1. **What is immunisation?**

Immunisation uses the body's natural defence mechanism – the immune system – to build resistance to an infection. The vaccine contains inactive particles of the virus that are used to stimulate your body's own immune response without causing you to actually contract the virus itself.

2. **What is influenza - “The Flu?”**

- A highly infectious viral illness
- Caused by the influenza virus
- Tends to be much more severe than the common cold
- Symptoms include rapid onset of fever, muscle aches, joint pain, headache, sore throat, cough and a generalised feeling of being unwell
- Lasts up to 10 days
- Can be followed by a secondary illness e.g. pneumonia
- Peak time is winter
- Majority of cases can be prevented by immunization

Most people think that when they have a runny nose or a sore throat they have the “flu” but this is not usually the case. They usually have a common cold, which is a mild, short-term illness which, although inconvenient, rarely causes significant debility. The “cold” is caused by a range of viruses, which are different to the influenza virus. The influenza sufferer is often so unwell that they are confined to bed. It can last up to 10 days and can be complicated by a range of secondary problems including pneumonia and even death in high-risk individuals (e.g. the elderly or those with chronic illnesses). A flu outbreak occurs most years, but every 10 years or so, a major epidemic occurs in which larger numbers of the population are infected.

3. **How effective is the influenza vaccine?**

The influenza vaccination prevents approximately 60-70% of influenza infections¹ and influenza hospitalisations.²

4. **What are the symptoms of influenza?**

Influenza is a highly contagious respiratory viral illness. Influenza A and B are the major types of influenza viruses that cause human disease and affect people of all ages. Persons with influenza may have fever, cough, sore throat, fatigue, muscle aches, headaches, runny nose and watery eyes. Children may experience vomiting and diarrhoea in addition to these symptoms. Although the fever and body aches usually last for 3-5 days, a cough and fatigue may persist for two weeks or more.

5. **Who gets influenza?**

Anyone can get influenza, especially when it is widespread in the community. People who have pre-existing chronic diseases, especially of the heart or lungs, as well as the elderly or very young, are particularly susceptible to the complications associated with influenza infection, which can in some cases be fatal.

6. **How does the flu spread?**

The main way that influenza viruses are spread is from person to person in respiratory droplets of coughs and sneezes (this is called “droplet spread”). This can happen when droplets from a cough or sneeze of an infected person are propelled (generally up to one metre) through the air and deposited on the mouth or nose of people nearby.

The viruses can also be spread when a person touches respiratory droplets on another infected person or object (such as door handles, computers etc.) and then touches their own mouth or nose (or someone else's mouth or nose) before washing their hands.

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¹ For older people and those with chronic medical conditions, the vaccine may not be as effective.
² However, its implementation reduces the spread of the virus which can help reduce the number of people who have to go to hospital.
7. How can influenza and its complications be prevented?

Influenza vaccine is made each year to contain the influenza strains that are expected to cause illness that year. Influenza can be prevented with a high degree of success when a person receives the current influenza vaccine and that vaccine matches the prevalent virus strains that year. The degree of protection depends on the health and age of the person involved.

8. Do I need to be re-vaccinated if I had the vaccine last year?

The influenza vaccination provides protection for about one year. People who had the seasonal influenza vaccine anytime in 2016 still need be vaccinated in 2017 to ensure high levels of immunity.

9. What strains does the 2017 vaccine protect me against?

The 2017 quadrivalent vaccine protects against the four most likely flu strains to circulate in the Southern Hemisphere in 2017:

- **A (H1N1)**: an A/Michigan/45/2015 like virus
- **A (H3N2)**: an A/Hong Kong/4801/2014 (H3N2) like virus
- **B**: a B/Brisbane/60/2008 like virus
- **B**: a B/Phuket/3073/2013 like virus

10. How long does it take for me to be protected and how long does my protection last?

You will form antibodies to fight the flu around 3 – 14 days after receiving your immunisation. Your antibodies will peak at around 4 – 6 weeks – this is when you are most protected. Your antibodies will gradually fall but you will remain protected for around one year.

11. Why doesn’t the vaccinator wipe my arm with alcohol first?

It is no longer recommended to wipe the arm with alcohol first (unless the arm is visibly dirty) as it may interfere with the flu vaccine and may make vaccination more painful. Large scientific studies have shown no increased risk of side-effects or infection now that we no longer routinely clean the arm with alcohol. Your vaccinator will have cleaned their hands with hand sanitiser and in some cases they may wear gloves.

