December 5, 2011

Dear Colleague:

Advice from a healthcare provider plays a critical role in a pregnant and postpartum woman’s decision to get vaccinated against seasonal influenza. The American Academy of Family Physicians (AAFP), American Academy of Pediatrics (AAP), American College of Nurse-Midwives (ACNM), American College of Obstetricians and Gynecologists (The College), American Medical Association (AMA), American Nurses Association (ANA), American Pharmacists Association (APhA), Association of Women’s Health, Obstetric and Neonatal Nurses (AWHONN), March of Dimes, National Foundation for Infectious Diseases (NFID), National Influenza Vaccine Summit (NIVS), and Centers for Disease Control and Prevention (CDC) are asking for your help in urging your pregnant and postpartum patients to get vaccinated against seasonal influenza.

Pregnant patients whose provider recommended and offered influenza vaccination were almost 5 times more likely to be vaccinated for influenza than patients who reported that their provider did not make a recommendation or offer influenza vaccination.

Lack of awareness of the benefits of vaccination and concerns about vaccine safety are common barriers to influenza vaccination of pregnant and postpartum women. To overcome these barriers, some key points for providers to consider during discussions with patients are outlined below:

1. **Pregnant women should receive seasonal influenza vaccine.**
   a. Influenza is 5 times more likely to cause severe illness in pregnant women than in women who are not pregnant. Changes in the immune system, heart, and lungs during pregnancy make pregnant women more prone to severe illness from influenza.
   b. Risk of premature labor and delivery is increased in pregnant women with influenza.
   c. Influenza hospitalization rates in infants <6 months of age are up to 10 times that of older children. However, no influenza vaccines are licensed for use in children <6 months of age.
   d. Vaccination during pregnancy has been shown to protect both the mother and her infant (up to 6 months of age) from influenza illness, influenza hospitalizations, and influenza-related preterm birth.

2. **Influenza vaccine is safe.**
   a. Influenza vaccines have been given to millions of pregnant women over the last decade and have not been shown to cause harm to women or their infants.
   b. Influenza vaccine can be given to pregnant women in any trimester.
   c. Pregnant women should receive inactivated vaccine (flu shot) but should NOT receive the live attenuated vaccine (nasal spray).
   d. Postpartum women, even if they are breastfeeding, can receive either type of vaccine.

Please encourage your pregnant and postpartum patients to get vaccinated against influenza. You play a crucial role in helping to prevent influenza and its severe complications in your patients and their infants. More information can be found at: [http://www.cdc.gov/flu/professionals/vaccination/](http://www.cdc.gov/flu/professionals/vaccination/). Free patient education resources (including for pregnant or postpartum patients) are available at [www.cdc.gov/flu](http://www.cdc.gov/flu).
Sincerely,

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