Centers for Disease Control and Prevention

Questions and Answers: “Vaccine against 2009 H1N1 Influenza Virus”

December 22, 2009, 4:00 PM ET

Recommendations for Vaccine against 2009 H1N1 Influenza Virus

Will the vaccine against 2009 H1N1 influenza virus (also called "swine flu") be the same vaccine in 2010?

Yes, the vaccine to protect against the 2009 H1N1 influenza virus will be the same for the entire 2009-2010 influenza season, which extends into the spring of 2010. The "2009" in the name only relates to the year the virus was first identified; it does not have to do with how long the vaccine will work or the year in which it should be administered. The 2009 H1N1 virus is not included in the 2009-2010 seasonal flu vaccine because it was identified after manufacturers had started making the seasonal flu vaccine.

Who should get the 2009 H1N1influenza vaccine?

When vaccine to protect against 2009 H1N1 first became available, supplies were limited. For this reason, CDC’s Advisory Committee on Immunization Practices (ACIP) recommended that people at highest risk for complications from this virus, or those caring for high risk individuals who cannot receive vaccination, receive the vaccine first. These target groups included pregnant women, people who live with or care for children younger than 6 months of age, health care and emergency medical services personnel, anyone 6 months through 24 years of age, and people ages of 25 through 64 years of age at higher risk for 2009 H1N1 influenza because of certain chronic health conditions or compromised immune systems.

http://www.flu.gov/widgets/vaccinelocator.html
ACIP recognized the need to assess supply and demand issues at the local level. The committee further recommended that once the demand for vaccine for these target groups had been met at the local level, programs and providers should begin vaccinating everyone from ages 25 through 64 years. Studies at that time indicated that the risk for infection among people 65 and older was less than the risk for younger age groups so people 65 and older were not initially targeted to receive early doses of vaccine. However, ACIP noted that as vaccine supply increased and demand for vaccine among younger age groups is being met, programs and providers should also offer vaccination to people over the age of 65. At this time, many states have already opened up vaccination to anyone who

wants it and while people 65 and older are still less likely to get sick with 2009 H1N1, severe infections and deaths have occurred in every age group, including older people. CDC is now encouraging those who have been patiently waiting to receive the 2009 H1N1 vaccine, including people 65 and older, to get vaccinated depending on local supply.

Separate recommendations are available for seasonal influenza, (Who Should Get Vaccinated Against Seasonal Influenza?)

How many doses of vaccine are required?

The U.S. Food and Drug Administration (FDA) has approved the use of one dose of vaccine against 2009 H1N1 influenza virus for persons 10 years of age and older. For children who are 6 months through 9 years of age, two doses of the vaccine are recommended. These two doses should be separated by 4 weeks. Infants younger than 6 months of age are too young to get any influenza vaccine.

What is the recommended interval between the first and second dose for children 6 months through 9 years of age?

CDC recommends that the two doses of vaccine against 2009 H1N1 influenza virus be separated by 4 weeks. However, if the second dose is separated from the first dose by at least 21 days, the second dose can be considered valid.

Can people who are allergic to eggs receive the vaccine against 2009 H1N1 influenza virus?

People who are allergic to eggs might be at risk for allergic reactions from receiving any influenza vaccine. People who have had any of the following symptoms or experiences should consult with a doctor or other medical professional before considering any influenza vaccination:

- hives or swelling of the lips or tongue after eating eggs
- acute respiratory distress (trouble breathing) after eating eggs
- documented hypersensitivity to eggs, including those who have had asthma related to egg exposure at their workplace or other allergic responses to egg protein

Because children with severe asthma are at high risk of serious complications from influenza, a regimen has been developed for giving influenza vaccine to children with severe asthma and egg hypersensitivity.

Vaccines for the 2009-2010 Influenza Season

Does the seasonal influenza vaccine also protect against 2009 H1N1 influenza?

The seasonal influenza vaccine will not protect you against 2009 H1N1 influenza. For more information about the seasonal flu vaccine, read Key Facts About Seasonal Flu Vaccine.

Is this vaccine made differently than the seasonal influenza vaccine?

