

**VCH Influenza Campaign 2020-2021 (UPDATED OCT 20, 2020)
For Public Health Immunizers:
Frequently Asked Questions from the Public**

1. What is in the influenza vaccine this year?

2020-2021 seasonal trivalent and quadrivalent vaccines help protect against the following strains:

- **New** - A/Guangdong-Maonan/SWL1536/2019 (H1N1)pdm09-like virus
- **New** - A/Hong Kong/2671/2019 (H3N2)-like virus
- **New** - B/Washington/02/2019 (B/Victoria lineage)-like virus
- B/Phuket/3073/2013 -like virus (in quadrivalent vaccines only)

2. What products are available for the 2020-2021 influenza season?

QIV	TIIV	TIIV 65 +
FluLaval Tetra Flumist (LAIV nasal spray)	Fluviral Agriflu	Fluzone HD (Residents of LTCF or Assisted Living only) Fluad

3. When will the flu shot be available?

Influenza vaccines have started to be distributed to physicians and pharmacists. Long-term care facilities and Workplace Health have already received vaccine. Public health mass clinics will begin mid-October to mid-December 2020.

4. Where can I get a flu vaccine?

- At a VCH Public Health clinic*
- With your family physician
- At a walk-in clinic
- At a pharmacist**
- At a travel clinic including VCH Travel Clinic

*For VCH Public Health clinics, go to <http://www.vch.ca/public-health/communicable-diseases-immunizations/flu-shots-flu-clinics>. Please see details on each clinic as some are on a drop-in basis and others are by appointment.

**For clinics at pharmacies, go to <https://immunizebc.ca/clinics/flu#8/49.246/-123.116>

5. I have already received a trivalent influenza vaccine this season. Should I get a dose of the quadrivalent influenza vaccine as well?

No. Receiving more than one dose of influenza vaccine in the same season is not recommended, except for those children 6 months to 8 years receiving their influenza vaccine for the first time.

6. If I get the flu vaccine every year, will it continue to protect me?

Yes. Many studies have shown that people who receive the flu shot are better protected against seasonal influenza than those who are not vaccinated. There are a few studies that have detected reduced amount of protection among those who are immunized annually against influenza. The reasons for this effect are not understood. However, the same studies show that vaccinated people are always better off than unvaccinated people regardless of prior history of immunization. The National Advisory Committee on Immunization (NACI) has reviewed these studies and continues to recommend that people get their annual influenza vaccine.

7. Is FluMist® available this season?

Yes. **FluMist®** is available in British Columbia for the 2020-2021 influenza season, and will be publicly-funded for those eligible.

8. Can FluMist® be given at the same time as other live vaccines?

Yes. **FluMist®** can be given concomitantly with, or any time before or after any other live vaccine.

9. Should I be concerned about the effectiveness of FluMist®?

No. The National Advisory Committee on Immunization (NACI) concluded that the current evidence is consistent with Live-Attenuated Influenza Vaccine (LAIV) providing comparable protection against influenza to that shown by the injectable Influenza vaccine. This conclusion comes after careful review of the available Canadian and international LAIV vaccine efficacy data over many influenza seasons.

For more information please see NACI Statement on Seasonal Influenza vaccine 2020/2021 at <https://www.canada.ca/en/public-health/services/publications/vaccines-immunization/canadian-immunization-guide-statement-seasonal-influenza-vaccine-2020-2021.html#IV2>

10. If my child is currently on an antiviral against influenza (eg. Oseltamivir), can FluMist® also be given at the same time?

No. Since antivirals against influenza interfere with the immune response to FluMist®, FluMist® should not be given to individuals while on these antivirals. Such individuals should receive the inactivated influenza vaccine.

11. Is Fluzone HD® (High Dose) publicly funded for seniors for the 2020-2021 season?

Yes. Fluzone HD® was purchased by the province and will be publicly funded for those 65 years and older living in Long-term Care Facilities and Assisted Living Facilities only. Fluzone HD® is recommended by NACI, and is expected to provide superior protection compared to standard-dose TIV. For those community dwelling seniors who do not qualify for publicly-funded Fluzone HD®, they should be offered Fluvad, Agriflu or Fluviral. Alternatively, Fluzone HD® is available for purchase at your local pharmacy or travel clinic, including VCH Travel Clinic.

