Flu Vaccination Frequently Asked Questions

What is immunisation?
Immunisation uses the body’s natural defense 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.

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 pains, headache, sore throat
- Cough and a generalized feeling of unwellness
- 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 immunisation

Most people think that when they have a runny nose or a sore throat that they have the “flu” but usually, this is not the case. They usually have a common cold, which is a short-term, mild 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 sufferer of influenza 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.

Can I get the flu from the vaccination?
No. The vaccine contains only inactivated virus particles (a virus that has been concentrated, killed then broken apart) and is therefore incapable of causing Influenza infection.

People who have developed a runny nose or sore throat after vaccination have usually developed another viral illness.

How effective is the Influenza vaccine?
Influenza vaccination prevents up to 90% of cases of Influenza infection in healthy adults.

Which adults should be vaccinated?
Those who wish to reduce their likelihood of becoming ill with influenza
Women who are pregnant or breastfeeding (including the 1st trimester)
Those over 65 years of age
Aboriginal and Torres Strait Islander adults 50 years and older
Those with chronic, debilitating diseases (especially those with chronic heart, lung, kidney and metabolic disorders e.g. diabetes)
Those receiving immune suppressive therapy
Those who can transmit Influenza to persons at increased risk

How often is flu vaccination required?
Once a year

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 1 year.
Why do I need to be vaccinated every year?
The Influenza virus strains change each year so the vaccine is changed accordingly. The World Health Organization predicts the 3 most expected strains and the vaccine manufacturers are all required to formulate their vaccines to cover these 3 strains.

What strains does the 2013 vaccine protect me against?
The 2013 vaccine protects against the 3 mostly likely flu strains to circulate in the Southern Hemisphere in 2013:
A/California/7/2009 (H1N1) - like strain,
A/Victoria/361/2011 (H3N2) - like strain and
B/Wisconsin/1/2010 - like strain

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 alcohol and in some cases they will wear rubber gloves to protect themselves from a needle injury.

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 the tongue, lips or develop respiration distress or collapse when exposed to the above)
- Anyone with a present high fever
- 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, 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 own 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.

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 2 days before you are due to travel, in case you have any side-effects that require advice or treatment.

I am under 16. Can I still have the vaccination?
Following common law guidelines, if you are 16 years or over you can consent to have the vaccination without your parents’ or guardians’ consent. If you are 15 years or under (and are legally employed by the organisation paying for the vaccination) you may have the vaccination provided your parent or guardian sign your consent form. If you are not an employee or contractor of the organisation, unfortunately we cannot vaccinate you.

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 38.5 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 2 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 2 other flu strains.

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.
I am on 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.

What are the possible side-effects?
Possible 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 unwellness. This usually lasts no more than 1-2 days. Allergic reaction in those allergic to vaccine components.

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 “Guillian Barre Syndrome”. Those who have had Guillian Barre Syndrome should contact Medimobile on 1300 660 339 or info@medimobile.com.au so we can provide you with extra advice on Guillian Barre and Flu vaccination.

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.

When should vaccination be carried out?
Vaccination is best carried out during March-May each year, before the onset of the peak season for Flu (July – September).

What if I am pregnant or am breastfeeding?
The medical profession and governments world-wide have identified pregnant women as a high priority group for receiving an influenza vaccination. This is based on (a) good evidence that the vaccine is safe for both the pregnant woman and the unborn child (b) good evidence to show that the vaccine reduces the risk of illness and hospitalisation due to influenza and pneumonia in vaccinated pregnant women (c) the process of vaccinating pregnant women extends protection against influenza and pneumonia to the unborn/newborn child which continues until the child is 6 months of age (d) there is evidence that it reduces the incidence of stillbirth and premature birth. The vaccine may be administered during all stages of pregnancy, including the first trimester.

The vaccine is safe to be given during all stages of breast feeding. If you are concerned, talk to your Obstetrician or GP.

What else can I do to avoid getting the flu or a cold?
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 share 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 and rest and try to reduce stress.

If you have any concerns or questions, please call Medimobile’s in-house Doctor on 1300 660 339 during office hours or talk to your General Practitioner.