Health Care Provider Fact Sheet: Influenza Immunization for Individuals 6 months to 64 years of age

This document is intended for informational purposes only. It is not intended to provide medical or legal advice.

Publicly funded influenza vaccines for individuals 6 months to 64 years of age

	Quadrivalent Inactivated Vaccines		
UIIP Abbreviation	QIV		
NACI Abbreviation	IIV4-SD		
Vaccine product	FluLaval Tetra	Fluzone [®] Quadrivalent	Flucelvax [®] Quad
Manufacturer	GSK	Sanofi Pasteur	Seqirus
Age indication	≥6 months	≥6 months	≥6 months
Vaccine type	Egg-based	Egg-based	Cell culture-based
Micrograms of hemagglutinin	15 µg	15 µg	15 µg
Dosage	0.5 mL	0.5 mL	0.5 mL
Format	MDV	MDV and PFS	PFS
Route	IM	IM	IM
Most common allergens ¹	 Egg protein² Thimerosal³ 	 Egg protein² Thimerosal³ 	Does NOT contain egg protein or thimerosal

MDV = Multi-dose vial

PFS = Pre-filled syringe

IM = Intramuscular injection

NACI = National Advisory Committee on Immunization

¹ Any component in a vaccine may be a potential allergen. This table identifies the most common allergens.

² See the contraindications and precautions section on page 4 regarding egg allergies.

³ Multi-dose vial format only.

Important notes:

 Fluzone® High-Dose Quadrivalent is another influenza vaccine available under the UIIP. It is a quadrivalent product authorized ONLY for those 65 years of age and older. Fluzone® Quadrivalent and Fluzone® High-Dose Quadrivalent are DIFFERENT products. Please use caution when administering Fluzone® products to ensure that the right vaccine is being administered to the right person.

Dose recommendations

The influenza vaccine is needed each year to provide protection each influenza season.

Age	Number of doses recommended for the current season
6 months to under 9 years of age – Not previously immunized with any influenza vaccine in their lifetime	2 doses at least 4 weeks apart*
6 months to under 9 years of age – Previously immunized with at least one dose of any influenza vaccine in their lifetime	1 dose
9 years of age and older	1 dose

^{*}It is NOT necessary to use the same vaccine product for both doses.

Protection against influenza vaccine strains

All influenza vaccines available in Ontario for individuals 6 months to 64 years of age are QIV, which protect against four strains - two influenza A strains and two influenza B strains. More details on the specific strains included in this season's influenza vaccines are outlined on page 7 of the Health Care Provider Fact Sheet: Information for the 2024/2025 Influenza Season.

The publicly funded influenza products are all inactivated vaccines so individuals cannot get influenza from the vaccine.

Vaccine administrators

Individuals who can administer the influenza vaccine include:

- Regulated health professionals who are authorized under the <u>Regulated Health</u> <u>Professions Act, 1991</u> to administer vaccines.
 - Note: trained pharmacists, pharmacy technicians, pharmacy students and interns may only administer publicly funded influenza vaccine to individuals 2 years of age and older.
- Trained individuals under a delegation made in accordance with the requirements set by the regulatory College of the regulated health professional.

Protection against COVID-19 or other diseases

The influenza vaccine will not protect against respiratory viruses other than influenza, including the coronavirus that causes COVID-19, but will help prevent infection and illness from the influenza virus.

Expert groups and evidence indicate that getting the influenza vaccine will not increase your risk of COVID-19 infection or severe outcomes related to COVID-19.

Protection against infection and illness from the influenza virus through influenza vaccination may provide added benefit in protecting against other diseases such as invasive Group A Streptococcal Disease (iGAS) or worsening of existing chronic illnesses such as cardiovascular disease.

Co-administration

The influenza QIV vaccines may be given at the same time with other vaccines, or at any time before or after other vaccines, including COVID-19 vaccine and/or respiratory syncytial virus (RSV) vaccine as well as RSV monoclonal antibody products.

If multiple injections are to be given at the same visit, separate limbs should be used if possible. Alternatively, the injections may be administered into the same muscle separated by at least 2.5 cm (1"). Different immunization equipment (needle and syringe) must be used for each vaccine.

Contraindications and Precautions

Do not administer influenza vaccine to:

- Persons with a history of serious allergic reaction (anaphylaxis) to a previous dose of influenza vaccine, and/or
- Persons with proven immediate or anaphylactic hypersensitivity to any ingredient in the vaccine, except for egg.

