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Revised Influenza Vaccination Recommendations for Alaska - 2004-05 Influenza Season

Background

On October 5, 2004, the Centers for Disease Control and Prevention and the Alaska Department of Health and Social Services (DHSS) learned that Chiron, the manufacturer of Fluvirin[®], would be unable to release any influenza vaccine this year. British regulators suspended the manufacturing license of the company's Liverpool facility for 3 months, preventing any release of the vaccine for this influenza season. Fluvirin[®] accounts for approximately half of the influenza vaccine used in the United States.

In response to this news, the DHSS issued a press release recommending the targeted use of available influenza vaccine. (See www.epi.alaska.gov for a copy of the press release.) This *Epidemiology Bulletin* provides additional information for Alaska providers. **The following recommendations are current as of October 7, 2004 and take precedence over earlier recommendations**, including those published in *Epidemiology Bulletin* No. 19, September 27, 2004. Recommendations may be updated as additional information becomes available.

Who Should Be Vaccinated?

Because of the vaccine shortage, the existing supplies should be reserved for those who are at greatest risk of serious complications from influenza disease. The following high risk persons are considered of equal importance to receive available influenza vaccine:

- All children aged 6 – 23 months;
- Adults aged 65 years and older;
- Persons aged 2 – 64 years with underlying chronic medical conditions;
- All women who will be pregnant during the influenza season;
- Residents of nursing homes and long-term care facilities;
- Children aged 6 months – 18 years on chronic aspirin therapy;
- Health care workers with direct patient care;
- Out-of-home caregivers and household contacts of children less than 6 months of age.

Who Should Forego Vaccination?

Healthy persons 2-64 years of age who do not fall into one of the risk groups listed above should **not** receive an influenza shot this year. This will allow available vaccine to be targeted to our most vulnerable populations.

How Much Vaccine is Available in Alaska?

The Alaska Immunization Program has distributed almost 60,000 doses of Fluzone[®], an Aventis product, to Alaska providers. (We also had ordered 40,000 doses of Chiron vaccine, which will not be received.) In addition, many private providers have purchased an undetermined amount of vaccine directly from Aventis. Some of these private provider stocks have not yet been received and may arrive later in October.

State-supplied influenza vaccine has been distributed to public health centers, Alaska Native corporation clinics, long-term care facilities, and private providers who placed orders with the Immunization Program. However, each of these facilities has received approximately half of the vaccine they ordered.

How Should Providers Use the Preservative-Free Vaccine When It Becomes Available?

The Immunization Program still expects to receive 25,000 doses of Aventis preservative-free vaccine for use in young children. This vaccine should be used **only** for children 6-23 months of age or children 24-35 months of age who have underlying chronic health conditions. Providers should **not** "double up" and use two of these 0.25 mL doses to vaccinate an older individual who needs a 0.5 mL dose.

Because delivery of this vaccine is expected to occur in three separate shipments during October, Alaska providers may receive only a portion of their order with the first shipment. All vaccine will be distributed as quickly as possible after it is received.

Should Vaccine Be Saved to Provide a Second Dose for Children for Whom It Is Recommended?

No. Children less than 9 years of age require a second dose of vaccine if they have never been previously vaccinated. The second dose may be given from existing supplies at any time at least 1 month after the first dose. However, doses should not be held in reserve to ensure that the second dose will be on hand at some point in the future. Available vaccine should be used to vaccinate persons in priority groups on a first-come, first-serve basis.

What about Using FluMist[®], the Nasal Vaccine?

The Alaska Section of Epidemiology does not supply FluMist[®], the live attenuated vaccine that is administered intranasally. However, some private providers have purchased this vaccine directly from the manufacturer. Approximately 1.1 million doses were on the national market. If available, FluMist[®] is encouraged for healthy individuals 5-49 years of age who are not pregnant, including persons caring for children less than 6 months of age. FluMist[®] also is encouraged for health care providers under 50 years of age unless they must care for severely immunocompromised patients within 7 days after immunization.

What if I'm Unable to Locate Any Vaccine for My High Risk Patients?

DHSS is assessing the best methods to assure that vaccine for high risk persons is available in all major geographic locations in the state, rather than within every individual facility. We will make every effort to assist providers in need of vaccine for high risk patients. Over the next 1-2 weeks, we will be contacting Alaska providers to determine vaccine availability throughout the state. We **may** request redistribution of available vaccine supplies. Providers are asked to maintain careful records of vaccine storage conditions so that proper cold storage temperatures may be assured for vaccine that subsequently may be moved.

Where May I Find Updated Information on the Vaccine Situation and Influenza Disease Surveillance?

DHSS will issue additional *Epidemiology Bulletins* as necessary and will post updated vaccine recommendations and Alaska disease surveillance reports on the Section of Epidemiology website. <http://www.epi.alaska.gov>

Additional information on national disease surveillance and vaccine recommendations may be found on the Centers for Disease Control website. <http://www.cdc.gov/flu>