

# Overcoming Parental *Misconceptions*



Parental misconceptions about influenza vaccine generally focus on:

- The safety of the vaccine
- The need to be immunized
- The benefits of the vaccine

Because the vast majority (94%) of parents follow their pediatricians' advice about their children's health, you can help reassure parents who are reluctant about getting their children immunized against influenza if you:<sup>1</sup>

- Listen respectfully to any parental concern
- Address it with personal guidance

Providing handouts and referrals to reliable Web sites (see *Vaccine Information Sources for Parents*) can help reinforce your responses to parental concerns.

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## Addressing misconceptions about the safety of the influenza vaccine<sup>2</sup>

- The risk of a **serious adverse event** after influenza vaccination is extremely low.  
The most common side effects are:
  - For the injectable **TIV**: Pain, redness, or swelling, which usually resolves within 2 days without treatment.<sup>3</sup>
  - For the intranasal **LAIV**: Runny nose or nasal congestion. Even though the LAIV contains live virus, the risk of transmitting the virus strains in this intranasal vaccine is extremely low.<sup>3</sup>
- Some TIV formulations contain minute amounts of **thimerosal**; much evidence indicates that this preservative is not associated with increased risk of autism spectrum disorders in children.<sup>3</sup>
- **Mild illness** does not contraindicate administration of the influenza vaccine.
- Only a **severe egg allergy** is a possible contraindication to influenza vaccination, requiring consultation with an allergist. For children with mild reactions to egg (development of hives), standard immunization practice is appropriate, with use of TIV recommended.<sup>3</sup>
- Children with **chronic underlying medical conditions** that enhance their risk for influenza complications can—and should—be vaccinated (with TIV rather than LAIV).<sup>3</sup>

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## Addressing misconceptions about the need to be immunized

- An annual influenza vaccination is the best way to prevent infection with the influenza virus in the individual, family and peers, and the community.
- The protection of individuals and the whole community through vaccination is a significant public health issue because influenza can be a serious disease, resulting annually in an average of:
  - 10 million to 60 million cases of symptomatic influenza
  - As high as an estimated 36,000 deaths
  - More than 226,000 hospitalizations
  - 25 million outpatient visits<sup>4,5</sup>

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TIV=trivalent inactivated influenza vaccine; LAIV=live attenuated influenza vaccine.

### References

1. Moseley KL, Freed GL, Goold SD. Which sources of child health advice do parents follow? *Clin Pediatr*. 2011;50:50-56.
2. Centers for Disease Control and Prevention. Seasonal influenza vaccine safety: a summary for clinicians. [www.cdc.gov/flu/professionals/vaccination/vaccine\\_safety.htm](http://www.cdc.gov/flu/professionals/vaccination/vaccine_safety.htm). Accessed March 12, 2012.
3. Committee on Infectious Diseases. American Academy of Pediatrics. Recommendations for prevention and control of influenza in children, 2011-2012. *Pediatrics*. 2011;128:813-825.
4. Belshe RB. An introduction to influenza: lessons from the past in epidemiology, prevention, and treatment. *Manag Care*. 2008;17(10 suppl 10):2-7.
5. Centers for Disease Control and Prevention. Prevention and control of seasonal influenza with vaccines: recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR*. 2009;58(RR-8):1-52.