



State of Louisiana
Department of Health and Hospitals

October 21, 2009

Dear Parent,

The Louisiana Department of Health and Hospitals (DHH) is encouraging all schools in Louisiana to have a H1N1 vaccination campaigns as additional means of reaching priority groups identified by the CDC. Influenza illness is widespread in Louisiana and is expected to continue through the fall and winter with a much higher incidence of illness than a regular flu season. There are vaccines to protect against both seasonal flu viruses and the H1N1 virus.

School aged children are at the highest risk of infection from 2009 H1N1. It is a national priority to get vaccine to children 6 months to 24 years of age as quickly as the vaccine becomes available. By vaccinating children, we can protect not only the children themselves, but significantly decrease overall spread within the community.

The H1N1 vaccine has been purchased by the federal government and is being provided free of charge to states. The vaccine itself will be at no-cost, but providers may charge a small fee for the doctor or nurse time. This is called the "administration" fee. Most insurance companies have agreed to cover this cost. **Vaccination is completely voluntary.** Parents will be provided vaccine information so they can make an informed decision about vaccination for their child. The H1N1 vaccine is available from private healthcare providers, community clinics and parish health units. Since many children in Louisiana are in schools, schools are a logical and convenient place to provide vaccine. In the upcoming weeks, you will receive additional communications about whether your child school has elected to participate in vaccinations. If your child attends a non-participating school there will be other means of receiving the vaccine as identified above.

The CDC website of www.cdc.gov and the DHH website of www.fighttheflula.com offer information on influenza illnesses, emergency warning signs, vaccine safety, guidance for protecting and talking with children and provide the most current information on the H1N1 outbreak.

Sincerely,

A handwritten signature in cursive script that reads "Jimmy Guidry, MD".

Jimmy Guidry, M.D.
State Health Officer/DHH Medical Director

2009 H1N1 Influenza Vaccine Screening and Consent Form

Section 1: Information about the Patient to Receive Vaccine (please print)

PATIENT'S NAME (Last)		(First)	(M.I.)	PATIENT'S DATE OF BIRTH month _____ day _____ year _____	
PARENT/GUARDIAN'S NAME , if applicable (Last)		(First)	(M.I.)	PATIENT'S AGE	PATIENT'S GENDER M / F
ADDRESS			DAYTIME PHONE NUMBER:		
CITY	STATE	ZIP			

Section 2: Screening for Vaccine Eligibility

If the patient has already been vaccinated with 2009 H1N1 influenza vaccine, indicate the number of doses and dates of vaccination.

- Dose 1 Date received: month ____ day ____ year _____ Form (please circle): nasal spray shot
 Dose 2 Date received: month ____ day ____ year _____ Form (please circle): nasal spray shot

The following questions will help us to know if the patient can get the 2009 H1N1 influenza vaccine. Please mark YES or NO for each question.

A. If you answer "NO" to all four of the following questions, the patient can probably get the influenza vaccine. If you answer "YES" to one or more of the following four questions, the patient may be able to get the 2009 H1N1 vaccine, but we would like discuss your options.

	YES	NO
1. Does the patient have a serious allergy to eggs?	<input type="checkbox"/>	<input type="checkbox"/>
2. Does the patient have any other serious allergies? Please list: _____	<input type="checkbox"/>	<input type="checkbox"/>
3. Has the patient ever had a serious reaction to a previous dose of flu vaccine?	<input type="checkbox"/>	<input type="checkbox"/>
4. Has the patient ever had Guillain-Barré Syndrome (a type of temporary severe muscle weakness) within 6 weeks after receiving a flu vaccine?	<input type="checkbox"/>	<input type="checkbox"/>

B. There are two kinds of 2009 H1N1 influenza vaccine. Your answers to the following questions will help us know which of the two kinds of vaccine to provide.

