

Protecting Children and Adults From Influenza: *Recommendations for Vaccination, 2011-2012**



Age of Child/Other Descriptors	Recommendation	Comments
Children ≥ 6 mo	<p>In children from 6 mo-8 y being vaccinated for the first time, use 2 doses of vaccine, administered at least 4 weeks apart.</p> <p>Individuals ≥ 9 y old require only 1 dose.</p> <p>Offer vaccination as soon as it is available and throughout influenza season.</p>	<p>Intramuscular TIV is recommended for all children ≥ 6 mo, including those with chronic medical conditions.</p> <p>LAIV should be used only in healthy children ≥ 2 y old.</p>
Children 6 mo-8 y who received only 1 dose of vaccine in their first year of vaccination	Administer 1 dose of the 2011-2012 vaccine.	In previous seasons, these children required 2 doses of vaccine the following season. For this season only, the second dose is not required because the vaccine strains in this year's vaccine are unchanged from those used last year.
Individuals ≥ 18 y	Administer 1 dose of the 2011-2012 vaccine.	Intramuscular TIV or the new intradermal preparation (microinjection with a needle 90% shorter than those used for intramuscular administration), licensed for people aged 18-64, can be used. LAIV can also be used for this age group up to age 50 y.
Children with egg allergy	Assess severity of egg allergy. In most cases, administer TIV (rather than LAIV) per usual protocol.	Recent studies indicate that only a severe reaction to egg protein is a contraindication to immunization.
<p>Children with contraindications to influenza immunization</p> <p>Note: Mild-to-moderate illness and Guillain-Barré syndrome are precautions to vaccination, not absolute contraindications. The only absolute contraindications to LAIV are hypersensitivity and use of aspirin in children. The only absolute contraindication to TIV is severe allergy to vaccine components.</p>	<p>Precautions to using TIV: a moderate-to-severe (but not mild) febrile illness; Guillain-Barré syndrome experienced within 6 weeks after a previous influenza vaccination.</p> <p>Precautions to using LAIV: a moderate-to-severe febrile illness; copious nasal congestion; Guillain-Barré syndrome experienced within 6 weeks after a previous influenza vaccination; receipt of other live-virus vaccines within previous 4 weeks; asthma or history of wheezing with respiratory tract illnesses.</p>	TIV is the vaccine of choice in children with chronic underlying medical conditions; in persons with known or suspected immunodeficiency disease or receiving immunosuppressive or immunomodulatory therapies; those receiving aspirin; women who are pregnant or considering pregnancy; or persons with a condition that can compromise respiratory function or handling of secretions or can increase the risk for aspiration.

*Immunization should focus on children with conditions that increase the risk of complications from influenza; all household contacts and out-of-home care providers of children with high-risk conditions and children younger than 5 years; health care personnel; and women who are pregnant, considering pregnancy, or breastfeeding during the influenza season.

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

CDC. *MMWR*. 2011;60:1128-1129; AAP. *Pediatrics*. 2011;128:813-815.