



Clinical bulletin 1 – increasing the uptake of seasonal flu vaccine 27 August 2015

For the attention of: GPs, practice nurses, all practice staff and pharmacists in Cumbria and the North East

1. Seasonal flu activity in 2014/15 was overall higher than in the last three flu seasons and activity persisted into March 2015. The predominant virus was influenza A (H3N2) with evidence of significant antigenic drift over the winter. This resulted in the flu vaccine having reduced effectiveness in the northern hemisphere 2014/15 season.

2. The 2015/16 flu vaccines all incorporate a new H3N2 component (as recommended by the World Health Organisation) which provides a better match to the drifted H3N2 strain seen in the northern hemisphere 2014/15 flu season.

3. In 2015/16 the following people are eligible for flu vaccination:

- those aged 65 years and over
- those aged six months to under 65 in clinical risk groups
- pregnant women
- all two, three and four year-olds
- all children of school years 1 and 2 age (all primary school aged children aged five and older in Gateshead, South Tyneside and Sunderland) [delivered by school nursing services]
- those in long-stay residential care homes
- carers
- frontline health and social care workers [commissioned/delivered via employers].

4. Full details: See tripartite letter – *The national flu immunisation programme 2015/16*. 27 March 2015. NHS gateway 03316

[https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/418428/Annual flu letter 24 03 15 FINALv3 para9.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/418428/Annual_flu_letter_24_03_15_FINALv3_para9.pdf)

5. National priorities and targets for 2015/16

- Reach or exceed 75% uptake in those aged 65 and over.
- Reach or exceed 75% uptake in frontline healthcare workers.
- Prioritise improvement in uptake in all clinical risk groups, and in particular:
 - Adults with chronic liver disease, neurological disease and learning disabilities
 - Children in all clinical risk groups
 - Pregnant women
- For the children's flu vaccination programme, the aim is 40-60% uptake (balanced across localities and sectors)

6. The vaccine of choice in children (order through ImmForm website):

- **Fluenz Tetra®** (a quadrivalent live attenuated intranasal influenza vaccine) should be used.
- **Fluarix™ Tetra** (a quadrivalent inactivated intramuscular influenza vaccine) will also be supplied for children with contraindications to the live vaccine.
- Care must be taken not to confuse the two 'Tetra' brands, especially as Fluarix™ Tetra is not licensed for use in children less than three years.

7. Vaccine supply for children

Centrally purchased flu vaccines (ordered through ImmForm) are available for each eligible cohort in the children's programme as follows:

Eligible cohort	Vaccine available: Children in clinical risk groups*	Vaccine available: Children <u>not</u> in clinical risk groups
Six months to less than two years old	Offer suitable inactivated flu vaccine.	Not applicable.
Two, three and four years olds (but not five years or older) on 31 August 2015	Offer LAIV (Fluenz Tetra). If Fluenz Tetra is medically contraindicated, then offer suitable inactivated flu vaccine.	Offer LAIV (Fluenz Tetra) (unless medically contraindicated).
Children of school years 1 and 2 age	Offer LAIV (Fluenz Tetra). If Fluenz Tetra is medically contraindicated, then offer suitable inactivated flu vaccine.	Offer LAIV (Fluenz Tetra) (unless medically contraindicated).
Children older than school year 2 age but less than 18 years old	Offer LAIV (Fluenz Tetra). If Fluenz Tetra is medically contraindicated, then offer suitable inactivated flu vaccine.	Not applicable.

Note: In the former pilot areas of Gateshead, South Tyneside & Sunderland, all children in school years 3 to 6 will continue to be offered LAIV.

8. Children in the clinical risk groups are more likely than other children to develop viral pneumonitis and secondary bacterial pneumonia, particularly if infected with the H1N1 virus. Hospitalisation, admission to a critical care unit, and death are more likely in children in the clinical risk groups. School nurses, health visitors and paediatricians are again asked to actively promote flu vaccination in their contacts with families of these children.

[Note that children in clinical risk groups aged two to less than nine years will require two doses of Fluenz Tetra® unless they have had a dose of any flu vaccine in previous years].

9. Seasonal flu vaccine should not be administered in the community to any baby under six months of age as it is not licensed and not recommended in the Green Book.

10. Women at any stage of their pregnancy are at greater risk of developing pneumonitis and other complications of flu. There is evidence that flu vaccination reduces the likelihood of prematurity and low birth weight associated with influenza infection during pregnancy. A number of studies show that flu vaccination during pregnancy provides passive immunity against flu to infants in the first few months of life. Midwives are again being asked to actively promote flu vaccination.

11. Practices are responsible for arranging vaccination for their own frontline healthcare staff and reporting uptake on the ImmForm website using the seasonal flu vaccine uptake (frontline healthcare workers collection) tool.

12. Data collection on flu vaccine uptake in primary care will be managed, as in previous years, using the ImmForm website at: <https://www.immform.dh.gov.uk> Flu queries concerning data collection content or process should be directed to influenza@phe.gov.uk

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