Influenza vaccines are one of the most effective ways to protect people from contracting illness during influenza epidemics and pandemics. The Pandemic Influenza A / H1N1 2009 is a new flu virus, and virtually everyone is susceptible to infection. These vaccines are recommended especially for high risk groups and will boost immunity against the new influenza virus.

**USE OF THE PANDEMIC INFLUENZA A / H1N1 VACCINES**

**How is the vaccine administered?**

Vaccines are administered by injection into the upper arm (deltoid) for older children and adults. In infants and younger children the thigh is the preferred site for the vaccine shot.

**How many doses of the vaccine do people need?**

Immunization experts recommend a single dose of vaccine in adults and children over the age of 6 months.

**Is there anyone who should NOT get the pandemic vaccine?**

Yes. As general rule, vaccines should not be administered to:
- People with a history of anaphylaxis (or hypersensitive reactions), or other life-threatening allergic reactions to any of the constituents or trace residues of the vaccine;
- People with history of a severe reaction to previous influenza vaccination;
- People who have severe (life threatening) allergy to chicken eggs.
- People who have developed Guillain-Barré syndrome (GBS) within 6 weeks of getting an influenza vaccine;
- Children less than 6 months of age (inactivated influenza vaccine is not approved for this age group);
- People who have a moderate-to-severe illness with a fever (they should wait until they recover to get vaccinated).

**Can the pandemic influenza vaccine be administered simultaneously with other vaccines?**

**What about with the seasonal influenza vaccine?**

The influenza vaccine can be given at the same time as other injectable, non-influenza vaccines, but the vaccines should be administered at different injection sites.

**Will pandemic influenza vaccines protect against other influenza viruses, such as the seasonal influenza?**

The pandemic influenza vaccines are not expected to provide protection against other influenza viruses.

**Is there a risk of catching illness from the vaccine itself?**

The vaccines contain killed viruses or parts of viruses, which cannot cause disease. The vaccines can cause some flu-like side effects (e.g. muscle ache, fever) but the symptoms, sometimes associated with vaccination, are generally less pronounced and of much shorter duration.

**Why do some people who have been vaccinated still get influenza?**

Vaccinated individuals can also get influenza caused by a different strain of influenza virus, for which the vaccine does not provide protection. Finally, people who have received influenza vaccine can later have an illness, caused by other common viruses that are not influenza, but be mistaken for the flu. In all of these instances, a person could believe that the vaccine failed to protect them or that vaccine caused the disease when neither conclusion is accurate.

Influenza vaccines only become effective about 7 days after vaccination. Those infected shortly before (1 to 3 days) or shortly after immunization can still get the disease.
AVAILABILITY OF PANDEMIC (H1N1) 2009 VACCINES

Will there be enough pandemic influenza vaccine for everyone?

No country can immunize its total population for any influenza virus. The Ministry of Health has ordered a total of 260,000 vaccines. The first batch of 50,000 has arrived and the balance will be arriving in the next days and weeks. These vaccines will be distributed on a phased basis to members of the national population highlighted as recommended groups for early immunization. Additional persons will receive immunization as more vaccines become available.

Who will receive priority for vaccination?

Persons identified as having an increased risk of developing infection will be immunized first against the pandemic virus. These groups of persons include frontline health care workers, national security forces, essential decision makers, pregnant women, children 6 months to 5 years of age and other high risk groups, such as persons with respiratory complications, immuno-compromised conditions, and chronic communicable diseases.

Phase 1 of vaccine administration will occur in three (3) stages in both Trinidad and Tobago.

During the first stage vaccines will be administered to healthcare workers and national security workers (including workers at Ports, the Airports, Army, Police, Fire, Immigration, Customs and Excise and Prisons) and essential decision makers. These groups do NOT have to visit health clinics for the vaccine. Ministry of Health staff will be sent to these locations to administer the vaccine.