12. Who should not be given the vaccine?

Being a highly purified, inactivated vaccine, there are few contraindications to influenza vaccination:

- Anyone with a known allergy to the antibiotics: gentamicin, neomycin or polymyxin.
- Anyone with a known allergy to other components of the vaccine: polysorbate 80, octoxinol 9 and formaldehyde.
- Anyone with a severe allergy to eggs or chicken feathers (people who develop swelling of the tongue, lips or develop respiration distress or collapse when exposed to the above).
- Anyone with a present high fever ($\geq$37.5 degrees Celsius).
- After you have your influenza vaccine, your usual dose of some medicines may be affected. These medicines include: Carbamazepine, e.g. Tegretol (used in epilepsy or convulsions) *Phenobarbitone (used in epilepsy, or convulsions, anxiety or insomnia) *Phenytoin, e.g. Dilantin (used in epilepsy or convulsions) * Theophylline (used for asthma) * Warfarin (used to prevent blood clots). If you are on any of these medicines, please consult your Doctor ASAP to see if they wish to organise a blood test within a few days of your vaccination to check your levels of medication.
13. If I am travelling overseas should I get this vaccination before I go?

Yes. Anyone travelling overseas should get vaccinated. You should ideally try to be vaccinated no later than two days before you are due to travel, in case you have any side-effects that require advice or treatment.

14. If I am under 18 can I still have the vaccination?

SMG Health only conduct vaccinations on adults i.e. those over the age of 18 on the date of vaccination. Those under 18 years of age may still be able to get vaccinated through their local GP or pharmacy service as an alternative option, depending on their location and age.

15. I have a cold or have already had the flu this year. Can I still have a flu vaccination?

Usually we only delay the vaccination if your temperature is high, e.g. over 37.5 degrees Celsius. With a temperature this high, you would usually be too unwell to be at work and would feel quite hot. If you have a mild cold or have had it for more than two days, you probably do not have a high temperature and can have the vaccination. Even if you have already had the flu this year, you will still benefit from the vaccine as it will protect you against three other flu strains.

16. I am on antibiotics. Can I still have a flu vaccination?

Yes, the vaccine does not interact with any antibiotics so it is safe to have the vaccine while you are taking antibiotics.

17. I am allergic to penicillin. Can I still have a flu vaccination?

Yes, the vaccine does not contain any penicillin so it is safe to have the vaccine even if you are allergic to penicillin.

18. What are the possible side-effects?

Common possible side-effects include redness, soreness, itching, bruising or mild swelling at the injection site. This usually clears within 1-2 days. Sometimes a tender lump under the arm appears (a lymph gland) that may be present for several days. Occasionally people develop a mild fever within 1-2 days of the vaccination and occasionally muscle aches, headache or a general feeling of being unwell. This usually lasts no more than 1-2 days. An allergic reaction may occur in those allergic to vaccine components.

19. Are there any more serious side-effects?

There have been inconclusive reports of serious neurological disorders in people who have previously suffered from the severe nervous system disorder Guillain Barre Syndrome. Those who have had Guillain Barre Syndrome should contact SMG Health on 1300 657 644 or email info@smghealth.com.au so we can provide you with extra advice on Guillain Barre Syndrome and flu vaccination.

20. Does it reduce my natural immunity?

No. Vaccination does not reduce your natural immunity to infections – it acts as a “booster” to the immune system.

21. What if I am pregnant or am breastfeeding?

The vaccine is recommended in most circumstances for pregnant and breast-feeding women. However, SMG Health requests you discuss the potential benefits and risks of the vaccine with your doctor prior to the vaccination clinic, as well as with your immunisation nurse on the day.
22. Can you get influenza from a vaccination?

No, it is not possible to get influenza from a vaccine. The viruses in the vaccine are inactivated and incapable of causing influenza. Instead, the person is protected from influenza by antibodies that are formed by the immune system response to the vaccine. Generally, it takes about two weeks after vaccination for antibodies to develop in the body and provide protection against influenza virus infection. In the meantime you are still at risk of catching the flu.

23. What else can I do to avoid getting or spreading the flu or a cold?

- Avoid close contact with people who are sick
- When you are sick, keep your distance from others to protect them from getting sick too
- Cover your nose and mouth with a tissue when you cough or sneeze and dispose of the tissue in a rubbish bin after you use it
- Wash your hands regularly and thoroughly, especially after you cough or sneeze
- Don’t share eating and drinking utensils or food and drinks
- Regularly clean surfaces such as desks, taps and fridge doors, as flu viruses can live on these kinds of surfaces for a number of hours
- Avoid touching your eyes, nose or mouth as germs are commonly spread this way
- Boost your immune system with a balanced diet, exercise, adequate sleep and try to reduce stress

24. When should vaccination be carried out?

Vaccination is best carried out during March to May each year, before the onset of the peak season for flu (July to Sept).

For more information please contact SMG Health:

1300 657 644 | www.smghealth.com.au | info@smghealth.com.au

The information in this document has been sourced from the Flu Vaccinations Product Information, available at www.medicines.org.au as well as publically available government resources.