

Frequently asked questions about the seasonal influenza vaccine

How do vaccines work?

When a person is given a vaccine, the immune system (the body's natural defence system) will produce its own protection (antibodies) against the disease. It takes about two weeks for the body to produce this protection.

The seasonal influenza vaccine is not a live vaccine and therefore none of the ingredients can cause influenza.

Is the seasonal influenza vaccine safe?

The technology to make influenza vaccines has been in use for 60 years and it has an excellent safety record.

How has the seasonal influenza vaccine been tested?

It has been trialled clinically.

The efficacy (i.e. prevention of illness among vaccinated people in controlled trials) and effectiveness (i.e. prevention of the illness in vaccinated populations) of influenza vaccines depends primarily on the age and immune status of the recipient.

The effectiveness of vaccinating against the influenza virus is well established. For healthy adults under 65 years of age, and when there is a good match between the vaccine and circulating strains, it is usually 80 percent effective in preventing infection.

For older people living in the community, the influenza vaccine is associated with a 26 percent reduction in risk of hospitalisation for influenza or pneumonia and 42 percent reduction in the risk of death.

Which strains of influenza does this year's seasonal influenza vaccine protect against?

The seasonal strains that comprise 2010 seasonal influenza vaccine are:

- A/California/7/2009(H1N1)-like virus (the pandemic influenza 2009 (swine flu) strain)
- A/Perth/16/2009(H3N2)-like virus
- B/Brisbane/60/2008-like virus.

Is it true that getting the influenza vaccination puts you at risk of getting influenza?

No. Influenza immunisation cannot cause influenza because the seasonal influenza vaccine contains no live viruses.

The vaccine contains fragments of disrupted (inactivated) virus. It stimulates the immune system to make antibodies that protect against circulating influenza viruses.

Many other viruses are also present throughout the year, so people may catch a different respiratory infection with 'flu-like' symptoms around the same time they are immunised and can mistakenly think it is the influenza vaccine.

The influenza vaccine is generally well tolerated. Some side-effects have been reported and usually disappear within one or two days without treatment.

What can I expect after getting the seasonal influenza vaccination?

After getting yourself immunised with the seasonal influenza vaccination, you may have a slight reaction at the site of the injection. Pain, redness and swelling which are generally mild occur in up to 65 percent of those vaccinated. Reactions rarely last for longer than 24 to 48 hours.

The most common reactions reported following influenza immunisation include fever, myalgia, arthralgia and headache, and occurs in fewer than 15 percent of people who are vaccinated, most often seen in the very young or those receiving influenza vaccines for the first time.

The last time I got vaccinated for seasonal influenza I came down with a cold/flu the next day. Was this caused by the vaccine?

No. The seasonal influenza vaccines have been made from influenza viruses that have been concentrated, inactivated and then broken apart. It cannot cause influenza as the vaccine does not contain any live viruses.

When vaccinated, the body responds to the vaccine by producing an immune response. This can include symptoms such as fever, tiredness and muscle aches.

Other respiratory viruses circulate during the winter months, influenza vaccines do not protect against these. Most of the viruses cause milder infections, such as the common cold, and do not pose the same threat to those at risk and should not be confused with influenza.

Certain other infections may sometimes produce influenza-like symptoms and quite severe illness, leading to the belief that the vaccine has been ineffective, which is not the case.

How long will it take for me to have immunity with the seasonal influenza vaccination?

Protective antibody levels develop within two weeks from being vaccinated, after which you will have the best protection against influenza.

I'm pregnant, is the vaccine safe for me and my baby?

International evidence on the safety of the seasonal influenza vaccine shows no evidence of harm to the fetus from immunisation of pregnant women using inactivated virus vaccines.

Both the United States Advisory Committee on Immunisation Practices (ACIP) and the Australian NHMRC recommend that pregnant women should be vaccinated before the influenza season, regardless of the stage of pregnancy. Speak to your doctor or midwife about getting vaccinated if have questions about it.