No. The vaccine against the 2009 H1N1 virus is made using the same processes and facilities that are used to make the currently licensed seasonal influenza vaccines

Can both flu vaccines be given at the same time?

Inactivated vaccine against the 2009 H1N1 flu virus (the flu shot) can be given at the same visit as any other vaccine, including pneumococcal polysaccharide vaccine. The LAIV (nasal spray vaccine) against the 2009 H1N1 virus can be administered at the same visit as any other live or inactivated vaccine EXCEPT seasonal live attenuated influenza vaccine.

Prior Vaccination or Illness

Should I get vaccinated against 2009 H1N1 if I have had flu-like illness since the Spring of 2009?

The symptoms of influenza (flu-like illnesses) are similar to those caused by many other viruses. Even when influenza viruses are causing large numbers of people to get sick, other viruses are also causing illnesses. Specific testing, called "RT-PCR test," is needed in order to tell if an illness is caused by a specific influenza strain or by some other virus. This test is different from rapid flu tests that doctors can do in their offices. Since most people with flu-like illnesses will not be tested with RT-PCR this season, the majority will not know whether they have been infected with 2009 H1N1 flu or a different virus.

Therefore, if you were ill but do not know if you had 2009 H1N1 infection, you should get vaccinated if your doctor recommends it. So, most people recommended for 2009 H1N1 vaccination should be vaccinated with the 2009 H1N1 vaccine regardless of whether they had a flu-like illness earlier in the year. If you have had 2009 H1N1 flu, as confirmed by an RT-PCR test, you should have some immunity against 2009 H1N1 flu and can choose not to get the 2009 H1N1 vaccine. However, vaccination of a person with some existing immunity to the 2009 H1N1 virus will not be harmful. For more information on flu tests, see Influenza Diagnostic Testing During the 2009-2010 Flu Season.

Any immunity from 2009 H1N1 influenza infection or vaccination will not provide protection against seasonal influenza. All people who want protection from seasonal flu should still get their seasonal influenza vaccine.

Prevention

Are there other ways to prevent the spread of illness?

Take everyday actions to stay healthy.

- Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it.
- Wash your hands often with soap and water, especially after you cough or sneeze. If soap and water are not available, use an alcohol-based hand rub.
- Avoid touching your eyes, nose or mouth. Germs spread that way.

Stay home if you get sick. CDC recommends that you stay home from work or school and limit contact with others to keep from infecting them. CDC recommends that people with influenza-like illness remain at home until at least 24 hours after they are free of fever (temperature of 100° F [37.8°C] or more), or signs of a fever without the use of fever-reducing medications.

Follow public health advice regarding school closures, avoiding crowds and other social distancing measures. These measures are still important, even with the availability of the vaccine against 2009 H1N1 virus, because they can prevent the spread of other viruses that cause respiratory infections.

What about the use of antivirals to treat 2009 H1N1 infection?

CDC has issued interim guidance for the use of antiviral drugs for this season. CDC also has published Questions & Answers related to the use of antiviral drugs for this season.

Are natural remedies (also referred to as “complementary” or "alternative" medicine) recommended to prevent the 2009 H1N1 Influenza virus?

The first and most important step to prevent influenza is to get vaccinated. Vaccination stimulates an immune response using a killed or weakened virus that uses the body’s own defense mechanisms to prevent infection. CDC's current recommendations to protect against 2009 H1N1 virus do not include natural remedies as a sole prevention method. If you want to use a natural remedy to reduce symptoms, CDC recommends that you talk to your health care provider about options.

Alternative medicine should not be used as a replacement for proven conventional care, or to postpone seeing a doctor about a medical problem. The National Institutes of Health (NIH) provides information on specific

alternative options, including scientific information, potential side effects, and cautions for each.

The Federal Trade Commission (FTC) warns consumers to be cautious about products that claim to prevent, treat, or cure 2009 H1N1 influenza, specifically products like pills, air filtration devices, and cleaning agents can kill or eliminate the virus.

For complete document please visit the CDC website:
Recommendations for Vaccine against 2009 H1N1 Influenza Virus