

What's New for the 2018-2019 Flu Season?

FIGHT FLU



For the 2018-2019 flu season:

- Flu vaccines have been updated to better match circulating viruses [the B/Victoria component was changed and the influenza A(H3N2) component was updated].
- The nasal spray flu vaccine (live attenuated influenza vaccine or “LAIV”) is again a recommended option for influenza vaccination for people for whom it is otherwise appropriate.

What flu vaccines are recommended this season?

For the 2018-2019 flu season flu vaccine, providers may choose to administer any licensed, age-appropriate flu vaccine including inactivated influenza vaccine or “IIV,” recombinant influenza vaccine or “RIV4,” or the nasal spray vaccine (live attenuated influenza vaccine or “LAIV”).

Options this season include:

- [Standard dose flu shots](#). Most are given into the muscle, usually with a needle, but two can be given to some people with a jet injector. (***Note** that no intradermal flu vaccine will be available during 2018-2019).
- A [high-dose shot](#) for people 65 and older.
- A [shot made with adjuvant](#) for people 65 and older.
- A [shot made with virus grown in cell culture](#).
- A shot made using a vaccine production technology ([recombinant vaccine](#)) that does not require the use of flu virus or eggs.
- [Live attenuated influenza vaccine](#) (LAIV) – or the nasal spray vaccine – is also an option for use in otherwise healthy persons 2 through 49 years of age who are not pregnant. (Note that there is a precaution against the use of LAIV for people with certain underlying medical conditions.)



Getting an annual flu vaccine is the first and best available way to protect yourself and your family from flu and its potentially serious complications. Flu vaccination can reduce flu illnesses, doctors' visits, and missed work and school due to flu, as well as prevent flu-related hospitalizations. Flu vaccine also has been shown to significantly reduce a child's risk of dying from influenza. The more people who get vaccinated, the more people will be protected from flu, including older people, young children, pregnant women and people with certain long-term health problems who are more vulnerable to serious flu illness.

For more information, visit:
www.cdc.gov/flu or www.flu.gov
or call **1-800-CDC-INFO**



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What viruses do 2018-2019 flu vaccines protect against?

There are many flu viruses and they are constantly changing. The composition of U.S. flu vaccines is reviewed annually and updated to match circulating flu viruses. Flu vaccines protect against the three or four viruses that research suggests will be most common. For 2018-2019, three-component vaccines are recommended to contain:

- A/Michigan/45/2015 (H1N1)pdm09-like virus
- A/Singapore/INFIMH-16-0019/2016 A(H3N2)-like virus (updated)
- B/Colorado/06/2017-like (Victoria lineage) virus (updated)

Four component vaccines are recommended to include the same three viruses above, plus an additional B virus called B/Phuket/3073/2013-like virus (B/Yamagata lineage).

When and how often should I get vaccinated?

You should get a flu vaccine before flu begins spreading in your community. It takes about two weeks after vaccination for antibodies that protect against flu to develop in the body, so make plans to get vaccinated early in fall, before flu season begins. CDC recommends that people get a flu vaccine by the end of October. Getting vaccinated later, however, can still be beneficial and vaccination should continue to be offered throughout flu season, even into January or later.

Children who need [two doses](#) of vaccine to be protected should start the vaccination process sooner, because the two doses must be given at least four weeks apart.

Can I get a flu vaccine if I am allergic to eggs?

The recommendations for people with egg allergies are the same as the 2017-2018 season.

- People who have experienced only hives after exposure to egg can get any licensed flu vaccine that is otherwise appropriate for their age and health.
- People who have symptoms other than hives after exposure to eggs, such as angioedema, respiratory distress, lightheadedness, or recurrent emesis; or who have needed epinephrine or another emergency medical intervention, also can get any licensed flu vaccine that is otherwise appropriate for their age and health, but the vaccine should be given in a medical setting and be supervised by a health care provider who is able to recognize and manage severe allergic conditions. (Settings include hospitals, clinics, health departments, and physician offices). People with egg allergies no longer have to wait 30 minutes after receiving their vaccine.

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