



What's new with flu? *Time to prepare for 2011-'12 season*

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Believe it or not, flu season is just around the corner. It's time to get prepared.

The Academy's updated recommendations for the prevention and treatment of influenza in children will be available Sept. 5 at <http://pediatrics.aappublications.org/cgi/doi/10.1542/peds.2011-2295>. The policy statement also will be published in the October issue of *Pediatrics*.



Following are the key messages from the policy statement:

The influenza vaccine composition this season is *unchanged* from last season.

The trivalent vaccine for the 2011-'12 influenza season contains the following three virus strains:

- A/California/7/2009 (H1N1)-like antigen (derived from 2009 pandemic influenza A [H1N1] virus);
- A/Perth/16/2009 (H3N2)-like antigen; and
- B/Brisbane/60/2008-like antigen.

This is only the fourth time in the past 25 years that there has been no recommendation to change any of the influenza vaccine strains.

Antibody titers wane to half their original levels six to 12 months after vaccination. Therefore, even if vaccine was received in past seasons, receiving the vaccine this season is critical for protection.

Annual universal influenza immunization is indicated for *all children and adolescents 6 months of age and older*.

Special outreach efforts should be made to vaccinate everyone with influenza vaccine during the 2011-'12 influenza season:

- all children 6 months of age and older, especially those with conditions that increase the risk of complications from influenza;
- all household contacts and out-of-home care providers of
 - children with high-risk conditions, and
 - children younger than 5 years of age;
- all health care personnel; and
- all women who are pregnant, considering pregnancy or breastfeeding during the influenza season.

A simplified dosing algorithm has been created for children 6 months through 8 years of age (at right).

Children 6 months through 8 years of age:

- should receive two doses of vaccine if they did not receive *any* vaccine last season (or the parent/ guardian is unsure). The second dose should be administered at least four weeks after the first.
- need only one dose of the 2011-'12 influenza vaccine if they received at least one dose of influenza vaccine last season.

Most children with a history of *mild* egg allergy (e.g., hives) can receive influenza vaccine safely in the office setting without need for an allergy consultation (see algorithm at right).

More conservative approaches, such as skin testing and two-step graded challenges, no longer are recommended. Vaccine should be administered with some preconditions:

- Appropriate resuscitative equipment must be readily available, as when any vaccine is given in the office (*Pediatrics*. 2007;120:200-212).
- Vaccine recipients should be observed for 30 minutes after immunization, the standard observation time for receiving immunotherapy in the office.
- For children 6 months through 8 years who need a second dose, the same product brand is preferred, when possible, but it does not need to be from the same lot as the first dose.

Consult with an allergist before administering seasonal influenza vaccine to children who have a history of *severe* egg allergy (i.e., cardiovascular changes, respiratory and/or gastrointestinal tract symptoms, or episodes that required the use of epinephrine).

An intradermal influenza vaccine has been licensed for the 2011-'12 season for use in people 18 through 64 years of age.

- It uses a needle 90% shorter than needles used for intramuscular administration.
- The most common adverse events are redness, induration, swelling, pain and itching at the site of administration at a slightly higher rate than occurs with the intramuscular formulation of trivalent inactivated influenza virus vaccine (TIV).
- Other side effects occur at the same rate as with the intramuscular TIV.
- There is no preference for the intradermal or intramuscular formulation.



Dr. Bernstein is a member of the AAP Committee on Infectious Diseases.

Resource

AAP influenza implementation guidance can be found at www.aap.org/immunization/pediatricians/influenzaguidance.html.

Number of 2011-'12 seasonal influenza vaccine doses for children 6 months through 8 years of age



Notes:

- This simplified approach is only possible because the 2011-'12 influenza vaccine contains the identical three influenza virus strains used in the 2010-'11 vaccine.
- The number of doses to be given is determined on the basis of the child's age at the time of the first dose.

Precautions for administering influenza vaccine to presumed egg allergic individuals

