

## Q&A

### **Can the flu jab actually cause flu?**

No. The vaccine doesn't contain any live virus, so it cannot cause flu. Some people get 'flu-like symptoms' - a slight temperature and aching muscles for a couple of days afterwards. Their arm may feel a bit sore where they were injected.

Any other reactions are rare - flu jabs have a very good safety profile.

### **Do I need the flu vaccine if I had the H1N1 vaccine previously?**

Each year WHO makes recommendations about the strains to be included in influenza vaccines for the forthcoming winter. The seasonal flu vaccine contains the H1N1 flu strain antigen and the antigens of two other flu viruses that are predicted to be circulating this year. This is so that the vaccine provides protection against the **three** influenza strains that are predicted to be circulating this year, not just H1N1. JCVI has recommended that patients should have trivalent seasonal vaccine even if they had H1N1 vaccine last year. If they do not accept this advice, they will not be protected from the other two strains that are predicted to be prevalent this year. Furthermore, the duration of the protection provided by flu vaccines is uncertain; patients should therefore take the opportunity to boost their protection against H1N1 for the coming year.

### **Can I have a seasonal flu vaccine that does not contain H1N1?**

This year's seasonal flu vaccine contains three flu strains: the H1N1 flu strain antigen and the antigens of two other flu viruses that are predicted to be circulating this year. Each year WHO makes recommendations about the strains to be included in influenza vaccines for the coming winter. The influenza A (H1N1)v strain (swine flu) is expected to be the predominant influenza strain once again during the 2010/11 influenza season. For this reason, WHO recommended that this strain be included in the trivalent seasonal influenza vaccine for the 2010/11 influenza season.

Manufacturers follow the WHO advice on strains to include in seasonal vaccines and produce hundreds of millions of doses for the Northern Hemisphere by July of each year. All countries accept the vaccine that has been formulated in accordance with the WHO recommendations. There simply is no production of 'pick and choose' vaccines and it is unhelpful to the public to imply that there could be a choice of vaccine without a particular strain in it.

### **Has the vaccine from last year been used to make the vaccine for this year?**

No. The seasonal influenza vaccines for use this autumn have not been made by incorporating unused stocks of the H1N1 influenza vaccine. They contain the

H1N1 flu strain antigen and the antigens of two other flu viruses that are predicted to be circulating this year.

**How effective is the flu vaccine?**

Studies show that flu vaccines give about 70 to 80 per cent protection against flu infection. That is why it has been recommended to those aged 65 and over and those in an at risk groups. In older people, protection against infection may be lower, but there is good evidence showing that immunisation reduces complications, including bronchopneumonia, hospital admissions and deaths.

**Should health staff who had the H1N1 last year October 2009 have the combined vaccine currently being offered in Winter 2010?**

The fact that some staff may have had the H1N1 swine flu vaccine last year does not affect advice that they should receive this year's trivalent seasonal flu vaccine. There are no contraindications to receiving the trivalent seasonal flu vaccine (which contains an H1N1 flu strain) this season if a patient has previously received the H1N1 vaccine.

**Should pregnant women get the flu jab?**

Pregnant women have not routinely been offered seasonal influenza vaccine in the past unless they were in a clinical risk group. However, there is good evidence that **all** pregnant women are at increased risk from complications if they contract the H1N1 (swine flu) virus. In light of this, pregnant women in clinical risk groups will continue to be offered the seasonal influenza vaccine as usual. But in addition, those pregnant women who are not in a clinical risk group and who have not already received a dose of H1N1 swine influenza vaccine will be offered the trivalent seasonal influenza vaccine this season.

GPs should also consider on an individual basis the clinical needs of all their patients.

**Is this year's seasonal influenza vaccine safe for pregnant women?**

This year's seasonal flu vaccines are expected to have a similar safety profile to previous seasonal vaccines. These are safe in pregnancy and there is no reason to suspect that incorporation of the 'swine flu' antigen into the vaccine carries any specific risks. Monovalent (single strain) swine flu vaccines were administered to at least half a million pregnant women across Europe during the pandemic with no evidence of any specific safety risks.

**How safe is the trivalent (seasonal) vaccine?**

Patients should be aware that there is no reason to suspect that the inclusion of the H1N1 swine influenza strain in this year's seasonal influenza vaccine will affect the established safety profile of these vaccines. They contain the H1N1 flu strain antigen and the antigens of two other flu viruses that are predicted to be circulating this year. This is in order that the vaccines provide protection against the three influenza strains that are predicted to be circulating this year.

The safety of swine flu vaccines has been thoroughly reviewed by the Medicines and Healthcare products Regulatory Agency (MHRA) and the UK Government's independent expert advisory committee, the Commission on Human Medicines (CHM). More than six million doses have been given in the UK, with more than 30 million given across Europe. The CHM reviewed the UK safety experience with swine flu vaccines in July and advised that despite substantial usage over a very short time period, and based on both UK and EU/worldwide data, no significant safety issues have been identified and the safety profile is reassuring. There is no evidence to indicate that any H1N1 flu vaccine has caused the death of any patients.

Tens of millions of more doses of various different H1N1 flu vaccines have been given throughout the world over the past year. No serious new risks have been identified and the safety profile is broadly similar to that of seasonal influenza vaccines. The H1N1 flu component has been included in all seasonal flu vaccines this year in all countries, including the vaccines recently used in the southern hemisphere.