

Frequently Asked Questions

2018-19 Influenza Vaccination

Introduction

Public Health Ontario has received the following questions with regard to influenza vaccines during the 2018-19 season. The answers are provided below.

Question 1: Should the quadrivalent inactivated influenza vaccine be given to pregnant women?

Question 2: Should the quadrivalent inactivated influenza vaccine be given to breastfeeding women?

Question 3: If a person 65 years of age and over has received a standard-dose quadrivalent inactivated influenza vaccine this season (2018-19), should they also receive the high-dose trivalent influenza vaccine this season?

Questions and Answers

QUESTION 1

Should the quadrivalent inactivated influenza vaccine be given to pregnant women?

Yes, the quadrivalent inactivated influenza vaccine should be given to pregnant women at all stages of pregnancy (unless they have a contraindication to the influenza vaccine). The only contraindications to the influenza vaccine are:

- A serious allergic reaction (anaphylaxis) to a previous dose or to any ingredient in the vaccine, with the exception of egg; and
- Having previously developed Guillain-Barré Syndrome (GBS) within six weeks of a previous influenza vaccination

Influenza vaccination in pregnancy is a safe and effective method of protecting the pregnant woman, the pregnancy and the baby. Influenza vaccination for pregnant women has been recommended by Canada's National Advisory Committee on Influenza (NACI) for at least a decade and would therefore be considered the standard of care for pregnant women. A number of other expert advisory groups also recommend influenza vaccination of pregnant women.

Expert advisory groups with pregnancy recommendations include:

- Canada's National Advisory Committee on Influenza (NACI)
- The Society of Obstetricians and Gynaecologists of Canada (SOGC)
- United States' <u>Advisory Committee on Immunization Practices</u> (ACIP) and the <u>Centers for Disease Control and Prevention</u> (CDC)

- The World Health Organization's (WHO) <u>Strategic Advisory Group of Experts</u> (SAGE) and <u>Global</u> Advisory Committee on Vaccine Safety (GACVS)
- The <u>Australian Technical Advisory Group on Immunization</u> (ATAGI)
- The United Kingdom's <u>Joint Committee on Vaccination and Immunisation</u> (JCVI)

Key points from these documents are summarized below:

Recommendations:

- The inactivated influenza vaccine (either trivalent or quadrivalent) is recommended for pregnant women by many expert advisory groups.
- The live attenuated influenza vaccine is contraindicated in pregnancy.

Safety:

• A large body of evidence supports the safety of influenza vaccination in pregnancy.

Risk of influenza in pregnancy:

 Hospitalizations and serious complications from influenza occur more frequently among pregnant women compared to non-pregnant women.

Benefits of influenza vaccination in pregnancy:

- The influenza vaccine is equally effective among pregnant and non-pregnant women, generally reducing the risk of acquiring influenza by about half.
- The influenza vaccine in pregnancy helps to protect pregnant women from hospitalizations as a result of influenza infection.
- There is evidence that during influenza season, infants born to vaccinated mothers are less likely to be born prematurely or be small for gestational age or low birth weight.
- Maternal vaccination during pregnancy helps protect the baby from influenza in the first few months of life because the vaccinated pregnant woman passes antibodies to the baby during pregnancy.

QUESTION 2

Should the quadrivalent inactivated influenza vaccine be given to breastfeeding women?

Yes. Influenza vaccination of breastfeeding women is safe for both the mother (unless they have a contraindication to the vaccine – see above) and the baby. As with other adults, influenza vaccination of breastfeeding women reduces their risk of influenza by about half, which may also help prevent the baby from getting influenza.

QUESTION 3

If a person 65 years of age and over has received a standard-dose quadrivalent inactivated influenza vaccine this season (2018-19), should they also receive the high-dose trivalent influenza vaccine this season?

No. If a person 65 years of age and over has already received the quadrivalent inactivated influenza vaccine this influenza season, they should not be re-vaccinated with the high-dose trivalent vaccine in the same season. There is no evidence regarding the safety or effectiveness of adults receiving the two influenza vaccines in the same influenza season.

If an individual has not been previously vaccinated in the 2018-19 influenza season, the PHO information sheet entitled <u>Influenza Vaccines Available for Children and Older Adults for the 2018-19 Influenza Season</u> provides information to assist health care providers when considering the influenza vaccines available in Ontario.

Only children 6 months to less than 9 years of age need two doses of influenza vaccine in the same influenza season if they have never previously been vaccinated in their life. The two doses for these children should be administered at least one month apart.

References

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