	YES	NO
1. Has the patient been vaccinated with any vaccine (not just flu) within the past 30 days? Vaccine: _____ Date given: month ____ day ____ year _____	<input type="checkbox"/>	<input type="checkbox"/>
2. Does the patient have any of the following: asthma, diabetes (or other type of metabolic disease), or disease of the lungs, heart, kidneys, liver, nerves, or blood?	<input type="checkbox"/>	<input type="checkbox"/>
3. Is the patient on long-term aspirin or aspirin-containing therapy (for example, does your child take aspirin every day)?	<input type="checkbox"/>	<input type="checkbox"/>
4. Does the patient have a weak immune system (for example, from HIV, cancer, or medications such as steroids or those used to treat cancer)?	<input type="checkbox"/>	<input type="checkbox"/>
5. Is the patient pregnant?	<input type="checkbox"/>	<input type="checkbox"/>
6. Does the patient have close contact with a person who needs care in a protected environment (for example, someone who has recently had a bone marrow transplant)?	<input type="checkbox"/>	<input type="checkbox"/>

Section 3: Consent

CONSENT FOR VACCINATION:

I have read or had explained to me the 2009-2010 Vaccine Information Statement for the 2009 H1N1 influenza vaccine and understand the risks and benefits.

I GIVE CONSENT for me or my child named at the top of this form to be to be vaccinated with this vaccine.

Signature of Patient/Parent/ Guardian _____

Date: month _____ day _____ year _____

Section 5: Vaccination Record

FOR ADMINISTRATIVE USE ONLY

Vaccine	Date Dose Administered	Route	Dose Number (1st or 2nd)	Vaccine Manufacturer	Lot Number	Name and Title of Vaccine Administrator
2009 H1N1	/ /	<input type="checkbox"/> IM <input type="checkbox"/> Intranasal				
2009 H1N1	/ /	<input type="checkbox"/> IM <input type="checkbox"/> Intranasal				

School Name: _____

School Parish: _____



Seasonal and 2009 H1N1 Flu: A Guide for Parents



Flu information

What is the flu?

The flu (influenza) is an infection of the nose, throat, and lungs caused by flu viruses. Flu viruses cause illness, hospital stays and deaths in the United States each year. There are many different flu viruses and sometimes a new flu virus starts spreading among people and making people sick.

What is 2009 H1N1 flu?

2009 H1N1 flu (sometimes called swine flu or novel flu) is a new and very different flu virus that is spreading worldwide among people. This flu season, scientists expect both 2009 H1N1 flu and seasonal flu to cause more people to get sick than a regular flu season. More hospital stays and deaths may also occur.

How serious is the flu?

Most people with 2009 H1N1 have had mild illness and have not needed medical care and the same is true of seasonal flu. However, the flu can be serious, especially for young children (risk is highest in children younger than 2 years) and children of any age who have certain chronic medical conditions. These conditions include asthma or other lung problems, diabetes, weakened immune systems, kidney disease, heart problems and neurological and neuromuscular disorders. Children with these conditions can have more severe illness from any flu, including from the 2009 H1N1 flu virus.

How does flu spread?

Both 2009 H1N1 flu and seasonal flu are thought to spread mostly from person to person through the coughs and sneezes of people who are sick with flu. People also may get sick by touching something with flu viruses on it and then touching their mouth, nose or eyes.

What are the symptoms of the flu?

Symptoms of seasonal flu and 2009 H1N1 flu can include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills, fatigue and sometimes vomiting and diarrhea. Some people sick with the flu will not have a fever.

How long can a sick person spread the flu to others?

People infected with seasonal and 2009 H1N1 flu shed virus and may be able to infect others from 1 day before getting sick to 5 to 7 days after. However, some people can shed virus for longer, especially children and people with weakened immune systems and people infected with 2009 H1N1 flu.

Protect your child

How can I protect my child against flu?

Get a seasonal flu vaccine for yourself and your child to protect against seasonal flu viruses.

Get a 2009 H1N1 vaccine for your child. Ask your doctor about whether you should get one too.

Take - and encourage your child to take - everyday steps that can help prevent the spread of germs. This includes:

- Cover coughs and sneezes with a tissue. Throw the tissue in the trash after you use it.
- Stay away from people who are sick.
- Wash hands often with soap and water. If soap and water are not available, use an alcohol-based hand rub.
- Avoid touching your eyes, nose and mouth. Germs spread this way.
- If someone in the household is sick, try to keep the sick person in a separate room from others in the household, if possible.
- Keep surfaces like bedside tables, surfaces in the bathroom, kitchen counters and toys for children clean by wiping them down with a household disinfectant according to directions on the product label.
- Throw away tissues and other disposable items used by sick persons in your household in the trash.

Is there a vaccine to protect my child from H1N1 flu?

