

# 2017-2018 SEASONAL INFLUENZA VACCINE INFORMATION FOR IMMUNIZATION PROVIDERS

Office of the Chief Medical Officer of Health  
Communicable Disease Control Branch Immunization Program

## Table of Contents

1. What are my accountabilities as an immunization provider?.....	3
2. Who does the health system provide free 2017-2018 seasonal influenza vaccine for? .....	4
3. Who can provide publicly funded influenza vaccine?.....	5
4. What are the components of the 2017-2018 seasonal influenza vaccines? .....	6
5. What products are being used for the 2017-2018 seasonal influenza? .....	6
6. What are the side effects of the seasonal influenza vaccine?.....	6
7. Can the seasonal influenza vaccine cause influenza illness? .....	6
8. Who should NOT routinely be given seasonal influenza vaccine?.....	6
9. Should people who have experienced Ocular Respiratory Syndrome (ORS) following receipt of a previous seasonal influenza vaccine be immunized with the seasonal influenza vaccine? .....	7
10. Should people who are allergic to eggs receive the seasonal influenza vaccine?.....	7
11. Should pregnant women receive the seasonal influenza vaccine? .....	7
12. Is seasonal influenza vaccine safe for breastfeeding mothers? .....	7
13. How should the seasonal influenza vaccines be stored? .....	7
14. How long can a vial of influenza vaccine be used once it is opened? .....	8
15. Can I draw up the seasonal influenza vaccine into syringes to be used at a later time? .....	8
16. How is the seasonal influenza vaccine administered? .....	8
17. What is the dosage and frequency of the seasonal influenza vaccines? .....	8
18. How soon following immunization does protection develop and how long does it last? ..	8
19. Can you receive seasonal influenza vaccine before or after having donated/received blood or Immune Globulin? .....	8
20. Can seasonal vaccine, adult pertussis vaccine and pneumococcal vaccine be given at the same time?.....	9
21. Can seasonal influenza vaccine be administered if other vaccines have been received recently?.....	9
22. Where can I get more information on seasonal influenza vaccine?.....	9
23. What is the billing process for practitioners? .....	9

## 2017-2018 Seasonal Influenza Vaccine Information for Immunization Providers (This information applies only to quadrivalent influenza vaccine (QIV))

The Office of the Chief Medical Officer of Health (OCMOH) monitors influenza activity through its surveillance system year round; however, the majority of influenza activity occurs between October and April.

**For ongoing information on influenza activity, please see our weekly NB flu report which is posted on our website at:**

[http://www2.gnb.ca/content/gnb/en/departments/ocmoh/cdc/content/influenza/influenza\\_surveillance\\_activities.html](http://www2.gnb.ca/content/gnb/en/departments/ocmoh/cdc/content/influenza/influenza_surveillance_activities.html)

### **RESPONSIBILITIES OF ALL IMMUNIZATION PROVIDERS**

#### **1. What are my accountabilities as an immunization provider?**

All immunization providers of all publicly funded vaccines, including influenza and pneumococcal, shall practice according to the ***New Brunswick (NB) Immunization Program Guide***. This includes but is not limited to:

##### Reporting to Public Health

Adverse Events Following Immunization are to be reported to local Public Health Services as per *User guide–Report of Adverse Event Following Immunization* at the following website:

<http://www2.gnb.ca/content/dam/gnb/Departments/h-s/pdf/en/CDC/Epidemiology/AEFIUserGuideE.pdf>

##### Recording

Regulation 2009-136, section 14 under the *Public Health Act* requires that all immunization providers provide the client with a record of the immunization. Immunization cards are available at your regional public health office.

##### Management of Vaccine/Cold Chain (see Q 13)

##### Competency

All providers of publicly funded vaccine shall be deemed competent by their employing agency as per *Policy 2.4* of the *New Brunswick Immunization Program Guide*.

