Protecting your child against flu

Information for the parents of children aged from 2 to 13 (year 8 at school)
This year, the flu vaccine is being offered to children:

- aged two, three and four years*
- of primary school age in those pilot areas that offered the vaccine in 2013/14
- in school years 7 and 8 in several large pilot areas around the country.

This leaflet explains why these various groups of children are now being offered the vaccination, as well as describing the disease and the vaccine.

*i.e. your child’s birthday falls on or after 2 September 2009, or on or before 1 September 2012.

Why should children have the flu vaccine?

Flu can be a very unpleasant illness in children causing fever, stuffy nose, dry cough, sore throat, aching muscles and joints, and extreme tiredness. This can often last several days. Some children can also get a very high fever, sometimes without the usual flu symptoms, and may need to go to hospital for treatment. Complications of flu can include a painful ear infection, bronchitis, and pneumonia – these may be severe.

Why aren’t all children up to 13 years of age now being offered the vaccine?

Vaccinating very large numbers of children in a short period of time requires a lot of planning and resources. So last year, children aged two
and three were vaccinated in GP surgeries, and children aged four to ten were vaccinated in a small number of pilot areas around England, to see what worked best in terms of reaching the maximum number of children.

The experience gained from this exercise – which was so successful that it will be repeated in the same areas in 2014/15 – will also now be used in vaccinating children in school years 7 and 8 in several large pilot areas around the country.

Why is it necessary to vaccinate so many children all at once?

For the best protection, flu vaccine should be given before flu starts circulating which is why children will be offered vaccination in the autumn and early winter. By offering vaccination to so many children at once the disease isn’t able to spread as easily, so not only are individual children protected but also their younger brothers and sisters, and other family members including their grandparents.
Will all children be offered the vaccine?
The pilot programmes in primary and secondary schools are designed to help us understand how best to vaccinate large numbers of children in a very short period of time. Using this information, it may prove possible to offer the vaccination to all children aged two to 16. Exactly how the programme will roll out year by year, and for how long, will be guided by the experience of the previous years’ programmes.

What are the benefits of the vaccine?
Having the vaccine will help protect your child from what can be a very nasty illness and will also reduce the chance of others in your family getting it. It can help you avoid having to take time out because you are ill or to look after your sick child.

How will the vaccine be given?
For most children, it will be given as a nasal spray.

Who will give my child their vaccination?
That will depend on your child’s age, whether they are still at home or at school and how the programme is being delivered in your area, e.g. it could be the practice nurse at your GP surgery, a nurse or healthcare assistant at your child’s school, or in a pharmacy.

How does the new nasal vaccine work?
The nasal vaccine contains viruses that have been weakened to prevent them from causing flu but will help your child to build up immunity, so that when your child comes into contact with the flu virus they are unlikely to get ill.
Are there any side effects of the vaccine?
Side effects are uncommon but may include a runny or blocked nose, headache, general tiredness and some loss of appetite. The vaccine is absorbed quickly in the nose so, even if your child sneezes immediately after having had the spray, there’s no need to worry that it hasn’t worked.

Are there any children who shouldn’t have the nasal vaccine?
Children should not have the nasal vaccine if they:

- are currently wheezy or have been wheezy in the past week (vaccination should be delayed until at least seven days after the wheezing has stopped)
- are severely asthmatic, i.e. being treated with oral steroids or high dose inhaled steroids
- are allergic to eggs or any part of the vaccine* or
- have a condition that severely weakens their immune system.

Also, children who have been vaccinated should avoid close contact with people with very severely weakened immune systems for around two weeks following vaccination because there’s an extremely remote chance that the vaccine virus may be passed to them.

*see the website at http://xpil.medicines.org.uk and enter Fluenz or Fluenz tetra in the search box for a list of the ingredients of Fluenz vaccine’
I believe the nasal vaccine contains products derived from pigs (porcine gelatine), which means my child can’t have it because of our beliefs.

The nasal vaccine contains a highly processed form of gelatine (derived from pigs), which is used in a range of many essential medicines. The nasal vaccine provides the best protection against flu, particularly in young children.

This nasal vaccine not only helps protect your child against disease but, if enough children are vaccinated, the disease won’t spread from one person to another, and so their friends and family are also protected.

Some faith groups accept the use of porcine gelatine in medical products – the decision is, of course, up to you. For further information about porcine gelatine and the nasal flu vaccine, see [www.gov.uk/government/news/vaccines-and-gelatine-phe-response](http://www.gov.uk/government/news/vaccines-and-gelatine-phe-response)

Can’t my child have the injected vaccine that doesn’t contain gelatine?

The nasal vaccine offers the best protection for your child and it reduces the risk to, for example, a baby brother or sister who is too young to be vaccinated, as well as other family members (for example, grandparents) who may be more vulnerable to the complications of flu. The injected vaccine is not thought to reduce spread as effectively and so is not being offered to healthy children as part of this programme.

However, if your child is at high risk from flu due to one or more medical conditions or
treatments and can’t have the nasal flu vaccine because of this, they should have the flu vaccine by injection.

**Has the vaccine been used in other countries?**

Yes; it has been used safely in America for many years and it was used in 2013/14 flu season in the UK where hundreds of thousands of children were successfully vaccinated.

**What will happen next?**

Your GP or child’s school will contact you about the vaccination. Talk to your GP, practice nurse, your child’s school nurse or your health visitor if you have any further questions. Or you can visit [www.nhs.uk/child-flu](http://www.nhs.uk/child-flu)
5 reasons to get your child vaccinated

1. Nasal spray vaccine to protect children aged two years and older against flu is effective and has an excellent safety record.

2. The vaccine was introduced in the UK in 2013/14, it is easy to give, is painless, and has been used in other countries for a number of years.

3. Flu can be a nasty illness that can lead to a stay in hospital, especially for children with other medical conditions like heart disease and diabetes.

4. If your child gets flu they won’t be able to go to school/nursery for several days and will need to be cared for at home. You may have to take time off to look after them.

5. Protecting your child can stop the flu spreading to other children he/she may come into contact with, and to the rest of the family, in particular to infants and grandparents, who may be at particular risk from flu.

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www.nhs.uk/child-flu