A yearly seasonal flu vaccine is the first and most important step in protecting against seasonal flu. This vaccine is recommended for children 6 months through 18 years of age and all people who are close contacts (caregivers) of children younger than 6 months of age.

A vaccine against 2009 H1N1 flu also is being made. This vaccine is recommended for all children and young adults 6 months through 24 years of age. Other people, including close contacts of children younger than 6 months of age and adults with certain chronic medical conditions, are recommended for vaccination too. More information about the 2009 H1N1 flu vaccine and the seasonal flu vaccine is available on the CDC Web site.

Is there medicine to treat the flu?



Antiviral drugs can treat both seasonal flu and 2009 H1N1 flu. The priority use for these drugs this season is to treat people who are seriously ill (hospitalized) or people who are sick with the

flu and either have a medical condition or are in an age group that puts them at high risk of serious flu complications. Antiviral drugs can make people feel better and get better sooner and may prevent serious flu complications. These drugs need to be prescribed by a doctor and they work best when started during the first 2 days of illness. These drugs can be given to children.

What should I use for hand cleaning?

Washing hands with soap and running water (for as long as it takes to sing the "Happy Birthday" song twice) will help protect against many germs. If soap and water are not available, use an alcohol-based hand rub.



If your child is sick

What can I do if my child gets sick?

If your child is 5 years or older and otherwise healthy and gets flu-like symptoms, including a fever and/or

cough, consult your doctor as needed and make sure your child gets plenty of rest and drinks enough fluids.

If your child is younger than 5 (and especially younger than 2) or of any age and has a medical condition like asthma, diabetes, or a neurologic problem and develops flu-like symptoms, ask a doctor if your child should be examined. This is because younger children (especially children younger than 2) and children who have chronic medical conditions may be at higher risk of serious complications from flu infection, including 2009 H1N1 flu. Talk to your doctor early if you are worried about your child's illness.

What if my child seems very sick?

Even children who have always been healthy before or had the flu before can get a severe case of flu.

Call or take your child to a doctor right away if your child of any age has:

- Fast breathing or trouble breathing
- Bluish or gray skin color
- Not drinking enough fluids
- Severe or persistent vomiting
- Not waking up or not interacting
- Being so irritable that the child does not want to be held
- Flu-like symptoms improve but then return with fever and worse cough
- Has other conditions (like heart or lung disease, diabetes, or asthma) and develops flu symptoms, including a fever and/or cough.

Can my child go to school, day care or camp if he or she is sick?

No. Your child should stay home to rest and to avoid giving the flu to other children.

When can my child go back to school after having the flu?

Keep your child home from school, day care or camp for at least 24 hours after their fever is gone. (Fever should be gone without the use of a fever-reducing medicine.) A fever is defined as 100°F or 37.8°C.

For more information, visit www.cdc.gov or www.flu.gov or call 800-CDC-INFO



Talking to Children About the Flu (Novel H1N1): A Parent Resource

Concern over novel H1N1 flu and seasonal flu can make children and parents anxious. We know that this strain of flu spreads easily; what we don't know is how virulent or dangerous it may become. Acknowledging some level of concern, without panicking, is appropriate and can result in people taking actions that reduce the risk of illness. Helping children cope with anxiety regarding the flu requires providing prevention information without causing alarm.

Children look to adults for guidance on how to react to stressful events. If parents seem overly worried, children may panic. Parents should reassure their children that health and school officials are working hard to ensure that people throughout the country stay healthy. However, children also need factual, age appropriate information about the potential seriousness of disease risk and concrete instruction about how to avoid infection and spread of the virus. Teaching children positive preventive measures, talking with them about their fears, and giving them a sense of some control over their risk of infection can help reduce anxiety.

Specific Guidelines

Remain calm and reassuring. Your children will react to and follow your verbal and nonverbal reactions. What you say and do about the flu virus and current prevention efforts can either increase or decrease your child's anxiety. If true, emphasize to your children that they and your family are fine. Remind them that you and the adults at their school are there to keep them safe and healthy. Let your children talk about their feelings and help put their concerns into the appropriate perspective.

Make yourself available. Your children may need extra attention from you and may want to talk about their concerns and questions. Make time for them. Tell them you love them and give them plenty of hugs and kisses.