##### Safety

Immunization providers must ensure that:

- Adrenalin is present during vaccine administration;
- Clients are monitored for at least 15 minutes post-immunization;
- The immunization is documented including the lot number of the vaccine. **This is important information in the event there is a vaccine recall or an individual experiences an adverse event following immunization (AEFI).**

Ordering / Receiving Vaccine

Seasonal influenza vaccine arrives into the provincial depot and distribution is initiated to most immunization providers usually by the middle of October. Although vaccination before the onset of the influenza season is strongly preferred (in October or early November), vaccine providers should use every opportunity to give influenza vaccine during the current season, even after influenza activity has been documented in the community (after April).

- **All immunization providers must submit their influenza vaccine order prior to collecting vaccine.**

<b>Immunization provider</b>	<b>Where to order and collect vaccine</b>
• Health care practitioners (physicians and nurse practitioners)	• Regional Public Health Office
• Saint John health care practitioners (physicians and nurse practitioners)	• CSD (Central Serum Depot)
• Nursing home management	• Regional Public Health Office
• Saint John nursing home management	• CSD
• Pharmacists	• CSD
• First Nation health care practitioners and nurses	• CSD

- Vaccine will only be released to immunization providers who bring insulated containers large enough to hold vaccine, ice/gel pack, insulating materials, and temperature monitoring devices (min-max thermometer or warm and cold mark indicators).
- If vaccine is exposed to a storage excursion please contact the manufacturer first to determine if vaccine is usable before contacting CSD.
- Any unused/outdated vaccine is to be returned along with a completed Vaccine Loss Report form to the site from which it was received.

**ELIGIBILITY**

**2. Who does the health system provide free 2017-2018 seasonal influenza vaccine for?**

Seasonal influenza vaccine is available free of charge to the following groups by many different immunization providers through a variety of programs. For more information please visit your health care provider or check the website at: [www.qnb.ca/flu](http://www.qnb.ca/flu)

1. Adults and children with 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;
  - neurologic or neurodevelopment conditions. These include seizure disorders, febrile seizures and isolated developmental delay in children and neuromuscular, neurovascular, neurodegenerative, neurodevelopmental conditions and seizure disorders in adults, but excludes migraines and neuropsychiatric conditions without

- neurological conditions;
  - conditions that compromise the management of respiratory secretions and are associated with an increased risk of aspiration;
  - morbid obesity (BMI≥40); and
  - children and adolescents (age 6 months to 18 years) undergoing treatment for long periods with acetylsalicylic acid, because of the potential increase of Reye’s syndrome associated with influenza.
2. People of any age who are residents of nursing homes and other chronic care facilities.
  3. People ≥65 years of age.
  4. Healthy children 6 months to 18 years of age.
  5. Pregnant women.
  6. Aboriginal people.
  7. People capable of transmitting influenza to those at high risk:
    - 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), as listed under # 1;
    - household contacts of infants <6 months of age;
    - household contacts of children 6 months to 59 months;
    - members of a household expecting a newborn during the influenza season; and
    - health care workers.

All healthy persons aged 19 to 64 years who do not have contraindications to influenza vaccine are also encouraged to receive influenza vaccine

### 3. Who can provide publicly funded influenza vaccine?

<b>PUBLICLY FUNDED INDIVIDUALS (No Cost to individual)</b>	<b>Regional Health Authorities (RHAs)</b>	<b>Physicians’ Offices</b>	<b>Pharmacies</b>	<b>Long Term Care Facilities</b>
<b>Pregnant Women</b>	YES	YES	YES	
<b>Healthy Children 6 months to 18 years</b>	YES	YES	YES ( 5- 18 years)	
<b>Adults + Children with Health Conditions</b>	YES	YES	YES (5 years + older)	YES
<b>People ≥ 65 years</b>	YES	YES	YES	YES
<b>People who are capable of transmitting influenza to those at high risk</b>	YES	YES	YES	
<b>Aboriginal</b>	YES	YES	YES	YES
<b>Residents Long term care facilities</b>				YES
<b>Healthcare workers</b>	YES			YES

## **2017-2018 VACCINE COMPONENTS/PRODUCTS**

### **4. What are the components of the 2017-2018 seasonal influenza vaccines?**

The seasonal quadrivalent influenza vaccine for 2017-2018, as per the recommendations by the World Health Organization for northern hemisphere, contains:

- A/Michigan/45/2015 (H1N1)pdm09-like virus;
- A/Hong Kong/4801/2014 (H3N2)-like virus;
- B/Brisbane/60/2008-like virus; and
- B/Phuket/3073/2013-like virus.

