Information for Parents for the 2016-2017 Flu Season

Everyone 6 months of age and older should get a flu shot this season.

- Only injectable flu vaccines (given as a shot) are recommended by the Centers for Disease Control (CDC) and the American Academy of Pediatrics (AAP) this season.
- Injectable vaccines include inactivated influenza vaccines (IIV) and recombinant influenza vaccines (RIV). RIV is not approved for children younger than 18 years of age; those children should receive IIV.
- The nasal spray flu vaccine (trade name FluMist®) is not recommended this season because of concerns that it may not work well. For example, CDC found it offered no protection against flu for children 2 through 17 years of age last season.
- Flu shots do work. CDC found that flu shots reduced a child’s risk of ending up at the doctor’s office sick with flu by more than 60% last season.

Reasons to get your child a flu shot:

- A flu shot can keep your child from getting sick with flu.
- Influenza is more serious than the common cold. It can lead to serious complications, including hospitalization or death.
  - Each year an average of 20,000 children younger than 5 years are hospitalized because of influenza complications.
  - Since 2004-2005, flu-related deaths in children reported to CDC during regular flu seasons have ranged from a low of 37 to a high of 171 deaths.
- Children, especially school-aged children, are more likely to catch the flu. Millions of children get sick with flu every season. A typical flu illness can mean missing a week or more of school. Once infected, children can spread the flu to parents and siblings, other family members, and friends.
- Vaccinating your child protects people around them (like grandparents, babies or anyone with long-term health problems) who are more vulnerable to flu.
- Children with certain long-term health conditions (like asthma or diabetes) and all children younger than 5 years are at high risk of serious illness when they get the flu.
- Flu vaccine is not perfect. Some vaccinated people may still get sick, but if they do, flu vaccine may make their illness milder.
- Flu vaccines are among the safest medical products in use. Hundreds of millions of people have safely gotten flu vaccines for more than 50 years. There may be mild side effects from getting vaccinated, but these are so much less of a problem than getting sick with the flu!

For more information, visit: www.cdc.gov/flu
or call 1-800-CDC-INFO
Why is FluMist® not recommended this season?

Studies conducted soon after the nasal spray flu vaccine was approved showed it was performing as well as (and sometimes better than) flu shots. Unfortunately, there have been recent problems with how well the nasal spray flu vaccine has worked. No one knows why this happened. Many people are trying to learn why, so that nasal spray flu vaccine may in the future again be an option for kids and parents.

The single best way to protect children from the flu is to get them vaccinated each year.

Flu vaccine protects against the most common flu viruses expected during the upcoming season. Traditional flu vaccines are made to protect against either 3 flu viruses (called “trivalent” vaccines) or 4 flu viruses (called “quadrivalent” vaccines). Quadrivalent vaccines protect against the same 3 viruses as the trivalent vaccine plus an extra B virus. There is no preference for one vaccine over another among the licensed and recommended flu vaccines this season.

Children 6 months through 8 years of age need either 1 or 2 doses of vaccine.

- Children 6 months through 8 years who received at least 2 doses of any licensed trivalent or quadrivalent flu vaccine at any time before July 2016 will only need 1 dose this season.
- Children 6 months through 8 years getting vaccinated for the first time, or who have only previously received 1 dose of vaccine in the past, should get 2 doses this season.
  » The first dose should be given as soon as vaccine is available to “prime” the immune system.
  » The second dose should be given at least 28 days later to build more and longer lasting immune protection.
  » Children who only get 1 dose, but need 2 doses, are likely to have less or possibly no protection from that single dose.