Know the symptoms of the flu and how it spreads. Symptoms of H1N1 flu include fever, sore throat, and cough. Some people also have a runny nose, fatigue, body aches, nausea, vomiting, and diarrhea. The virus is transmitted through the coughing or sneezing of people infected with the virus. People may also become infected by touching something with flu viruses on it and then touching their mouths or noses. The virus is not spread by eating pork or other foods.

Keep updated on vaccine availability. It's important to follow the advice of the federal, state, and local public health officials about vaccinating your children. An effective vaccine will be essential to preventing the spread of novel H1N1.

Review basic hygiene and healthy lifestyle practices. Encourage children to practice everyday good hygiene by washing their hands (multiple times a day for at least 20 seconds), by covering their mouths with a tissue when they sneeze or cough and throwing out the tissue immediately, and by not sharing food or drinks. These simple steps are very effective at preventing the spread of flu and other illnesses. Giving children guidance on what they can do to prevent infection gives them a greater sense of control over the flu and will help to reduce their anxiety. Encouraging children to eat a balanced diet, get enough sleep, and exercise regularly will help them develop a strong immune system to fight off illness.

Be honest and accurate. In the absence of factual information, children often imagine situations far worse than reality. Don't ignore their concerns, but rather explain that at the present moment the vast majority of people, even those who are sick, will be okay. Children can be told that there are many ways to avoid the virus and that doctors can help to treat people who do get sick. Contact your school nurse or pediatrician and/or check the www.flu.gov Web site for factual information.

Discuss new rules or practices at school. Many schools will be enforcing prevention habits. This might include more frequent hand washing or use of alcohol-based hand cleansers; for older children, schools may temporarily limit activities where students are in close proximity or sharing items. Your school nurse or principal will send information home. Be sure to discuss this with your child. Contact your school nurse with any specific questions.

Avoid excessive blaming. When tensions are high, some people exert excessive energy trying to assign blame. It is important to avoid stereotyping any one group of people as responsible for the virus. Bullying or negative comments made toward others should be stopped and reported to the school.

Monitor television viewing. Limit television viewing or access to information on the Internet. Constantly watching updates on the status of the flu virus can increase anxiety. Engage your child in games or other interesting activities instead. Developmentally inappropriate information can cause anxiety or confusion, particularly in young children.

Maintain a normal routine to the extent possible. Keeping to a regular schedule can be reassuring and promotes physical health. Encourage them to keep up with their schoolwork and extracurricular activities, but don't push them if they seem overwhelmed.

Communicate with your school. Let your school know if your child is sick, and keep them home. Talk to your school nurse, school psychologist, school counselor, or school social worker if your child is having difficulties as a result of anxiety or stress related to the flu. They can give guidance and support to your child at school.

Follow all instructions from your school.

Take Time to Talk

You know your children best. Let their questions be your guide as to how much information to provide. However, don't avoid giving them the information that health experts identify as critical to ensuring your children's health. Be patient; children and youth do not always talk about their concerns readily. Watch for clues that they may want to talk, such as hovering around while you do the dishes or yard work. It is very typical for younger children to ask a few questions, return to playing, then come back to ask more questions.

Keep Explanations Age Appropriate

- Early elementary school children need brief, simple information that should balance H1N1 flu facts with appropriate reassurances that their schools and homes are safe and that adults are there to help keep them healthy and to take care of them if they do get sick. Give simple examples of the steps people take every day to stop germs, such as washing hands.
- Upper elementary and early middle school children will be more vocal in asking questions about whether they truly are safe and what will happen if the H1N1 flu comes to their school or community. They may need assistance separating reality from fantasy. Discuss efforts of school and community leaders to prevent germs from spreading.
- Upper middle school and high school students are able to discuss the issue in a more in-depth (adult-like) fashion and can be referred directly to appropriate sources of H1N1 flu facts (easily accessed through www.flu.gov). Provide honest, accurate, and factual information about the current status of the H1N1 flu. Having such knowledge can help them feel a sense of control.

Suggested Points to Emphasize When Talking to Children

- Not everyone will get the flu. School and health officials are being especially careful to make sure as few people as possible get sick.
- Receiving the H1N1 vaccination is not unlike receiving other vaccinations needed to attend school.
- There are things we can do to stay healthy and avoid spreading disease, such as washing our hands, covering our mouths with a tissue when we sneeze or cough and throwing out the tissue immediately, and staying home when we don't feel well.
- Adults at home and school are taking care of your health and safety. If you have concerns, please talk to an adult you trust.
- It is important that all students treat each other with respect and not jump to conclusions about who may or may not have the flu.