### **5. What products are being used for the 2017-2018 seasonal influenza?**

Flulaval® Tetra and Fluzone® Quadrivalent are supplied in 10 dose vials. A small quantity of Fluzone® Quadrivalent single use pre-filled syringes will be available.

- Flulaval® Tetra (GSK) - <http://www.gsk.ca/english/index.html>
- Fluzone® Quadrivalent (Sanofi) - <http://www.sanofipasteur.ca/node/17902>

## **SIDE EFFECTS/CONTRAINDICATIONS**

### **6. What are the side effects of the seasonal influenza vaccine?**

One third of those immunized report soreness at the injection site for up to two days. Flu-like symptoms (fever, sore muscles, and tiredness) may occur within 6 to 12 hours after immunization and last 1 to 2 days, especially in those receiving the vaccine for the first time. Anaphylactic hypersensitivity reactions occur rarely.

### **7. Can the seasonal influenza vaccine cause influenza illness?**

The seasonal influenza vaccine does not contain live virus and therefore cannot cause influenza.

### **8. Who should NOT routinely be given seasonal influenza vaccine?**

The following people should **not** routinely receive seasonal influenza vaccine:

- Infants less than 6 months of age;
- People who have had a serious allergic reaction (anaphylaxis) to any of the components of influenza vaccine (with the exception of egg);
- People who have a serious acute febrile illness;
- People known to have had Guillain-Barré Syndrome (GBS) within 6 weeks of a previous influenza vaccine. *It is not known whether influenza vaccination is causally associated with increased risk of recurrent GBS in persons with a previous history of GBS due to any cause. Avoiding subsequent influenza vaccination of persons known to have had GBS within six weeks of a previous influenza vaccination appears prudent at this time.*

**9. Should people who have experienced Ocular Respiratory Syndrome (ORS) following receipt of a previous seasonal influenza vaccine be immunized with the seasonal influenza vaccine?**

There is no evidence to suggest that oculo-respiratory syndrome (ORS) will be a concern following immunization. Individuals who have experienced ORS, including those with a severe presentation (bilateral red eyes, cough, sore throat, hoarseness, facial swelling) but without lower respiratory tract symptoms, may be safely re-immunized with influenza vaccine.

Persons who experienced ORS with lower respiratory tract symptoms (wheeze, chest tightness, difficulty breathing) within 24 hours of immunization, an apparent significant allergic reaction to the immunization or any other symptoms (throat constriction, difficulty swallowing) that raise concerns regarding the safety of re-immunization should have a consultation with a Medical Officer of Health or another expert.

Please refer to the most current NACI recommendations regarding revaccination of subjects who experience more severe oculo-respiratory syndrome. <http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/05vol31/dr3121a-eng.php>

**10. Should people who are allergic to eggs receive the seasonal influenza vaccine?**

All influenza vaccine products authorized for use in Canada are manufactured by a process involving chicken eggs, which may result in the vaccines containing trace amounts of residual egg protein. NACI has concluded that egg allergic individuals without other contraindications may be vaccinated against influenza (with any product) without a prior influenza vaccine skin test and with the full dose. The vaccine may be given in any settings where vaccines are routinely administered. As with any vaccine, immunizers should be prepared for and have the necessary equipment to respond to a vaccine emergency at all times.

For further information please see the 2017-2018 NACI statement on seasonal influenza immunization.

**11. Should pregnant women receive the seasonal influenza vaccine?**

All pregnant women should receive seasonal influenza immunization, as evidence demonstrates they are at higher risk of complications from influenza.

