

YOUR HEALTH - FLU SEASON IS UPON US
Michael O'Dell, M.D., Chair, District Task Force
on Health Concerns
Director of Family Medicine Residency Program
North Mississippi Medical Center

Flu Season is upon us again. The best response to the flu season for many of us is to get immunized. The flu vaccines are safe and effective. While getting a "flu shot" is not a quite a 100% guarantee that you will not get the flu, it does provide a high level of protection and does help make the illness a lot milder for those who contract influenza despite getting a flu shot. Plus, the more persons immunized, the less chance that the flu will spread widely in a community.

Many have probably heard that there will be a shortage of the vaccine this year. In view of that shortage, the Centers for Disease Control (CDC) has somewhat modified recommendations made earlier this year. The CDC Interim Recommendations are listed below.

This year's flu season has been even more closely monitored by health experts due to concerns about avian flu outbreaks in Vietnam and other parts of Southeast Asia. However, to date, the avian flu has not infected very many humans. The avian flu has low potential for spreading from one infected human to another, although there have been two such cases as of this writing.

The following section is taken directly from the CDC website. There is a lot more information at that web site for those that are interested! (<http://www.cdc.gov/flu/protect/whoshouldget.htm>)

Priority Groups for Influenza Vaccination

The following priority groups for vaccination with inactivated influenza vaccine this season are considered to be of equal importance and are:

- all children aged 6–23 months;
- adults aged 65 years and older;
- persons aged 2–64 years with underlying chronic medical conditions;
- all women who will be pregnant during the influenza season;
- residents of nursing homes and long-term care facilities;
- children aged 6 months–18 years on chronic aspirin therapy;
- health-care workers involved in direct patient care; and
- out-of-home caregivers and household contacts of children aged <6 months.

Other Vaccination Recommendations

Persons in priority groups identified above should be encouraged to search locally for vaccine if their regular health-care provider does not have vaccine available.

Intranasally administered, live, attenuated influenza vaccine, if available, should be encouraged for healthy persons who are aged 5–49 years and are not pregnant, including health-care workers (except those who care for severely immunocompromised patients in special care units) and persons caring for children aged <6 months.

Certain children aged <9 years require 2 doses of vaccine if they have not previously been vaccinated. All children at high risk for complications from influenza, including those aged 6–23 months, who present for vaccination, should be vaccinated with a first or second dose, depending on vaccination status. However, doses should not be held in reserve to ensure that 2 doses will be available. Instead, available vaccine should be used to vaccinate persons in priority groups on a first-come, first-serve basis.

Vaccination of Persons in Nonpriority Groups

Persons who are not included in one of the priority groups described above should be informed about the urgent vaccine supply situation and asked to forego or defer vaccination.

Persons Who Should Not Receive Influenza Vaccine

Persons in the following groups should not receive influenza vaccine before talking with their doctor:

- persons with a severe allergy (i.e., anaphylactic allergic reaction) to hens' eggs and persons who previously had onset of Guillain-Barré syndrome during the 6 weeks after receiving influenza