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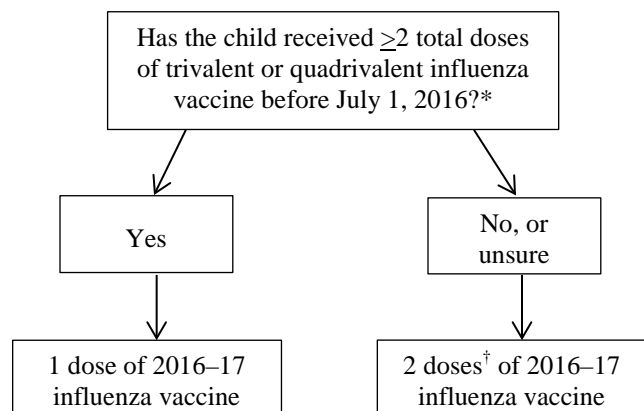
Influenza Vaccine Recommendations and Administration for the 2016–17 Season

Recommendations for Vaccination

Routine annual influenza vaccination is recommended for all persons aged ≥ 6 months who do not have contraindications. To permit time for production of protective antibody levels, vaccination should optimally occur before onset of influenza activity in the community. Health care providers should begin offering influenza vaccine as soon as it is available and throughout the influenza season.

Eleven different influenza vaccines will be available for purchase during the 2016–17 influenza season.^{1,2} The Alaska Immunization Program will supply five presentations of trivalent or quadrivalent inactivated influenza vaccine (IIV3 or IIV4) this season (Table).² Vaccine dosage guidelines for children aged 6 months through 8 years are the same as the 2015–16 influenza season and are provided below (Figure).

Figure. Vaccine Dosing Algorithm for Children Aged 6 Months through 8 Years¹



*The two doses need not have been received during the same season or during consecutive seasons.¹

†Doses should be administered ≥ 4 weeks apart.¹

Table. Alaska State-supplied Influenza Vaccines for the 2016–17 Influenza Season^{1,2}

Vaccine	Trade Name	Manufacturer	Presentation	Age-Group	Mercury content μg/0.5 mL dose	Ovalbumin content* μg/0.5 mL dose	# of Doses [†]	Route
IIV4 [‡]	Fluzone® Quadrivalent	Sanofi Pasteur	0.25 mL prefilled syringe	6 through 35 months	0	**	1 or 2	IM ^{††}
IIV4 [‡]	Fluzone® Quadrivalent	Sanofi Pasteur	0.5 mL prefilled syringe	≥ 36 months	0	**	1 or 2	IM ^{††}
IIV4 [‡]	Fluzone® Quadrivalent	Sanofi Pasteur	5.0 mL multi-dose vial	≥ 6 months	25	**	1 or 2	IM ^{††}
IIV3 [‡]	Fluzone® High-Dose Trivalent	Sanofi Pasteur	0.5 mL prefilled syringe	≥ 65 years	0	**	1	IM ^{††}
IIV4 [‡]	Fluarix® Quadrivalent	GlaxoSmithKline	0.5 mL prefilled syringe	≥ 36 months	0	≤ 0.05	1 or 2	IM ^{††}

*Data on maximum ovalbumin content are supplied in package inserts of certain vaccines. Persons with a history of mild allergy to egg (specifically, those who experience hives) should receive any age appropriate IIV or RIV.

†Figure describes the decision criteria for determining the number of doses needed for children aged 6 months through 8 years.

‡IIV3 will contain an A/California/7/2009(H1N1)-like, an A/Hong Kong/4801/2014(H3N2)-like, and B/Brisbane/60/2008-like virus (Victoria lineage). IIV4 will contain these vaccine viruses, and a B/Phuket/3073/2013-like virus (Yamagata lineage).¹

**Information is available upon request from Sanofi Pasteur by telephone 800-822-2463 or e-mail MIS.Emails@sanofipasteur.com

††IM=Intramuscular. The recommended vaccination site is the deltoid muscle for adults and older children, and the anterolateral aspect of the thigh for infants and young children.

(Note: This Bulletin provides summary information only. For complete information, consult the Advisory Committee on Immunization Practices (ACIP) recommendations¹ and vaccine manufacturer package inserts, available at: <http://www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/UCM093833>)

General Recommendations¹

- All persons aged ≥ 6 months without contraindications should receive influenza vaccine.
- Influenza vaccination should not be delayed to procure a specific preparation if an appropriate one is available.
- Ideally, all vaccines should be administered in settings where personnel and equipment for rapid recognition and treatment of anaphylaxis are available.
- Health care providers should consider observing all patients for 15 minutes after vaccination to decrease the risk for injury should they experience syncope.¹

Recommendations for Persons with an Egg Allergy¹

- Persons who have experienced only hives after egg exposure may receive any licensed and recommended influenza vaccine that is otherwise appropriate for their age and health status.^{1,2}
- Persons who report having had reactions to eggs such as angioedema, respiratory distress, lightheadedness, or recurrent emesis within a short time after egg exposure may receive any age-appropriate IIV or recombinant influenza vaccine (RIV3) if they have no contraindications.^{1,2} These persons should be vaccinated in an inpatient or an outpatient medical setting under the supervision of a health care provider who is able to recognize and manage severe allergic conditions.^{1,2}

References

1. CDC. Prevention and control of seasonal influenza with vaccines: recommendations of the ACIP, United States, 2016–17 influenza season. *MMWR* 2016;65(5):1-54. Available at: http://www.cdc.gov/mmwr/volumes/65/rr/rr6505a1.htm?s_cid=r6505a1_e
2. Alaska Epidemiology Bulletin. “Influenza Vaccines Available during the 2016–17 Season”. No. 21, Sept 19, 2016. Available at: http://www.epi.alaska.gov/bulletins/docs/b2016_21.pdf