According to NACI, egg-allergic individuals may be vaccinated against influenza using the full dose of any age-appropriate product, including QIV. See section IV of the Canadian Immunization Guide chapter on Influenza and statement on seasonal influenza vaccine for 2018-2019 for studies supporting the NACI recommendation for egg-allergic individuals.

Anyone who has developed Guillain-Barré Syndrome (GBS) within six weeks of a previous influenza vaccination should generally NOT be vaccinated, HOWEVER, this should be weighed against the risks of not being vaccinated against influenza.

Those with a severe acute illness at the time of immunization should wait until the symptoms subside before being immunized. Immunization should not be delayed because of minor acute illness, with or without fever.

Adverse events

Many people who receive influenza vaccine have no side effects or adverse events. For those that do, side effects are usual mild and last a few days.

The most common side effects from the influenza vaccine are:

- · Redness, swelling, and soreness at the injection site
- Headache
- Tiredness/weakness
- Fever

Life-threatening allergic (anaphylactic) reactions are very rare. If they do occur, it is typically within a few minutes to a few hours after receiving the vaccine.

Some studies have found a possible, but small, association between injectable influenza vaccine and Guillain-Barré Syndrome (GBS) and others have not found any association. Oculorespiratory Syndrome (ORS) may occur in extremely rare instances. Please refer to the Adverse events section on page 9 of the Health Care Provider Fact Sheet: Information for the 2024/2025 Influenza Season for further details.

Guidance on reporting Adverse Events Following Immunization (AEFI)

To ensure the ongoing safety of vaccines in Ontario, reporting AEFIs by physicians, nurses, pharmacists or other persons authorized to administer an immunizing agent is mandatory under the <u>Health Protection and Promotion Act</u>. Vaccine providers are asked to report AEFIs through local <u>public health units</u> using the <u>Ontario AEFI Reporting Form</u>.

Those administering vaccines should advise vaccine recipients or their parents/guardians to contact their health care provider if they experience an adverse event after vaccination.

Health care providers should report any event which may be related to receipt of a vaccine, as outlined in <u>Public Health Ontario's AEFI Reporting fact sheet</u>. Of particular importance are events which require medical consultation, or unusual or unexpected events. Submitting a report does not mean that the vaccine caused the event.

Some common or mild events do not need to be reported. These include:

- fever that is not accompanied by any other symptoms
- injection site reactions that last less than 4 days
- vasovagal syncope (without injury)
- events that are clearly attributed to other causes

Vaccine recipients should be advised to go to the nearest emergency department if severe reactions develop, including the following:

- Signs and symptoms of severe allergic reaction, including:
 - Hives
 - Swelling of the mouth or throat
 - Trouble breathing, hoarseness or wheezing
- High fever (over 40°C or 104°F)
- Convulsions (seizures)
- Other serious reactions

Observation period following immunization

NACI recommends a <u>15-minute post-vaccination observation period</u>, as specified in the Canadian Immunization Guide (CIG). If there is a specific concern about possible vaccine allergy, 30 minutes is a preferred interval as per NACI.

A reduced post-vaccination observation period (i.e., less than 15 minutes) is no longer recommended per the NACI recommendations that were made during the COVID-19 pandemic response.

Health Care Provider information

Health care providers looking for more information about influenza, influenza vaccines, or the province's UIIP can refer to the Health Care Provider Fact Sheet: Information for the 2024/2025 Influenza Season, Public Health Ontario or to their local public health unit.

Public / patient information

Individuals looking for general information about influenza, influenza vaccines or the province's UIIP can call ServiceOntario, INFOline at 1-866-532-3161 toll free in Ontario (TTY#1-800-387-5559) or visit: www.ontario.ca/flu. Questions about the vaccine that are specific to an individual's medical condition should be discussed with a health care provider or local public health unit.

Additional information

Please visit the following websites or call your local public health unit:

- a) Universal Influenza Immunization Program: www.ontario.ca/page/universal-influenza-immunization-program
- b) Public Health Agency of Canada National Advisory Committee on Immunization (NACI) Statement on Seasonal Influenza Vaccine: www.phac-aspc.gc.ca/naci-ccni/#rec
- c) Public Health Ontario: www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/influenza
- d) Immunize Canada: www.immunize.ca/
- e) Centers for Disease Control and Prevention (CDC) Seasonal Influenza: www.cdc.gov/flu/
- f) List of public health unit locations: www.ontario.ca/page/public-health-unit-locations

Version française disponible en communiquant avec le 1-866-532-3161 ATS: 1-800 387-5559 (site web: www.ontario.ca/fr/page/programme-universel-de-vaccination-contre-la-grippe).