

Seasonal Flu – Frequently asked questions

What is the aim of the seasonal flu immunisation policy?

The aim is to reduce the serious morbidity and mortality due to flu by immunising those people most likely to have a severe or complicated illness due to flu.

Who should be immunised?

All those in whom the disease is more likely to be a serious illness, so immunisation is recommended for: -

- All those aged 65 years and over;
- All those aged 6 months or over in a clinical risk group (those with chronic respiratory or heart disease, renal disease or diabetes mellitus and those who are immunocompromised);
- Those living in long-stay residential care homes or other long-stay care facilities where rapid spread is likely to follow introduction of infection and cause high morbidity and mortality (this does not include prisons, young offender institutions, university halls of residence etc);
- Those who are in receipt of a carer's allowance, or those who are the main carer for an elderly or disabled person whose welfare may be at risk if the carer falls ill. This should be given on an individual basis at the GP's discretion in the context of other clinical risk groups in their practice.

Why are these groups targeted?

Complications such as bronchitis and pneumonia are more common in those with underlying diseases such as those mentioned above, especially if they are also elderly. Flu related deaths are almost entirely in these groups. In long-stay residential accommodation influenza immunisation prevents rapid spread of infection causing outbreaks with high morbidity and mortality.

Why isn't the flu vaccine recommended for everyone?

Flu is not normally life threatening for healthy people, and the occasional bout of flu gives better long term protection than a flu vaccination. Immunising everyone would not represent the best use of current resources.

Can a GP immunise anyone else?

The final decision as to who should be offered immunisation is a matter for the patient's medical practitioner, based on the individual's medical history.

Why are you recommending health care workers are immunised?

We believe that it is appropriate to immunise frontline health care workers against flu to ensure that the services to treat the patients they care for are

maintained. Immunising health care workers is part of prudent winter planning for the NHS. It ensures they do not pass on flu to their patients, but should also help the NHS maintain staffing levels during a flu epidemic when both GPs and other health services are particularly busy and hard pressed.

Is the age recommendation likely to be extended in the future?

The current recommendations are based on existing evidence which shows clear benefits for those in the 'at risk' groups. DHSSPS policy on flu vaccination is regularly reviewed by an expert panel of the Joint Committee on Vaccination and Immunisation in the light of all relevant evidence

Influenza vaccine

Does the flu vaccine work?

Immunisation is one of the most effective health care interventions, and flu vaccines are highly effective in preventing illness and reducing hospital admissions and deaths from flu.

How do you know what type of flu to vaccinate against?

The World Health Organisation monitors the spread of influenza viruses world-wide, and recommends which virus strains to include in the vaccine to combat the likely prevalent strains.

Are there any side effects from the vaccine?

Influenza vaccine is usually well tolerated. There may be temporary soreness at the site of injection. Rarely the vaccine can cause fever and muscle aches lasting up to two days, and very rarely it has been associated with Guillan-Barre syndrome.

Can the vaccine cause flu?

No. Influenza vaccine contains no live virus and cannot therefore cause flu.

Is there anyone who should not be given a flu vaccine?

As the vaccine viruses are grown on eggs, people with severe allergy to hen eggs should not be given the vaccine.