

# INFLUENZA

## WHO SHOULD RECEIVE THE VACCINE?<sup>1</sup>

### Healthy people 6 months of age and older

#### People at high risk of influenza-related complications or hospitalization

- Adults (including pregnant women) and children with the following chronic health conditions:
  - cardiac or pulmonary disorders (including bronchopulmonary dysplasia, cystic fibrosis and asthma)
  - diabetes mellitus and other metabolic diseases
  - cancer, immune-compromising conditions (due to underlying disease and/or therapy)
  - renal disease
  - anemia or hemoglobinopathy
  - conditions that compromise the management of respiratory secretions and are associated with an increased risk of aspiration
  - morbid obesity (BMI  $\geq 40$ ); and
  - children and adolescents with conditions treated for long periods with acetylsalicylic acid
- People of any age who are residents of nursing homes and other chronic care facilities
- People  $\geq 65$  years of age
- All children 6 to 59 months of age
- Healthy pregnant women
- Aboriginal Peoples

#### People capable of transmitting influenza to those at high risk

- Health care and other care providers in facilities and community settings who, through their activities, are capable of transmitting influenza to those at high risk of influenza complications
- Household contacts (adults and children) of individuals at high risk of influenza-related complications (whether or not the individual at high risk has been immunized):
  - household contacts of individuals at high risk, as listed in the section above
  - household contacts of infants  $< 6$  months of age, as these infants are at high risk of complications from influenza but cannot receive influenza vaccine; and
  - members of a household expecting a newborn during the influenza season
- Those providing regular child care to children  $\leq 59$  months of age, whether in or out of the home
- Those who provide services within closed or relatively closed settings to persons at high risk (e.g. crew on a ship)

#### Others

- People who provide essential community services
- People in direct contact during culling operations with poultry infected with avian influenza

## WHO SHOULD NOT RECEIVE THE VACCINE?<sup>1</sup>

- Egg allergy is no longer considered a contraindication for trivalent influenza vaccine. Data are not currently available to support this recommendation for LAIV. Persons who developed an anaphylactic response to a previous dose of influenza vaccine or to any of the vaccine components (with the exception of eggs), or who developed Guillain-Barré within six weeks after a previous influenza immunization, should not receive a further dose.

#### LAIV SHOULD NOT BE ADMINISTERED TO:

- Children  $< 24$  months of age.
- Individuals with severe asthma (as defined as currently on oral or high-dose inhaled glucocorticosteroids or active wheezing) or those with medically attended wheezing in the 7 days prior to vaccination.
- Children and adolescents (2-17 years of age) currently receiving acetylsalicylic acid or acetylsalicylic acid-containing therapy and wild-type influenza infection. It is recommended that acetylsalicylic acid-containing products in children  $< 18$  years of age be delayed for four weeks after receipt of FluMist® (LAIV).
- Pregnant women, because it is a live attenuated vaccine and there is a lack of safety data at this time. However, it is not contraindicated in nursing mothers.
- Persons with immune-compromising conditions, due to underlying disease, therapy or both, as the vaccine contains live attenuated virus.

<sup>1</sup>National Advisory Committee on Immunization (NACI). Statement on Seasonal Influenza Vaccine for 2014–2015. Available: [http://publications.gc.ca/collections/collection\\_2014/aspc-phac/HP40-114-2014-eng.pdf](http://publications.gc.ca/collections/collection_2014/aspc-phac/HP40-114-2014-eng.pdf)

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## RECOMMENDED DOSAGE<sup>1</sup>

Age group	TIV without adjuvant* (IM)	MF59 - adjuvanted TIV (Fluad®) (IM)	TIV for intradermal use (Intanza®) (ID)	LAIV (FluMist®)** (IN)	# of doses
6–23 months	0.5 mL	–	–		1 or 2***
2–8 years	0.5 mL	–	–	0.2 mL (0.1 mL per nostril)	1 or 2***
9–17 years	0.5 mL	–	–	0.2 mL (0.1 mL per nostril)	1
18–59 years	0.5 mL	–	0.1 mL (9 µg/strain)****	0.2 mL (0.1 mL per nostril)	1
60–64 years	0.5 mL	–	0.1 mL (15 µg/strain)	–	1
≥65 years	0.5 mL	0.5 mL	0.1 mL (15 µg/strain)	–	1

**TIV** = Trivalent inactivated vaccine    **LAIV** = Live attenuated influenza vaccine  
**IM** = Intramuscular    **ID** = Intradermal    **IN** = Intranasal

\* Influvac® ≥ 18 years, Fluviral® ≥ 6 months, Agriflu® ≥ 6 months, Vaxigrip® ≥ 6 months, and FluZone® ≥ 6 months.

\*\* NACI recommends the use of LAIV for healthy children and adolescents 2 to 17 years of age without contraindications. If LAIV is not available, TIV should be used, as it is safe and effective.

\*\*\* Children 6 months to less than 9 years of age who have never received the seasonal influenza vaccine require two doses of influenza vaccine, with a minimum interval of four weeks between doses. Eligible children < 9 years of age who have properly received one or more doses of seasonal influenza vaccine in the past should receive one dose per influenza vaccination season thereafter.

\*\*\*\* For adults with immune-compromising conditions, the 15 µg formulation should be considered to improve response.

## QUADRIVALENT INFLUENZA VACCINE<sup>1</sup>

Given the burden of disease, the immunogenicity and the safety data available for quadrivalent vaccines, NACI recommends that, when available, live and inactivated quadrivalent influenza vaccines can be used as per their product monograph.

## COUNSELLING POINTS<sup>1</sup>

- Vaccination is the safest, longest-lasting and most effective way to prevent influenza.
- Each year there is a new vaccine to protect against the expected influenza virus strains of the coming influenza season. Even if the strains have not changed, getting the influenza vaccine every year is necessary to maximize protection, as its duration may not span two influenza seasons.
- Influenza vaccine is safe and well tolerated.

<sup>1</sup> National Advisory Committee on Immunization (NACI). Statement on Seasonal Influenza Vaccine for 2014–2015. Available: [http://publications.gc.ca/collections/collection\\_2014/aspc-phac/HP40-114-2014-eng.pdf](http://publications.gc.ca/collections/collection_2014/aspc-phac/HP40-114-2014-eng.pdf)