For more information visit: www.flu.gov

August 2009

2009 H1N1 INFLUENZA VACCINE

LIVE, ATTENUATED
(the nasal spray vaccine)

WHAT YOU NEED TO KNOW

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis.

1 What is 2009 H1N1 influenza?

2009 H1N1 influenza (sometimes called Swine Flu) is caused by a new strain of influenza virus. It has spread to many countries.

Like other flu viruses, 2009 H1N1 spreads from person to person through coughing, sneezing, and sometimes through touching objects contaminated with the virus.

Signs of 2009 H1N1 can include:

- Fatigue
- Fever
- Sore Throat
- Muscle Aches
- Chills
- Coughing
- Sneezing

Some people also have diarrhea and vomiting.

Most people feel better within a week. But some people get pneumonia or other serious illnesses. Some people have to be hospitalized and some die.

2 How is 2009 H1N1 different from regular (seasonal) flu?

Seasonal flu viruses change from year to year, but they are closely related to each other.

People who have had flu infections in the past usually have some immunity to seasonal flu viruses (their bodies have built up some ability to fight off the viruses).

The 2009 H1N1 flu virus is a new virus strain. It is very different from seasonal flu viruses.

Most people have little or no immunity to 2009 H1N1 flu (their bodies are not prepared to fight off the virus).

3 2009 H1N1 influenza vaccine

Vaccines are available to protect against 2009 H1N1 influenza.

- These vaccines are made just like seasonal flu vaccines.
- They are expected to be as safe and effective as seasonal flu vaccines.
- They will not prevent “influenza-like” illnesses caused by other viruses.

- They will not prevent seasonal flu. *You should also get seasonal influenza vaccine, if you want protection from seasonal flu.*

Live, attenuated intranasal vaccine (or LAIV) is sprayed into the nose. **This sheet describes the live, attenuated intranasal vaccine.**

An **inactivated** vaccine is also available, which is given as a shot. It is described in a separate sheet.

The 2009 H1N1 LAIV does not contain thimerosal or other preservatives. It is licensed for people from 2 through 49 years of age.

The vaccine virus is attenuated (weakened) so it will not cause illness.

4 Who should get 2009 H1N1 influenza vaccine and when?

WHO

LAIV is approved for people from 2 through 49 years of age who are not pregnant and do not have certain health conditions (see number 5 below). Groups recommended to receive 2009 H1N1 LAIV first are healthy people who:

- are from 2 through 24 years of age,
- are from 25 through 49 years of age and
 - live with or care for infants younger than 6 months of age, or
 - are health care or emergency medical personnel.

As more vaccine becomes available, other healthy 25 through 49 year olds should also be vaccinated.

Note: While certain groups should not get LAIV – for example pregnant women, people with long-term health problems, and children from 6 months to 2 years of age – it is important that they be vaccinated. They should get the flu shot.

The Federal government is providing this vaccine for receipt on a voluntary basis. However, state law or employers may require vaccination for certain persons.

WHEN

Get vaccinated as soon as the vaccine is available.

Children through 9 years of age should get **two doses** of vaccine, about a month apart. Older children and adults need only one dose.

5 Some people should not get the vaccine or should wait

You should not get 2009 H1N1 LAIV if you have a **severe (life-threatening) allergy** to **eggs**, or to **any other substance in the vaccine**. *Tell the person giving you the vaccine if you have any severe allergies.*

2009 H1N1 LAIV should not be given to the following groups.

- children younger than 2 and adults 50 years and older
- pregnant women,
- anyone with a weakened immune system,
- anyone with a long-term health problem such as
 - heart disease - kidney or liver disease
 - lung disease - metabolic disease such as diabetes
 - asthma - anemia and other blood disorders
- children younger than 5 years with asthma or one or more episodes of wheezing during the past year,
- anyone with certain muscle or nerve disorders (such as cerebral palsy) that can lead to breathing or swallowing problems,
- anyone in close contact with a person with a *severely* weakened immune system (requiring care in a protected environment, such as a bone marrow transplant unit),
- children or adolescents on long-term aspirin treatment.

