



News Release

Glenn County Health Services / Public Health Office

Glenn County Public Health The Flu Vaccine Shortage: Questions and Answers:

1) Why is there a shortage of flu vaccine?

On October 5, 2004, the federal Centers for Disease Control and Prevention (CDC) was notified by Chiron Corp that none of its influenza vaccine would be available for distribution to the US for the 2004-05 influenza season. The company's license to produce was suspended in its Liverpool facility. US Food and Drug Administration is working with the United Kingdom to investigate the reasons behind the suspension of Chiron's license. "

2) How much influenza vaccine will be supplied by California Department of Health Services (CDHS)?

In March 2004, CDHS purchased 573,000 doses from Chiron. Because of cost concerns, Chiron was chosen as the sole supplier for this season. Given the current situation, as of October 8, 2004, it is unlikely CDHS will be able to supply influenza vaccine to local health departments. CDC and CDHS are exploring whether additional vaccine from the remaining manufacturers and distributors can be acquired.

3) How does this effect Glenn County?

Glenn County Health Services had ordered 2,600 adult doses of influenza vaccine from Chiron through the California Department of Health Services. GCHS also ordered an additional 400 doses of adult vaccine through Aventis. Glenn County will not receive any of the 2,600 doses ordered though Chiron. Following the order from the State Public Health Officer that all available vaccine go directly to specific individuals who are in extremely high risk categories, GCHS divided up the 400 adult doses obtained from Aventis and distributed them to Glenn County private providers to administer to their most "needy, at risk patients." For a description of who is a "high risk" patient, browse down to question 7.

4) Do other counties have vaccine?

All the counties in California and the nation for that matter are facing the same vaccine shortages. A few counties who originally ordered their vaccine from Aventis did get their full orders but those counties are few and far between. In California, all public health departments are obeying the State Public Health Officers order to restrict the administration of what flu vaccine is available to the most at risk individuals.

5) Is there a shortage of children's vaccine?

No. The children' vaccine was all supplied by Aventis. Discussions are currently taking place with CDHS and CDC to see if some of this vaccine can be redirected to use by "highest risk" adults.



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6) When will Glenn County Health Services be getting more flu vaccine?

There may be more vaccine available in February 2005 but that estimate may be optimistic speculation. Even if vaccine does arrive, it will likely be too late to have an impact on public prevention/protection. Currently, GCHS is not expecting to get any more flu vaccine for this flu season.

7) What are the high-risk groups?

Secondary to the vaccine shortage the high-risk groups have been narrowed to the following:

- All children aged 6-23 months
- Adults aged 65 and older
- Persons aged 2-64 years with underlying chronic medical conditions
- All women who will be pregnant during the influenza season
- Residents of nursing homes and long-term care facilities
- Children aged 6 months-18 years on chronic aspirin therapy
- Healthcare workers involved in direct patient care
- Out-of-Home caregivers and household contacts of children aged <6 months

8) What if my regular medical provider has no vaccine?

Try to keep things in perspective. Last year, even if you did get a flu shot, you were not protected against the most prevalent strain that emerged. To a large extent, the vaccine manufacturers who work with the CDC develop the vaccine using probability. So the flu vaccinations are only one tool in the prevention arsenal. There are other options to protect yourself besides getting a flu shot. We have outline some of those suggestions below.

An ounce of prevention...

Even if you are considered "high risk" and have not been able to get a flu shot there are still measures you can take to minimize your risk of influenza infection.

- Avoid crowds
- Cover your mouth when you sneeze or cough
- Influenza virus can live in airborne droplet form after someone else coughs or sneezes. Try to avoid these people.
- Wash your hands with soap and water or clean them with an alcohol based hand cleaner. The virus can be passed to you from fomites (counter tops, door knobs, elevator buttons, shopping carts, etc.).
- Avoid rubbing your nose, eyes or putting your fingers in your mouth.
- Get plenty of rest
- Eat a healthy, nutrient rich diet.

In addition to employing healthy lifestyle habits your medical care provider may be able to prescribe some newer medications that have been shown to prevent the flu or lessen the symptoms of the respiratory virus.



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Ask your doctor if you are a candidate for:

- **FluMist** is an especially good option for certain high priority people who can't get a flu shot this year because of the shortages. However, FluMist is recommended only for those individuals between 5 and 50 years of age. This includes out-of-home caregivers and household contacts of children who are less than six months old, parents, siblings, daycare workers, etc., unless they care for severely immunocompromised patients. If you are not pregnant, less than 50 years of age and do not suffer from immunosuppression FluMist may be a good option.
- **Symmetrel (Amantadine):** Originally used to treat Parkinson's disease and conditions similar to those of Parkinson's disease it is also used to prevent and treat respiratory infections caused by influenza Type A virus. However, it only works to prevent you from Type A influenza and will not work to protect you from Type B influenza. From year to year we never know if the flu will be the Type A or Type B strain. Amantadine comes in pill form and the cost is fairly inexpensive.
- **Flumadine (Rimantadine):** Is a newer antiviral cousin of Amantadine. It is used to prevent or treat certain influenza type A infections. Rimantadine will not work for influenza Type B, colds, or other virus infections. It is also more expensive than Amantadine.
- **Tamiflu (Oseltamivir)** is approved for both treatment and prevention of influenza Type A and B. Tamiflu, which is taken orally, costs about \$66 for a typical course of treatment or prevention.
- **Relenza (Zanamivir)** is an inhaled powder that is approved for the prevention and treatment of both Influenza Type A and Type B. Though effective, some report the powder is difficult to inhale.
- **Pneumonia Vaccine:** The most common serious complication of the flu, especially in the elderly, is pneumonia. When you talk to your healthcare provider, make sure you are current on your pneumonia vaccinations. The CDC recommends vaccination of all persons over 65 years of age and individuals older than 2 years and younger than 65 years with chronic medical conditions. *Streptococcus pneumoniae* remains the most common cause of community-acquired pneumonia and bacterial meningitis in older adults.

Routine revaccination is not recommended by the CDC. In accordance with the CDC's recommendations, revaccination is necessary only for the following groups:

- Persons age 65 years or older if they received vaccine 5 or more years previously and was less than 65 years of age at the time of vaccination,
- Persons aged 2-64 years who have had their spleen removed.
- Immunocompromised persons 2-65 years of age. A single revaccination is recommended if 5 or more years have elapsed since receipt of the first dose. Consult your private medical care provider.

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