



InfluenzaVIP (Vaccination-In-Pregnancy)

Why should I get vaccinated against influenza during my pregnancy?

Influenza (flu) is a virus that spreads mainly by coughing, sneezing, and close contact.

Australia's influenza season usually occurs between July and October each year.

This year, due to the COVID-19 pandemic, it is advised to get the influenza vaccine as soon as it is available. It takes up to two weeks for protection to develop after vaccination. Protection from the vaccine may start to decrease after 3 to 4 months.

Influenza strikes suddenly and can last several days. Symptoms vary by age, and can include:

- fever/chills
- muscle aches
- cough
- runny, stuffy nose
- sore throat
- fatigue
- headache

Getting influenza can cause serious problems for pregnant women. Changes in immune, heart, and lung functions during pregnancy can lead to serious complications from influenza, even for healthy women.

Pregnant women who get influenza are at higher risk of hospitalisation, and even death, than non-pregnant women. Influenza can also be dangerous to your unborn baby because it increases the chance for serious problems such as premature labour and delivery.

WA research shows that getting the influenza vaccine during pregnancy reduces the risk of stillbirth by 51 per cent and infants of mothers who were vaccinated in the third trimester have a 25 per cent reduction in risk of hospitalisation for acute respiratory infections in their first six months of life.

When you get your influenza vaccination, your body starts to make antibodies that help protect you against the virus. Antibodies can be passed on to your unborn baby, and help protect them for up to six months after birth, while they are too young to get an influenza vaccine themselves. If you breastfeed your baby, antibodies made in response to the influenza vaccination may also be passed in breast milk and provide additional protection.

The Australian Government and Royal Australian and New Zealand College of Obstetricians and Gynaecologists recommend that all pregnant women be offered vaccination against influenza.

Which vaccine will be used? When can I have it?

Each year, several brands of influenza vaccines are available from April to the end of influenza season. The influenza vaccine can be given at any time during pregnancy. However, getting the vaccine during your second and third trimesters is important because this is the time when serious complications from influenza are more likely to occur.

The vaccine cannot cause influenza.

All influenza vaccines currently registered for use in Australia contain inactivated (i.e. dead) flu virus.

As the virus is always changing, a new influenza vaccine is made every year to protect against the strains that are likely to cause disease in the upcoming season. A single dose of influenza vaccine is recommended every influenza season.

Influenza vaccination cannot prevent:

- you contracting influenza that is caused by a strain not covered by the vaccine,
- illnesses that resemble influenza-like symptoms but are not influenza.

It takes about **two weeks** for protection to develop after vaccination, and protection is expected to last through the influenza season.

It is safe to have the influenza and pertussis vaccines at the same time during your pregnancy.

Is this vaccine safe for me and my baby?

Yes. The influenza vaccine has been given safely to millions of pregnant women worldwide over many years and has not been shown to cause harm to pregnant women or their babies. From the introduction of the program in 2012, the WA Department of Health has monitored the safety of influenza vaccine in over 9,000 pregnant women and has found no serious safety issues following vaccination.

Can everyone get the vaccine?

There are some people who should not get the vaccine. Tell the person who is giving you the vaccine if you have ever had:

- a life-threatening allergic reaction after a dose of any influenza vaccine or a severe allergy to any part of this vaccine
- Guillain-Barré Syndrome (also called GBS)

- People with a history of GBS may have a higher chance of developing GBS following the influenza vaccination. Patients with GBS are usually hospitalised and the diagnosis of GBS must be made by a physician.
- a known egg allergy.
- People with egg allergy, including anaphylaxis, can be safely vaccinated with influenza vaccines that have less than 1 g of residual egg ovalbumin per dose.

Are there any side effects from influenza vaccination?

With any medicine, including vaccines, there is a chance of common adverse reactions. These are usually mild and go away by themselves. Serious reactions are also possible, but are rare. As with any medicine, there is a very remote chance of a vaccine causing a serious injury or death. Most people who get an influenza vaccine do not have any problems with it.

Vaccine side effects

The most common side effects after influenza vaccination are mild, such as tenderness, redness and/or swelling where the vaccination was given. Some people might have headache, muscle aches, fever, and nausea or feel tired. If these symptoms occur, they usually begin soon after the vaccination and last one to two days. None of the common side effects endanger the baby.

People sometimes faint after a medical procedure, including vaccination. Tell your provider if you feel dizzy, or have vision changes or ringing in the ears.

Sometimes vaccinations can cause serious problems like severe allergic reactions. Life-threatening allergic reactions to vaccines, for example Guillain-Barré Syndrome, are very rare – up to one in a million doses of influenza vaccine.

Be sure to tell the person giving the vaccine if you have any severe allergies or if you have ever had a severe allergic reaction following a vaccination.

Some people get severe pain or difficulty moving the shoulder where a vaccine was given. This happens very rarely.

The safety of vaccines is always being monitored.

For more information, visit:

AusVax Safety: ausvaxsafety.org.au/safety-data/pregnant-women

Australian Department of Health: campaigns.health.gov.au/immunisationfacts/are-vaccines-safe

What if there is a serious reaction? What should I look for?

Vaccines, like any medication, can cause a severe allergic reaction. Such reactions from a vaccine are very rare, estimated at fewer than one in a million doses, and usually occur within a few minutes to a few hours after the vaccination.

Look for anything that concerns you, such as signs of a severe allergic reaction, very high fever, or unusual behaviour.

Signs of a severe allergic reaction can include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness – usually within a few minutes to a few hours after the vaccination.

What should I do?

Please call your GP if you have a reaction you think is serious or unexpected. Healthdirect is also available on 1800 022 222. For any severe reaction, call an ambulance or go to your closest emergency department.

Significant and unexpected reactions should be reported to Western Australian Vaccine Safety Surveillance (WAVSS):

Online portal: <https://www.aefican.org.au/Home/Info/WA>

E-mail: WestAustralian.VaccineSafetySurveillance@health.wa.gov.au

Phone (08) 6456 0208

Name of vaccine recipient: _____	Date: ____/____/20__
Vaccinator's signature: _____	Batch number: _____ (Apply sticker or write in)
Brand name: <input type="checkbox"/> Fluarix Tetra <input type="checkbox"/> FluQuadri <input type="checkbox"/> Afluria Quad <input type="checkbox"/> Other, please specify: _____	



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