If you are moderately or severely ill, you might be advised to wait until you recover before getting the vaccine. If you have a mild cold or other illness, there is usually no need to wait.

Tell your doctor if you ever had:

- a life-threatening allergic reaction after a dose of seasonal flu vaccine,
- Guillain-Barré syndrome (a severe paralytic illness also called GBS).

These may not be reasons to avoid the vaccine, but the medical staff can help you decide.

2009 H1N1 LAIV may be given at the same time as most other vaccines. Tell your doctor if you got any other vaccines within the past month or plan to get any within the next month. H1N1 LAIV and seasonal LAIV should not be given together.

6 What are the risks from 2009 H1N1 LAIV?

A vaccine, like any medicine, could cause a serious problem, such as a severe allergic reaction. But the risk of any vaccine causing serious harm, or death, is extremely small.

The risks from 2009 H1N1 LAIV are expected to be similar to those from seasonal LAIV:

Mild problems:

Some children and adolescents 2-17 years of age have reported mild reactions, including:

- runny nose, nasal congestion or cough
- fever
- headache and muscle aches
- wheezing
- abdominal pain or occasional vomiting or diarrhea

Some adults 18-49 years of age have reported:

- runny nose or nasal congestion
- sore throat
- cough, chills, tiredness/weakness
- headache

Severe problems:

- Life-threatening allergic reactions to vaccines are very rare. If they do occur, it is usually within a few minutes to a few hours after the vaccination.
- In 1976, an earlier type of inactivated swine flu vaccine was associated with cases of Guillain-Barré Syndrome (GBS). LAIV has not been linked to GBS.

7 What if there is a severe reaction?

What should I look for?

Any unusual condition, such as a high fever or behavior changes. Signs of a severe allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

What should I do?

- **Call** a doctor, or get the person to a doctor right away.
- **Tell** the doctor what happened, the date and time it happened, and when the vaccination was given.
- **Ask** your provider to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form. Or you can file this report through the VAERS website at www.vaers.hhs.gov, or by calling **1-800-822-7967**.

VAERS does not provide medical advice.

8 Vaccine injury compensation

If you or your child has a reaction to the vaccine, your ability to sue is limited by law.

However, a federal program has been created to help pay for the medical care and other specific expenses of certain persons who have a serious reaction to this vaccine. For more information about this program, call **1-888-275-4772** or visit the program's website at:

www.hrsa.gov/countermeasurescomp/default.htm.

9 How can I learn more?

- Ask your provider. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call **1-800-232-4636 (1-800-CDC-INFO)** or
 - Visit CDC's website at www.cdc.gov/h1n1flu or www.cdc.gov/flu
 - Visit the web at www.flu.gov



DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION



2009 H1N1 INFLUENZA VACCINE

INACTIVATED (the “flu shot”)

WHAT YOU NEED TO KNOW

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis.

1 What is 2009 H1N1 influenza?

2009 H1N1 influenza (also called Swine Flu) is caused by a new strain of influenza virus. It has spread to many countries.

Like other flu viruses, 2009 H1N1 spreads from person to person through coughing, sneezing, and sometimes through touching objects contaminated with the virus.

Signs of 2009 H1N1 can include:

- Fatigue
- Fever
- Sore Throat
- Muscle Aches
- Chills
- Coughing
- Sneezing

Some people also have diarrhea and vomiting.

Most people feel better within a week. But some people get pneumonia or other serious illnesses. Some people have to be hospitalized and some die.

2 How is 2009 H1N1 different from regular (seasonal) flu?

Seasonal flu viruses change from year to year, but they are closely related to each other.

People who have had flu infections in the past usually have some immunity to seasonal flu viruses (their bodies have built up some ability to fight off the viruses).

The 2009 H1N1 flu is a new flu virus. It is very different from seasonal flu viruses.

Most people have little or no immunity to 2009 H1N1 flu (their bodies are not prepared to fight off the virus).

3 2009 H1N1 influenza vaccine

Vaccines are available to protect against 2009 H1N1 influenza.

- These vaccines are made just like seasonal flu vaccines.
- They are expected to be as safe and effective as seasonal flu vaccines.
- They will not prevent “influenza-like” illnesses caused by other viruses.
- They will not prevent seasonal flu. *You should also get seasonal influenza vaccine, if you want to be protected against seasonal flu.*

Inactivated vaccine (vaccine that has killed virus in it) is injected into the muscle, like the annual flu shot. **This sheet describes the inactivated vaccine.**

A **live, intranasal** vaccine (the nasal spray vaccine) is also available. It is described in a separate sheet.

