

POCKET GUIDE

THE FLU | INFLUENZA

WHO SHOULD RECEIVE THE VACCINE?¹

People at high risk of influenza-related complications, including:

- Adults and children with chronic conditions such as:
 - Cardiac or pulmonary disorders including asthma
 - Diabetes mellitus and other metabolic diseases
 - Cancer, immunodeficiency, immunosuppression (due to underlying disease and/or therapy)
 - Renal disease
 - Anemia or hemoglobinopathy
 - Conditions that compromise the management of respiratory secretions
- Children and adolescents with conditions treated for long periods with acetylsalicylic acid
- All residents of nursing homes or other chronic care facilities
- Seniors aged 65 years or older
- Pregnant women
- Children aged 6 months to 59 months of age
- Persons who are morbidly obese (BMI ≥ 40)
- Aboriginal peoples

People capable of transmitting influenza to those at high risk of complications, including:

- Health care and other care providers
- Household contacts of those at high risk and to infants < 6 months
- Members of a household expecting a newborn during influenza season
- Women at all stages of pregnancy or breastfeeding mothers
- Those providing regular child care to children 0–59 months
- Those who provide services within closed settings to persons at high risk

Others:

- People who provide essential community services
- People in direct contact with avian influenza infected poultry during culling
- Healthy people aged 5–64 years should be encouraged to receive the vaccine even if they are not in the above groups

WHO SHOULD NOT RECEIVE THE VACCINE?¹

- People who have had an anaphylactic reaction to a previous dose or to any of the vaccine ingredients, with the exception of egg components.
- People who developed Guillian Barré Syndrome within six weeks after a previous influenza immunization



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WHO SHOULD RECEIVE THE VACCINE?¹

Age Group	TIV without adjuvant	MF59 - adjuvanted TIV (Fluad®)	TIV for intradermal use (Intanza®)	LAIV (FluMist®)	# 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	0.5 mL	0.1 mL (15 µg/strain)	–	1
≥65 years	0.5 mL		0.1 mL (15 µg/strain)	–	1

*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 season thereafter.

COUNSELLING POINTS¹

- Soreness or redness at the injection site lasting 1–2 days is common but rarely interferes with daily living
- Prophylactic acetaminophen may minimize pain at injection site
- While severe reactions are uncommon (e.g., allergic reaction), if they occur, contact your health care provider
- The flu shot cannot cause the flu since the vaccine does not contain live virus
- The flu typically lasts for 7–10 days, but the cough and weakness may continue for up to 6 weeks
- The flu shot provides protection up to 12 months; immunization is required each year
- This year's flu shot protects against the H1N1 flu virus as well as two other strains of flu
- You still need to get immunized this year as the vaccination does not protect for life
- October to mid-November is the best time for immunization, but the vaccine may still be given in the winter months
- Other measures to prevent the spread of influenza:
 - Cover your mouth and nose with tissues or clothing when sneezing or coughing
 - Wash hands often with soap and water or alcohol-based hand rub
 - Stay home when you have a fever

¹ National Advisory Committee on Immunization (NACI). Statement on Seasonal Trivalent Inactivated Influenza Vaccine (TIV) for 2012–2013. Available: <http://www.phac-aspc.gc.ca/naci-ccni/index-eng.php>



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