

AMERICAN ACADEMY OF PEDIATRICS

What's the Latest with the Flu September 2016

The American Academy of Pediatrics (AAP) policy "[Recommendations for Prevention and Control of Influenza in Children, 2016-2017](#)" offers updated recommendations for routine use of seasonal influenza vaccine and antiviral medications for the prevention and treatment of influenza in children. Important details are highlighted in the *AAP News* articles "[Intranasal Flu MISSED its Target](#)" and "[AAP Updates Recommendations for Flu Vaccine in Children](#)". In addition, see the Centers for Disease Control and Prevention (CDC) [Morbidity and Mortality Weekly Report](#) "Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices" for more information.

Consider taking the following steps to be prepared for the upcoming flu season:

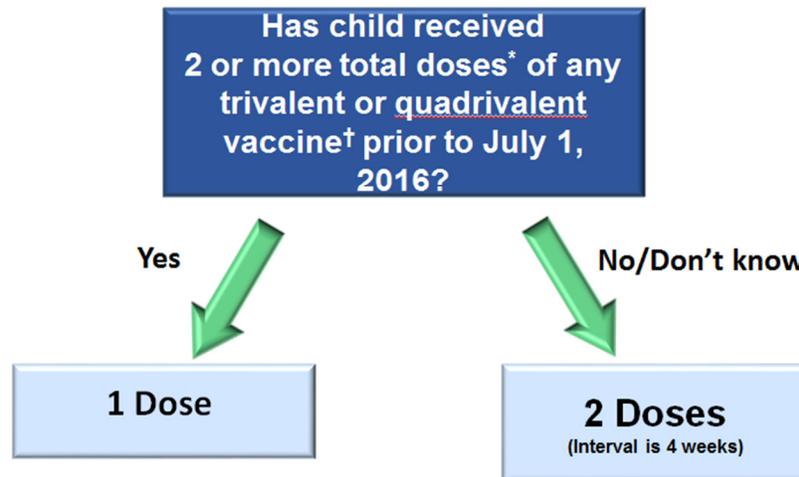
- Get vaccinated and talk with colleagues about why they should get vaccinated, too.
- Encourage all of your patients to get vaccinated. Make a special effort to identify those patients at increased risk of complications from influenza and encourage them to get vaccinated.
- Protect children younger than 6 months of age by immunizing their caregivers and close contacts of those infants to reduce their exposure to influenza.
- Meet with staff to discuss what worked and improve what didn't work in the office during the last flu season.
- Train staff on standard precautions, infection control, seasonal influenza, and strategies for communicating the importance of immunization.
- As a large number of children are enrolled in Head Start or other early education and child care programs throughout the country, partner with these programs to encourage vaccination of all children, staff, and caregivers. Share information about AAP training materials and other [resources](#).

The [2016-2017 vaccines strains](#) have been updated from last season. This year, the trivalent inactivated vaccine includes an A/California/7/2009 (**H1N1**) pdm09-like virus, an A/Hong Kong/4801/2014 (**H3N2**)-like virus, and a B/Brisbane/60/2008-like virus. The quadrivalent vaccine contains an additional B virus (B/Phuket/3073/2013-like virus). There is no preference for any licensed or recommended injectable vaccine over another.

The intranasal live attenuated influenza vaccine (or LAIV4) sold under the trade name "FluMist Quadrivalent" should NOT be used in any setting during the 2016-2017 influenza season in light of the evidence for its poor effectiveness in recent seasons, particularly against influenza A (H1N1) pdm09 viruses.

Some children 6 months through 8 years of age need 2 doses (given 4 weeks apart) of seasonal influenza vaccine if they have received fewer than 2 doses of any trivalent or quadrivalent influenza vaccine (including LAIV) prior to July 1, 2016. The second dose is sometimes missed, so attention to follow-up is needed. See the updated AAP dosing algorithm:

Number of Seasonal Influenza Doses for Children 6 Months Through 8 Years of Age



The chart above can be accessed here: <http://pediatrics.aappublications.org/content/early/2016/09/01/peds.2016-2527>

*The 2 doses need not have been received during the same season or consecutive seasons.

†Receipt of LAIV4 in the past is still expected to have primed a child's immune system, despite recent evidence for poor effectiveness. There currently are no data that suggest otherwise.

Optimal protection is achieved through annual immunization. The AAP and CDC recommend annual seasonal influenza vaccine for all people 6 months and older. Not everyone understands the importance of annual immunization, so it is valuable for you, as a clinician, to explain why getting a **flu vaccine is crucial**.

Guidelines for giving flu vaccine to presumed egg allergic children have been updated. Children with an egg allergy can receive any licensed influenza vaccine that is otherwise appropriate for their age, without special considerations. The CDC provides additional information about updated recommendations for **flu vaccine and people with egg allergies**.

It is especially important to vaccinate children and adolescents who are at an increased risk of complications from influenza, including those with chronic medical conditions, such as asthma, diabetes mellitus, hemodynamically significant cardiac disease, immunosuppression, or neurologic and neurodevelopmental disorders. Children younger than 5, but particularly children younger than 2 years old, are also at an increased risk of hospitalization and complications attributable to influenza.

Another far less common, but still an important concern associated with influenza, is possible exposure and infection with animal influenza viruses. For example, swine have their own influenza viruses that usually do not infect people, but can cause illness in people on rare occasion. When that happens, these are called "variant" infections. Local fairs in the US typically bring an increase in interactions between people and swine, which increases the risk of these types of infections. As of August 26, 2016, 18 human infections with influenza A (H3N2) variant viruses have been detected. The CDC posted an **online**

spotlight describing the first four infections reported and issued **guidance** for people attending agricultural fairs where swine might be present during fairs. The guidance includes additional precautions for people who are at high risk for serious flu complications. This year, no person-to-person transmission of these variant viruses has been identified. The Michigan Department of Health has also issued a **news release**.

Plan to participate in the CDC **Clinician Outreach and Communication Activity** pediatric-focused influenza prevention and control webinar on October 27, 2016, at 2:00pm ET. To receive a calendar appointment, e-mail DisasterReady@aap.org.

For more information, see the **AAP Red Book Online Influenza Resource page** or the **CDC FluView**. All What's the Latest with the Flu messages will be **archived**. Members of the AAP also have access to **Flu Vaccine Recommendations Speaking Points**.