During the second stage, vaccines will be administered to pregnant women and children 6 months – 5 years of age. Again, these persons do NOT have to go into the health care clinics just for the sole purpose of getting the vaccine. They will receive the vaccines when they visit their health care providers at their next scheduled visit.

During the third stage vaccines will be administered to other high risk groups, including persons with chronic respiratory conditions, chronic communicable diseases and immuno-compromised conditions, during their scheduled visits at the health care facilities.
The Ministry of Health has already notified local medical bodies of these distribution plans. Arrangements are in place for vaccines to be distributed to both public and private health care providers based on need and availability, so that they can administer them to their pregnant and pediatric clients, as well as their patients in the high risk groups.

Citizens are advised NOT to go to health centres seeking vaccines. The Ministry of Health in collaboration with the private health sector and other authorities have identified the priority groups and Ministry officials will be approaching all groups for proper administration of the vaccines through our Expanded Programme on Immunization.

**Why were these groups chosen to be the first to receive the vaccine?**

National security workers come into constant daily contact with large numbers of the population. This places them at a higher risk of infection and of transmitting the infection to other members of the population.

Frontline health care and social workers are at increased risk of infection and of transmitting that infection to vulnerable patients under their care.

**How will I receive the vaccine if I receive private health care?**

Vaccines will be distributed to both public and private health care providers to administer to their pregnant and pediatric clients, as well as their patients in the high risk groups. As stated above, members within these Phase 1 groups do not need to rush to a health clinic or doctor’s office. The Influenza A / H1N1 2009 vaccine will be given to these persons at their next scheduled medical visit.

**Will I be immunized if a person in my immediate family is infected with the Influenza A / H1N1 virus?**

At this stage a person is already exposed to the virus and immunization is ineffective. However, each instance will be handled on a case by case basis.

**I am not a member of the Phase 1 groups of frontline health care workers, national security workers or a high risk group. What precautions should I practice until I receive the vaccination?**

Persons are advised to delay travel and to stay away from work or public places if ill. It is imperative that we all practice proper sanitary procedures: Wash your hands regularly, and if ill with flu-like symptoms, cough or sneeze into a handkerchief or sleeve.
Are there any precautions to take after being vaccinated?
No. Some persons may develop mild flu-like symptoms which over-the-counter flu medications will help relieve.

What is the length of vaccine effectiveness?
The vaccine will be effective for the existing strain of the Influenza A / H1N1 2009 virus. New influenza vaccinations are usually manufactured every year since different strains emerge over time.

What documents do I need to provide when receiving my H1N1 vaccine?
You MUST walk with your immunization card. The medical staff needs your immunization history which will indicate recent vaccinations received. Your immunization card will also be updated with the Influenza A / H1N1 2009 information.

SEASONAL INFLUENZA VACCINES AND PANDEMIC (H1N1) 2009

Will current seasonal influenza vaccines offer any protection against pandemic influenza infection?
So far, evidence suggests that current seasonal influenza vaccines will not be protective against pandemic influenza.

On the other hand, will pandemic influenza vaccines protect against other influenza viruses, such as the seasonal influenza?
The pandemic vaccines are not expected to provide protection against other influenza A or B viruses that are different from the pandemic (H1N1) 2009. Influenza viruses constantly undergo genetic changes and require vaccines that match the circulating influenza strains to be effective, so seasonal influenza vaccines have to be modified annually.

Should people continue to be vaccinated against seasonal influenza?
Yes. Every year many people suffer and die from seasonal influenza, particularly the elderly, children younger than age 2 and people with other
medical conditions or weakened immune systems. People should therefore continue to seek seasonal influenza vaccination like any other year.

SAFETY OF THE INFLUENZA A / H1N1 2009 VACCINES

Is the Pandemic Influenza A / H1N1 2009 vaccine safe?

Influenza vaccinations inclusive of Influenza A / H1N1 have been administrated for many years. Each year, influenza viruses shift (slight mutation) which necessitates the release of a new vaccine to treat the new modified influenza virus. This is exactly what is happening with the 2009 H1N1 virus, which is just slightly different from the 2008 and other previous versions.