**12. Is seasonal influenza vaccine safe for breastfeeding mothers?**

Seasonal influenza vaccine is safe for breastfeeding mothers.

**VACCINE STORAGE/ADMINISTRATION**

**13. How should the seasonal influenza vaccines be stored?**

- Influenza vaccine must be stored between 2<sup>o</sup> - 8<sup>o</sup> at all times.
- The vaccine should not be frozen and must be protected from light.
- Report all cold chain breaks to Central Serum Depot by faxing (506-648-6477) the *Vaccine Loss Following Storage Excursion* form. Also contact the manufacturer and follow their directions on use of affected vaccines.
- Attention must be paid to the duration of stability of vaccine once it has been opened.

#### 14. How long can a vial of influenza vaccine be used once it is opened?

- An opened vial of Flulaval Tetra must be used within 28 days from the date it was opened.
- A multidose vial of Fluzone® which has been entered and stored at 2° to 8°C may be used up to the expiry date indicated on the vial label.

#### 15. Can I draw up the seasonal influenza vaccine into syringes to be used at a later time?

The manufacturer has no data to confirm that immunogenicity of the product will be preserved after prolonged exposure to the plastic of the syringe. The company also has concerns regarding bacterial contamination. Therefore, influenza vaccine should be injected as soon as possible after being drawn up.

#### 16. How is the seasonal influenza vaccine administered?

- The seasonal influenza vaccine is administered intramuscularly.
- The deltoid muscle is the recommended site in adults/ older children (>1 year old). The anterolateral thigh is the recommended site in infants (<1 year old)

### DOSAGE

#### 17. What is the dosage and frequency of the seasonal influenza vaccines?

For intramuscular QIV, the dose is now 0.5 ml for all age groups.

#### Recommended Influenza Vaccine Doses by Age, 2017-2018

Age Group	Dose	No. of Doses
9 years and older	0.5 ml	1
6 months-8 years*	0.5 ml	1 or 2*

\* 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 received one or more doses of seasonal influenza vaccine in the past should receive one dose per season thereafter.

### IMMUNOGENICITY AND EFFICACY

#### 18. How soon following immunization does protection develop and how long does it last?

Protection from the seasonal influenza vaccine generally begins 10 to 14 days after immunization and may last 6 months or longer.

### SIMULTANEOUS ADMINISTRATION OF OTHER VACCINES

#### 19. Can you receive seasonal influenza vaccine before or after having donated/received blood or Immune Globulin?

Yes.



**20. Can seasonal vaccine, adult pertussis vaccine, and pneumococcal vaccine be given at the same time?**

Yes, they can be administered at the same time but they should be administered via separate syringes in different sites. Pneumococcal immunization is recommended once in a lifetime, except in certain high risk individuals as specified in the Canadian Immunization Guide. Pertussis vaccine is recommended in childhood and adolescence and once as an adult.

**21. Can seasonal influenza vaccine be administered if other vaccines have been received recently?**

You can administer seasonal influenza vaccine if other vaccines have been received recently. There is no interval of time needed between receiving seasonal influenza vaccine and any other vaccines.

**22. Where can I get more information on seasonal influenza vaccine?**

For more information on influenza vaccine, contact your local Public Health office. You may also check the following references:

- The Government of New Brunswick website at: [http://www2.gnb.ca/content/gnb/en/departments/ocmoh/for\\_healthprofessionals.html](http://www2.gnb.ca/content/gnb/en/departments/ocmoh/for_healthprofessionals.html);
- An Advisory Committee Statement (ACS) National Advisory Committee on Immunization (NACI) –Canadian Immunization Guide Chapter on Influenza and Statement on Seasonal Influenza Vaccine 2017-18
- Canadian Public Health Association: <http://www.immunize.ca>;

**23. What is the billing process for practitioners?**

Physicians and Nurse Practitioners are to refer to the Physicians Manual for billing practices specific to 2017-2018 seasonal influenza immunization.

Pharmacist claims are submitted as required under the New Brunswick Prescription Drug Program (NBPDP) Plan “I”.