendations 2011-12

To: Family Practice, Internists, OB/GYN, Pediatrics, ER/Urgent Care, Infectious Disease, Occupational Health, Allergists, Parish Nurses, Pharmacists, Nursing Home/Assisted Living Facilities and other interested healthcare providers.
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ACIP Seasonal Influenza Vaccination Recommendations for 2010-11

Recommendations for vaccination:

Routine influenza vaccination continues to be recommended for all persons aged ≥ 6 months. It is supported by evidence that annual influenza vaccination is a safe and effective preventative health action and benefit. Vaccination should optimally occur before the onset of influenza activity in the community and providers should offer vaccination as soon as vaccine is available, and should continue to be offered throughout the influenza season.

Vaccine administration guidelines:

- Live attenuated influenza vaccine (LAIV) is licensed for use in healthy, non-pregnant persons aged 2–49 years, and should not be administered to children, < 5 years of age with asthma or who have experienced a wheezing episode within the past 12 months.
- Children who have asthma or experienced a wheezing episode within the past 12 months, children aged 6–23 months, and persons aged ≥ 50 years should receive trivalent inactivated influenza vaccine (TIV).
- All children aged 6 months up to the 9th birthday who receive a seasonal influenza vaccine for the first time should receive 2 doses separated by four weeks.
- Children aged 6 months up to the 9th birthday who received only 1 dose of the 2010-11 seasonal influenza vaccine will require only 1 dose of the 2011-12 vaccine.
- Children aged 6 months up to the 9th birthday who did not receive at least 1 dose of the 2010-11 seasonal influenza vaccine, or for whom it is not certain whether the 2011-11 vaccine was received, should receive 2 doses of the 2011-12 vaccine.

2011 vaccine virus strains:

Trivalent vaccine strains are A/California/7/2009 (H1N1)-like, A/Perth/16/2009 (H3N2)-like, and B/Brisbane/60/2008-like antigens. The influenza A (H1N1) vaccine virus is derived from a 2009 pandemic influenza A (H1N1) virus. Although the vaccine strains for the 2011-12 season are unchanged from the 2010-11, several studies have demonstrated that post-vaccination antibody titers decline over the course of a year. Thus, annual vaccination is recommended for optimal protection.

Vaccination of Persons Reporting Allergies to Eggs:

All currently available influenza vaccines are prepared by inoculation of virus into chicken eggs.

Hypersensitivity to eggs has been listed as a contraindication to receipt of influenza vaccine on most package inserts. However several recent studies have documented safe receipt of TIV in persons with egg allergy and recent revisions of some TIV package inserts note that only a severe allergic reaction to egg protein is a contraindication.

Recommendations Regarding Persons with Egg Allergy:

- Persons who have experienced only hives following exposure to egg should receive influenza vaccine with the following additional measures:
 - Because studies published to date involved the use of TIV, TIV rather than LAIV should be used. Vaccine should be administered by a health-care provider who is familiar with the potential manifestations of egg allergy.
 - Vaccine recipients should be observed for at least 30 minutes for signs of a reaction following administration of each vaccine dose.
- Persons who report having had reactions to egg involving angioedema, respiratory distress, lightheadedness, or recurrent emesis, or persons who required epinephrine or other emergency medical intervention are more likely to have a serious systemic or anaphylactic reaction upon re-exposure to egg proteins. Such persons should be referred to a physician with expertise in the management of allergic conditions for further risk assessment.
- All vaccines should be administered in settings in which personnel and equipment for rapid recognition and treatment of anaphylaxis are available.
- Some persons who report allergy to egg might not be egg allergic. Those who are able to eat lightly cooked egg (e.g. scrambled eggs) without reaction are unlikely to be allergic. However tolerance to egg-containing goods does not exclude the possibility of egg allergy.
- A previous severe allergic reaction to influenza vaccine, regardless of the component suspected to be responsible for the reaction, is a contraindication to receipt of influenza vaccine.

Click [here](#) for an algorithm showing recommendations for persons who report an allergy to eggs.

New vaccines and expanded age indications:

- Fluzone Intradermal is TIV approved for persons aged 18-64 years. It contains less antigen in a smaller volume and is an alternative to other TIV preparations.

Thimerosal Law Reminder:

- Washington state law limits the amount of mercury that can be in vaccines for pregnant women and children under three unless the Secretary of Health determines there is a vaccine shortage and temporarily suspends the restrictions.

Mercury limits law temporarily suspended:

- Secretary of Health Mary Selecky extended the temporary suspension of Washington's limit on the amount of mercury (thimerosal) in influenza multidose vials allowed for pregnant women and children less than 3 years old for the 2011-12 season after determining there would be a shortage of latex-free thimerosal-free influenza vaccine, in order to assure that those at risk of an allergic reaction to latex can be vaccinated.
- The tip cap and rubber stoppers of some formulations of the 2011-2012 single dose, pre-filled syringes of thimerosal-free flu vaccine contain trace amounts of natural rubber latex.

Notification requirements

- When the mercury limits are suspended the law requires that certain groups be told they are getting a vaccine containing more mercury than is usually permitted. This notification requirement applies to pregnant or lactating women and parents or guardians of children under the age of 18 getting influenza vaccine. There is no single notification method required; the Department of Health has developed a sample notification form to help with this. This and other related documents are available online (<http://www.doh.wa.gov/cfh/immunize/providers/flu-thimerosal.htm>).

Resources:

The Whatcom County Community Flu Clinic Schedule is updated regularly through the flu season.

www.co.whatcom.wa.us/health

Advisory Committee on Immunization Practices (ACIP) recommendations

http://www.cdc.gov/mmwr/preview/mmwrhtml/mm60e0818a1.htm?s_cid=mm60e0818a1_w

Vaccine Information Statements

<http://www.cdc.gov/vaccines/pubs/vis>

Centers for Disease Control & Prevention flu page

www.cdc.gov/flu

Centers for Disease Control & Prevention free flu resources

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