Outcomes of studies completed to date suggest that the Influenza A / H1N1 2009 vaccines are as safe as seasonal influenza vaccines. Side effects seen so far are similar to those observed with seasonal influenza vaccines.

What about safety for pregnant women?

To date, studies do not show harmful effects from the pandemic influenza vaccine with respect to pregnancy, fertility, or a developing embryo or fetus, birthing or post-natal development. In view of the elevated risk for severe illness for pregnant women infected by the new influenza, in clinical studies, pregnant women are a group that should be vaccinated against infection, as supplies allow.

Recent studies show that infected pregnant women have a 10 times higher chance to require hospitalization in intensive care units than infected persons in the general population, and 7% to 10% of hospitalized cases are women in their second or third trimester of pregnancy. The benefits of vaccination far outweigh the risks. Additional studies on pregnant women following immunization are continuing.

What about my child's safety from a reaction?

The most frequent vaccine reactions in children following influenza immunization are similar to those seen after other childhood immunizations (such as soreness at the injection site, or fever). A child's health care
provider or vaccinator can advise on the most appropriate methods for relief of the symptoms. If there are concerns about a child's safety from a reaction, consult a health care provider as soon as possible.

Please note that a child may suffer from a condition not related to immunization, which coincidentally developed after vaccination.

TESTING AND APPROVAL

What kind of testing is being done to ensure safety?

Because the pandemic virus is new, both non-clinical and clinical testing is being done to gain essential information on immune response and safety. The results of studies reported to date suggest the vaccines are as safe as seasonal influenza vaccines.

The Ministry of Health will continue to monitor for ESAVI’s (Events supposedly attributed with vaccine immunization).

Who approves pandemic vaccines for use?

National authorities for medicines in each individual country approve (or license) pandemic influenza vaccines for use. The country of origin of the manufacturer issues a license to the manufacturing company to produce the vaccines. For the manufacturer to export the vaccines to other countries they also need to acquire an export license. Further, the vaccines that are being imported to Trinidad and Tobago through PAHO have been reviewed for their safety and efficacy and have been subsequently approved by WHO/PAHO. Finally, the Chemistry, Food and Drug Division of the Ministry of Heath approved the entry and public use of the Pandemic Influenza A / H1N1 vaccine.

SIDE EFFECTS OF THE INFLUENZA A / H1N1 2009 VACCINES

What are the expected side effects of the new vaccines?

Some side effects can be associated with influenza vaccination. Some local reactions may be soreness, swelling and redness at the injection site, and less often, fever, muscle- or joint- aches or headache. These symptoms are generally mild, do not need medical attention and last 1 to 2 days.
Fever, aches and headaches can occur more frequently in children compared to elderly people. Rarely, such influenza vaccines can cause allergic reactions such as hives, rapid swelling of deeper skin layers and tissues, asthma or a severe multisystem allergic reaction due to hypersensitivity to certain vaccine components.

ADVERSE EVENTS

Have there been any reports of serious reactions, or adverse events, to pandemic vaccines?

As of late October, there is no indication at this stage that unusual adverse events are being observed after immunization, according to clinical trials and adverse event monitoring during deployment of vaccines in early introducer countries. As stated earlier, The Ministry of Health will continue to monitor for ESAVI’s (Events supposedly attributed with vaccine immunization).

What happens when an adverse event is reported?

Individual reports are scrutinized for completeness and possible errors. In some instances, reports need to be validated and additional details must be checked. If an analysis indicates a potential problem, further studies and evaluation are conducted and all relevant national and international authorities are informed. Decisions for appropriate measures are then made to ensure continuing safe use of the vaccine.

Can influenza vaccination cause Guillain Barré syndrome?

No association has been found between Guillain Barré syndrome (GBS) and either seasonal or pandemic influenza vaccines.