Some inactivated 2009 H1N1 vaccine contains a preservative called thimerosal to keep it free from germs. Some people have suggested that thimerosal might be related to autism. In 2004 a group of experts at the Institute of Medicine reviewed many studies looking into this theory, and found no association between thimerosal and autism. Additional studies since then reached the same conclusion.

4 Who should get 2009 H1N1 influenza vaccine and when?

WHO

Groups recommended to receive 2009 H1N1 vaccine first are:

- Pregnant women
- People who live with or care for infants younger than 6 months of age
- Health care and emergency medical personnel
- Anyone from 6 months through 24 years of age
- Anyone from 25 through 64 years of age with certain chronic medical conditions or a weakened immune system

As more vaccine becomes available, these groups should also be vaccinated:

- Healthy 25 through 64 year olds
- Adults 65 years and older

The Federal government is providing this vaccine for receipt on a voluntary basis. However, state law or employers may require vaccination for certain persons.

WHEN

Get vaccinated as soon as the vaccine is available.

Children through 9 years of age should get **two doses** of vaccine, about a month apart. Older children and adults need only one dose.

5 Some people should not get the vaccine or should wait

You should not get 2009 H1N1 flu vaccine if you have a **severe (life-threatening) allergy to eggs**, or to **any other substance in the vaccine**. *Tell the person giving you the vaccine if you have any severe allergies.*

Also tell them if you have ever had:

- a life-threatening allergic reaction after a dose of seasonal flu vaccine,
- Guillain Barré Syndrome (a severe paralytic illness also called GBS).

These may not be reasons to avoid the vaccine, but the medical staff can help you decide.

If you are moderately or severely ill, you might be advised to wait until you recover before getting the vaccine. If you have a mild cold or other illness, there is usually no need to wait.

Pregnant or breastfeeding women can get inactivated 2009 H1N1 flu vaccine.

Inactivated 2009 H1N1 vaccine may be given at the same time as other vaccines, including seasonal influenza vaccine.

6 What are the risks from 2009 H1N1 influenza vaccine?

A vaccine, like any medicine, could cause a serious problem, such as a severe allergic reaction. But the risk of any vaccine causing serious harm, or death, is extremely small.

The virus in inactivated 2009 H1N1 vaccine has been killed, so you cannot get influenza from the vaccine.

The risks from inactivated 2009 H1N1 vaccine are similar to those from seasonal inactivated flu vaccine:

Mild problems:

- soreness, redness, tenderness, or swelling where the shot was given
- fainting (mainly adolescents)
- headache, muscle aches
- fever
- nausea

If these problems occur, they usually begin soon after the shot and last 1-2 days.

Severe problems:

- Life-threatening allergic reactions to vaccines are very rare. If they do occur, it is usually within a few minutes to a few hours after the shot.
- In 1976, an earlier type of swine flu vaccine was associated with cases of Guillain-Barré Syndrome (GBS). Since then, flu vaccines have not been clearly linked to GBS.

7 What if there is a severe reaction?

What should I look for?

Any unusual condition, such as a high fever or behavior changes. Signs of a severe allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

What should I do?

- **Call** a doctor, or get the person to a doctor right away.
- **Tell** the doctor what happened, the date and time it happened, and when the vaccination was given.
- **Ask** your provider to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form. Or you can file this report through the VAERS website at www.vaers.hhs.gov, or by calling **1-800-822-7967**.

VAERS does not provide medical advice.

8 Vaccine injury compensation

If you or your child has a reaction to the vaccine, your ability to sue is limited by law.

However, a federal program has been created to help pay for the medical care and other specific expenses of certain persons who have a serious reaction to this vaccine. For more information about this program, call **1-888-275-4772** or visit the program's website at: www.hrsa.gov/countermeasurescomp/default.htm.

9 How can I learn more?

- Ask your provider. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call **1-800-232-4636 (1-800-CDC-INFO)** or
 - Visit CDC's website at www.cdc.gov/h1n1flu or www.cdc.gov/flu
- Visit the web at www.flu.gov



DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION

