

Dear Colleague:

The TIME module has not yet been updated to reflect the CDC/ACIP 2016-17 influenza vaccine recommendations. We plan to have the updates completed in the near future. The updates are listed below, and are completely discussed in the Prevention and Control of Seasonal Influenza with Vaccines Recommendations of the Advisory Committee on Immunization Practices — United States, 2016–17 Influenza Season at <http://www.cdc.gov/mmwr/volumes/65/rr/pdfs/rr6505.pdf>.

We suggest you defer using the module until the updates are completed, and refer to the 2016-17 recommendations cited above for the most recent information.

Updated information and guidance to be included from the Prevention and Control of Seasonal Influenza with Vaccines Recommendations of the Advisory Committee on Immunization Practices — United States, 2016–17 Influenza Season in this document includes the following:

“In light of low effectiveness against influenza A(H1N1)pdm09 in the United States during the 2013–14 and 2015–16 seasons, for the 2016–17 season, ACIP makes the interim recommendation that [live attenuated influenza vaccine] LAIV4 should not be used. Because LAIV4 is still a licensed vaccine that might be available and that some providers might elect to use, for informational purposes, reference is made to previous recommendations for its use.

2016–17 U.S. trivalent influenza vaccines will contain an A/California/7/2009 (H1N1)–like virus, an A/Hong Kong/4801/2014 (H3N2)–like virus and a B/Brisbane/ 60/2008–like virus (Victoria lineage). Quadrivalent vaccines will include an additional vaccine virus strain, a B/Phuket/ 3073/2013–like virus (Yamagata lineage).

Recent new vaccine licensures are discussed:

- An MF59-adjuvanted trivalent inactivated influenza vaccine (aIIV3), Flud (Seqirus, Holly Springs, North Carolina), was licensed by FDA in November 2015 for persons aged ≥ 65 years. Regulatory information is available at <http://www.fda.gov/BiologicsBloodVaccines/SafetyAvailability/VaccineSafety/ucm473989.htm>. aIIV3 is an acceptable alternative to other vaccines licensed for persons in this age group. ACIP and CDC do not express a preference for any particular vaccine product.
- A quadrivalent formulation of Flucelvax (cell culture-based inactivated influenza vaccine [ccIIV4], Seqirus, Holly Springs, North Carolina) was licensed by FDA in May 2016, for persons aged ≥ 4 years. Regulatory information is available at: <http://www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/ucm502844.htm>. ccIIV4 is an acceptable alternative to other vaccines licensed for persons in this age group. No preference is expressed for any particular vaccine product.

Recommendations for influenza vaccination of persons with egg allergy have been modified, including removal of the recommendation that egg-allergic recipients should be observed for 30 minutes postvaccination for signs and symptoms of an allergic reaction. Providers should consider observing all patients for 15 minutes after vaccination to decrease the risk for injury should they experience syncope, per the ACIP General Recommendations on Immunization (8).



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A recommendation that persons with a history of severe allergic reaction to egg (i.e., any symptom other than hives) should be vaccinated in an inpatient or outpatient medical setting (including but not necessarily limited to hospitals, clinics, health departments, and physician offices), under the supervision of a health care provider who is able to recognize and manage severe allergic conditions.”

Thank you,

A handwritten signature in black ink, appearing to read "Katy H. Bidwell", is written in a cursive style.

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The Association for Prevention Teaching and Research (APTR) is the professional organization for the academic medical and public health community dedicated to prevention research and education. APTR advances population-based and public health education, research and service by linking and supporting members from across the academic prevention community.

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