12. What is the difference between Fluzone® Quadrivalent and Fluzone® High-Dose (HD) vaccines?

Fluzone® Quadrivalent is a flu vaccine indicated for children 6 months to 17 years of age to protect against four strains of the flu; two A strains and two B strains.

Fluzone® HD is a trivalent inactivated influenza vaccine that contains four times the amount of antigen compared to regular flu vaccines. The additional antigen amount is intended to create a stronger immune response in the person getting the vaccine. In Canada, this vaccine is approved for adults 65 years of age and older.

For more information on Fluzone® HD, please see the BCCDC Q&A (updated August 2020):

http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Immunization/Vaccine%20Info/FluzoneHD_QandA.pdf

13. Can seniors get the ‘double’ dose of Fluzone® Quadrivalent?

No. Double dosing influenza vaccine for seniors is not recommended. There are a number of differences between the two vaccine products and the pediatric vaccine Fluzone® Quadrivalent is intended for children 6 months to 17 years of age.

14. Can a client receive Fluzone® HD after they received TIV?

No. Only one dose of influenza vaccine is recommended for adults. Thus, if client has already received TIV, Fluzone® HD is not needed in the same season.

15. At a mass flu clinic, if a preferred product by age is not available, what would be the recommendation?

Regardless of the vaccine product chosen, any individual six months of age and older is recommended to get the flu shot. Only one dose is needed. Given that they made the appointment with public health and took the time to come, we recommend they be immunized using the flu products available so an immunization opportunity is not lost. They can then take the time to consider additional information and have a plan in place for subsequent seasons.

16. Is there a non-egg based, non-animal matter influenza vaccine option for Vegan individuals?

Vegan vaccines (non-egg based, non-animal matter) against influenza are not available in Canada. Flublok® is the only recombinant influenza vaccine on the market that does not use eggs in any part of the manufacturing process. It is licensed by the FDA for use in Adults 18 years of age and older. It is only available in the US and can be purchased at select pharmacies. Individuals wanting this vaccine would have to travel to the US to purchase this vaccine on their own.

Note: This product is considered an acceptable alternative for the VCH Influenza Prevention Policy.

For Flublok® locator (in the USA only) see the following map for health care sites and pharmacies offering this vaccine: <http://www.fluzone.com/locator-map.cfm>

17. What if our clinic setting cannot maintain the proper infection prevention and control measures (eg. physical distancing) in waiting areas for the post-vaccination 15 minute observation period given the volume of individuals seeking immunization?

It is highly recommended that influenza vaccination clinics implement appropriate COVID safety precautions including physical distancing and other infection prevention and control measures. NACI recommends that a 15-minute post-vaccination observation period should be maintained even during the COVID-19 pandemic (Strong NACI recommendation)

NACI recommends that a shorter* post-vaccination observation period, between 5 to 15 minutes after influenza immunization, may be considered during the COVID-19 pandemic when appropriate physical distancing in post-vaccination waiting areas cannot be maintained due to the volume of individuals seeking immunization (Discretionary NACI recommendation)

***A shorter observation period may be considered only if the vaccine recipient meets the following conditions:**

- Past history of receipt of influenza vaccine and no known history of severe allergic reactions (including anaphylaxis)
- No history of other immediate post-vaccination reactions (eg. syncope with or without seizure) after receipt of any vaccines
- The vaccine recipient is accompanied by a parent/guardian (in the case of a child) or responsible adult who will act as a chaperone to monitor the vaccine recipient for a minimum of 15 minutes
- The vaccine recipient will not be operating a motorized vehicle, self-propelled or motorized wheeled transport (eg. bicycle, scooter) for a minimum of 15 minutes after vaccination (can wait in parking lot for the total 15 minutes)
- The vaccine recipient/responsible adult knows when and how to seek post-vaccination advice and medical service if required
- The vaccine recipient and parent/guardian/adult responsible agree to remain in the waiting area for the reduced observation period