Inactivated Influenza Vaccine

(This information is current for the 2024-25 influenza season)

Note: The US transitioned to quadrivalent influenza vaccine during the 2013-2014 flu season. For 2024-2025 onward, the influenza B/Yamagata vaccine component is being removed because influenza B/Yamagata viruses have not been detected after March 2020, using global surveillance for actively circulating influenza viruses. All flu vaccines for use in the U.S. for the 2024-2025 will be trivalent.

Vaccine Description	Brands: Quadrivalent: Afluria® (IIV3), Fluarix® (IIV3), FluBlok (IIV3), Flucelvax® (ccIIV3), FluLaval® (IIV3), Fluzone® (IIV3) [Fluzone® comes in Northern & Southern Hemisphere formulations] Cell Cultured-Based: Flucelvax® (ccIIV3) High Dose: Fluzone® High-Dose (HD-IIV3) Adjuvanted: Fluad® (aIIV3) Recombinant: FluBlok® (RIV3) Some brands contain egg protein or thimerosal*. Additionally, the tip cap and the rubber plunger of the needleless prefilled syringes may contain latex (see package insert). *Thimerosal content varies. Preservative-free formulations are available.	
Dose & Route	Dose: 0.5 mL Route: IM.	
Indications	 All persons aged 6 months and older who do not have a contraindication should receive the age-appropriate formulation of inactivated influenza vaccine (IIV) or recombinant influenza vaccine (RIV). (Note: healthy, non- pregnant persons 2 through 49 years of age without high risk health conditions can receive IIV or LAIV*) Pregnant women and women who might become pregnant in the upcoming influenza season should receive IIV ACIP now recommends that adults aged 65 years and older preferentially receive HD-IIV3, RIV3, or aIIV3; if these are unavailable, any ageappropriate flu vaccine should be administered. *Live Attenuated Influenza Vaccine - It is important to review CDC/ACIP guidelines for LAIV use before each flu season. 	
Administration Schedule by route	Dose	Recommended Interval
Adults IM	0.5 mL	Annually in the fall (Southern Hemisphere vaccine given April-Sept.)
Contraindications	History of a severe allergic reaction (e.g., anaphylaxis) or diagnosed allergy to a previous dose or component of any influenza vaccine is a contraindication to that same influenza vaccine type/platform (e.g., eggbased [IIV, aIIV], cell culture-based [ccIIV], recombinant [RIV], or live attenuated [LAIV]). Per ACIP recommendations, other flu vaccine types may be considered with appropriate precautions.	

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(continued)

Precautions	 Moderate or severe acute illness with or without fever History of Guillain-Barré syndrome within 6 weeks of a previous influenza vaccination History of a severe allergic reaction to a previous dose of one type of influenza vaccine is a precaution to use of the others
Special Considerations	 Immunization providers should check FDA-approved seasonal influenza vaccines prescribing information for the most up-to-date information, including (but not limited to) indications, warnings, contraindications, and precautions. Package inserts are available at https://health.mil/flu. For those assigned to an area designated as a Southern Hemisphere influenza zone April through September, the Southern Hemisphere formulation of Fluzone may be used. Afluria® is licensed for administration by jet injector for persons aged 18 through 64 years only. Once the stopper of the multi-dose vial has been pierced, the vial must be discarded either at the expiration date on the vial or within 28 days — see the package insert for specific guidance. Fluad® includes an adjuvant. It is important to review CDC/ACIP guidelines for LAIV use before each flu season Vaccines may be less effective in immunocompromised persons. ACIP recommends that all persons ages ≥6 months with egg allergy should receive influenza vaccine. Any influenza vaccine (egg based or non-egg based) that is otherwise appropriate for the recipients age and health status can be used. ACIP recommends high-dose inactivated (HD-IIV3) and adjuvanted inactivated (allV3) influenza vaccines as acceptable options for influenza vaccination of solid organ transplant recipients aged 18 through 64 years who are on immunosuppressive medication regimens, without a preference over other age-appropriate IIV3s or RIV3. See Storage and Handling Section

- Patient screening: www.health.mil/fluscreening
- Standing orders: <u>www.health.mil/standingorders</u>
- VIS: http://www.cdc.gov/vaccines/hcp/vis/vis-statements/flu.html
- Additional education may be found at <u>www.health.mil/flu</u>

FACTOID: Influenza (the flu) is a contagious respiratory illness caused by influenza viruses. Some people, such as people 65 years and older, young children, and people with certain health conditions, are at higher risk of serious flu complications.

Source: https://www.cdc.gov/flu/about/index.html