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Recommendations of the Advisory Vaccine Committee Anti-Flu Vaccination Campaign 2.005-2.006

This report updates the recommendations on prevention of the influenza Advisory Vaccine Committee (AVC) performed in 2.004.

INTRODUCTION:

Influenza produces a high annual morbidity in pediatric population. Children represent the group of age with highest rates of incidence. At the moment the AVC does not advise the systematic vaccination of influenza to healthy children. Previous to this recommendation there will be necessary to make epidemiological studies in our country that value the impact of the influenza disease in children, their role as source of infection for adults at risk, and therefore the efficiency of the systematic vaccination in our area. The AVC recommends performing studies that allow us to know the incidence rates and hospitalization due to its annual epidemic season. However, and based on the existing evidences, the AVC considers that any children older than six months of age can be vaccinated when parents request for it, although with priority of access to the vaccine for the children at risk.

The World Health Organization communicates that influenza vaccine prepared for the 2005-2006 season must be included:

- A/California/7/2004 (H3N2)-like virus
- A/New Caledonia/20/1999 (H1N1)-like virus
- B/Shanghai/361/2002-like virus

Alternatively it can be used for the vaccine elaboration in this season: A/New York/55/2004; B/Jilin/70/2003;y B/Jiangsu/10/2003.

We consider children at risk those who by their co morbidity pathology, or by their characteristics, constitute a group for which the infection by influenza virus can produce a serious worsening of their pathology.

RECOMMENDATIONS:

1. Children with chronic diseases:
 - a. Chronic lung diseases, including asthma.
 - b. Serious cardiovascular diseases.
 - c. Neuromuscular diseases that produce a respiratory commitment by himself or by a difficulty of respiratory secretion mobilization.
 - d. Any statement of weakened immune system
 - e. Children who receive a long-term treatment with acetylsalicylic acid.
 - f.
2. Adults who can transmit flu to children who live with them:
 - a. Pregnant women who are going to give birth during the months of the annual epidemic season (November to March).
 - b. Relatives and people who live with children of any age, who are fitted in the indications gathered in the first point.
 - c. Sanitary Personnel that exerts its work with children in hospitals, private centers of health or doctor's offices.
 - d. Workers of institutions of children with a physical or a psychic disability
 - e. Workers of day-care centers.

NOTE: Mothers who breast-feed to their children can receive the vaccine.

DOSAGE:

	DOSE	WAY OF ADMINISTRATION	NUMBER OF DOSES	TYPE
CHILDREN				
6-35 months	0.25ml	Im	1-2*	Subunits virus vaccine
3-8 years	0.5ml	Im	1-2*	
9-12 years	0.5ml	Im	1	
Adolescents and adults	0.5ml	Im	1	Whole virus or subunits virus vaccine
*Two doses in children younger than 9y, who haven't received the vaccine before, with an interval between two doses of at least 4 weeks				

ADMINISTRATION

intramuscular

CONTRAINDICATIONS

- a. Egg allergy
- b. Allergy to other vaccine components
- c. Children younger than six months
- d. Children who have suffered Guillain-Barre syndrome

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ATTACHMENT

The following ones are the vaccines registered in Spain and authorized by summary product characteristics in children older than 6 months of age:

1. Inactivated virus vaccines:
 - a. **Vacuna antigripal fraccionada polivalente**® LETI
 - b. **Fluarix**® GSK
 - c. **Gripavac**® Sanofi Pasteur MSD
 - d. **Vacuna antigripal Pasteur**® Sanofi Pasteur MSD

2. Subunits virus vaccines:
 - a. **Chiroflu**® Esteve
 - b. **Influvac**® Solvay Pharma

3. Subunits Virosomic vaccines:
 - a. **Inflexal V**® Berna Biotech