



TO IMMUNIZE OR NOT TO IMMUNIZE?

A Very Serious Question For The Flu Season

The “flu” is a respiratory illness that is caused by highly contagious influenza viruses with five to 20 percent of the U.S. population being infected each year. More than 200,000 Americans are hospitalized each flu season with serious complications from these viruses. Unfortunately, about 36,000 Americans die each year from complications of influenza.

The Most Effective Way of Preventing Influenza Is Yearly Vaccination

A variety of symptoms are associated with the flu with high fever, sore throat, fatigue, muscle pain, cough, and nasal congestion being the most common. Nausea, vomiting, and diarrhea may occur as well. Complications may include pneumonia and sinusitis. Infected individuals may be contagious for one day before they are even aware they are ill and for five days after developing symptoms.

The flu vaccine stimulates the body’s immune system to produce protective antibodies against the influenza viruses. Flu vaccine only protects us from influenza viruses; it will not protect us from other viruses that cause “flu-like” symptoms.

Two types of flu vaccine are available in the United States. An “inactivated” vaccine that contains killed strains of influenza viruses is administered as an injection. This flu shot is approved for people ages 6 months and older and may include healthy individuals as well as those with chronic medical conditions (asthma, diabetes, heart disease). The second available vaccine is administered as a nasal spray. This vaccine contains live influenza viruses that have been weakened so they will not cause the flu and may be used in healthy individuals from age 2 to 49 years. **Pregnant women should not receive the nasal spray flu vaccine.** The nasal spray flu vaccine should not be given to an individual who cares for people who have weak or compromised immune systems – such caregivers should receive the inactivated vaccine. Rarely, a person may experience mild flu-like symptoms following vaccination but s/he will not develop severe influenza illness.

People who *should* get vaccinated:

1. Children aged six months to 18 years.
2. Pregnant women.
3. Adults 50 years and older.
4. People of all ages who suffer from chronic medical conditions like heart disease, diabetes, and asthma.
5. People who live in long-term care facilities and nursing homes.
6. People who live with or care for individuals at high risk for flu complications:
 - a. Healthcare workers
 - b. Household contacts or persons at high risk for serious flu complications
 - c. Household contacts or out-of-home caregivers of children who are less than 6 months old (such babies are too young to be vaccinated).

People who *should not* be vaccinated:

1. People with severe allergy to chicken eggs.
2. Children less than six months of age.
3. People who have had a severe reaction to flu vaccine in the past.
4. People who developed Guillain-Barré syndrome within six weeks of getting a flu vaccine previously.
5. People who have a moderate to severe illness with fever should delay getting a flu vaccine until their symptoms improve significantly.

IF YOU ARE NOT SURE YOU CAN SAFELY RECEIVE A FLU VACCINE, PLEASE CONSULT YOUR PHYSICIAN BEFORE YOU ARE ACTUALLY VACCINATED!

Vaccination to prevent influenza may begin as early as September or as soon as vaccine is available. The vaccination period may continue through the fall season and even into December and January.