The vaccine is free in 2010 for all pregnant women.

What trimester is it safe to have an influenza vaccine in?

The seasonal influenza vaccine is normally given in the second and third trimesters but may be offered in 2010 to women who will be in the first trimester when influenza is circulating.

Pregnant women are advised to speak to their midwife or doctor about being immunised.

I want to have the monovalent Pandemic Influenza (swine flu) vaccine and then the seasonal influenza vaccination, is it safe to have both?

Yes, it is safe to have both vaccinations.

Can I have only one of the pandemic vaccinations and then the seasonal influenza vaccination?

The single strain pandemic influenza vaccine that is presently available is administered in two doses, three weeks apart. It is recommended you have both doses for the best protection.

There is no concern with then having the seasonal influenza vaccination following the vaccination for the pandemic influenza.

Having the seasonal influenza vaccine will offer the best protection from the other seasonal influenza strains.

If I have the monovalent Pandemic Influenza (swine flu) vaccine as part of the early protection programme and then the seasonal influenza vaccination, will I get local irritation at the site of the vaccinations?

You may experience pain, redness and swelling at the site of vaccinations, but this should go away within 24 to 48 hours.

Does taking Tamiflu and being vaccinated improve my chances of escaping influenza? Or is vaccination enough?

Tamiflu or Relenza are antiviral medicines that may be used to treat an influenza infection if given early in the illness. They can shorten the length and severity of your illness. Antiviral drugs do not prevent you getting influenza in the first place.

Vaccination is the best protection available from the prevalent strains of influenza that may be circulating in the community.

I have a young baby and/or I'm pregnant. Is it safe to have three flu injections this year (two-dose monovalent Pandemic Influenza plus the seasonal vaccine) instead of just getting one like other years?

International evidence on the safety of the influenza vaccine shows no evidence of harm to the fetus from immunisation of pregnant women using inactivated virus vaccines.

Both the United States Advisory Committee on Immunisation Practices (ACIP) and the Australian NHMRC recommend that pregnant women should be vaccinated before the influenza season, regardless of the stage of pregnancy.

The immunisation you receive from the pandemic influenza vaccine will not protect you from other seasonal influenza strains so it is recommended to be immunised against the seasonal influenza as well.

It is safe to have both vaccinations (two doses for pandemic influenza and the seasonal flu vaccine).

Because Celvapan® is a new vaccine there is no safety data specifically about use during pregnancy. However, previous influenza vaccines have been shown to be safe during pregnancy and Celvapan® has been used in pregnant women in other countries¹.

Pregnant women need to be informed of this information as part of the informed consent process.

I'm worried about getting the vaccination. Who should I talk to for more advice?

Speak to your doctor or practice nurse if you have concerns about getting vaccinated, or phone the immunisation advice line 0800 IMMUNE (466863).

What is informed consent?

The Ministry of Health recommends immunisation, however it is an individual's or their parent's/guardian's choice to accept immunisation.

Health professionals have legal obligations to obtain informed consent. The individual or guardian needs to understand the risks and benefits of vaccination, in order to give informed consent.

As part of the informed consent process the vaccinator should discuss with the individual or parent/guardian:

- what the risks are to them or their child if they contract pandemic influenza
- that the Celvapan® vaccine has been approved for use in New Zealand
- there is limited information available on the use of the Celvapan® vaccine in pregnant women, children under 9 years of age and co-administration with other vaccines
- it is the individual's or parents/guardians choice whether to be immunised against pandemic influenza or not
- it is also the individual's or parents/guardians choice whether to vaccinate with the Celvapan® vaccine or seasonal influenza vaccine
- that no identifiable information is being collected nationally about either the Celvapan® or seasonal influenza vaccines.

¹ Tamma PD, Ault KA, del Rio C, et al. Safety of influenza vaccination during pregnancy. *Am J Obstet Gyn.* 2009;201(6):547-552.2.