Novel H1N1 Influenza Vaccine:
Frequently Asked Questions

What are the plans for developing novel H1N1 vaccine?
Vaccines are the best tool to prevent the flu, and the U.S. government is working closely with companies to make vaccine for novel H1N1 flu. A number of vaccines have been approved by the federal government to protect you from the novel H1N1 flu.

When is it expected that the novel H1N1 vaccine will be available?
The novel H1N1 vaccine is expected to be available by mid-October.

Do I have to get the novel H1N1 vaccine?
You do not have to get the vaccine. The novel H1N1 vaccine will be voluntary, which means that you will only get the vaccine if you want it. It is recommended that people get the vaccine to protect them from the novel H1N1 flu.

Will the seasonal flu vaccine also protect against the novel H1N1 flu?
The seasonal flu vaccine is not expected to protect against the novel H1N1 flu. You should get both vaccines this season to protect you against both viruses.

Will the novel H1N1 vaccine be safe?
It is expected that the novel H1N1 vaccine will be as safe as the seasonal flu vaccine, which has a very good safety track record. Over the years, hundreds of millions of Americans have received seasonal flu vaccines. The most common side effects following flu vaccinations are mild, like soreness, redness, tenderness or swelling where the shot was given. The Centers for Disease Control and Prevention (CDC) and the Food and Drug Administration (FDA) will be closely following the vaccine for any signs that it is causing unexpected side effects and will work with state and local health officials to investigate any unusual events. For more information on vaccine safety, go to http://www.cdc.gov/h1n1flu/vaccination/vaccine_safety_qa.htm.

Where can I get the vaccine?
You should contact your health care provider to ask if they will be getting the novel H1N1 vaccine when it becomes available. If you do not have a health care provider, but would like to get the vaccine, you should contact your local health department or district responsible for coordinating and organizing vaccination sites in your community. You can find that local health department or district by going to www.ct.gov/dph/mda or by calling 211.

How much does the vaccine cost?
There is no cost for the vaccine itself – it’s being provided free-of-charge by the federal government; however, private health care providers may charge an administrative fee to give you the vaccine, which is covered by most medical insurance plans.

Who should get the novel H1N1 vaccine?
We expect that there will be a limited supply of vaccine when it first becomes available. Certain groups of people should get the vaccine first because they are most at risk for novel H1N1 flu. These target groups include pregnant women, people who live with or care for children younger
than 6 months of age, healthcare and emergency medical services personnel who work directly with patients, people between the ages of 6 months and 24 years old, and people aged 25 through 64 years of age who are at higher risk for novel H1N1 because of chronic health disorders or compromised immune systems.

As more vaccine is made, it will become available to those people who are not in the target groups. Current studies show that people who are over the age of 65 are less likely to get novel H1N1 than younger people. Once there is more vaccine, people over the age of 65 should get the vaccine as well.

**Are there some people who should not get the novel H1N1 vaccine?**
Yes, people who have a severe (life-threatening) allergy to chicken eggs or to any other substance in the vaccine should not be vaccinated.

**Why does CDC recommend that pregnant women get the novel H1N1 influenza vaccine?**
It is important for a pregnant woman to get the novel H1N1 influenza vaccine as well as a seasonal influenza vaccine. A pregnant woman who gets any type of flu is at risk for serious complications and hospitalization. Many pregnant women who are otherwise healthy have become very sick by the novel H1N1 influenza virus. Compared to other people, more pregnant women who get the novel H1N1 influenza virus have been hospitalized and very sick. While hand washing, staying away from sick people, and other steps can help to protect pregnant women from the flu, getting the vaccine is the best way to protect against the flu.

**Why does CDC recommend that pregnant women get the novel H1N1 influenza vaccine?**
Yes, people who have a severe (life-threatening) allergy to chicken eggs or to any other substance in the vaccine should not be vaccinated.

**Is there a certain kind of flu vaccine that pregnant women should get? Are there flu vaccines that pregnant women should not get?**
There are two types of flu vaccine. Pregnant women should get the "flu shot"— a vaccine that is given with a needle, usually in the arm. The flu shot is approved for use in pregnant women.

The other type of flu vaccine — nasal-spray flu vaccine—is not currently approved for use in pregnant women. This vaccine is made with live, weakened flu viruses that do not cause the flu. LAIV (FluMist®) is approved for use in healthy people 2-49 years of age who are not pregnant.

**Can the family members of a pregnant woman receive the nasal spray vaccine?**
Pregnant women should not receive the live nasal spray influenza vaccine but family and household members and other close contacts of pregnant women (including healthcare personnel) who are 2 through 49 years old, healthy and not pregnant may receive live nasal spray vaccine.

**Will the novel H1N1 vaccines that are now being recommended contain adjuvants?**
No. Some vaccines contain “adjuvants,” which are added to the vaccine to make it work better. The current recommendations from the Advisory Committee on Immunization Practices (ACIP) for novel H1N1 influenza vaccines are for vaccines without adjuvants. This includes all of the novel H1N1 and seasonal influenza vaccines that will be available for children and adults in both the injectable (shot) and nasal spray formulations. None of these influenza vaccines will contain adjuvants.
Will the novel H1N1 influenza vaccine contain thimerosal?
The novel H1N1 influenza vaccines that the federal Food and Drug Administration is approving will come in different forms. Some will come in multi-dose vials and will contain thimerosal as a preservative (makes the vaccine last longer in the vial). Multi-dose vials of seasonal influenza vaccine also contain thimerosal to prevent the vial from becoming contaminated after it is opened.

Some novel H1N1 influenza vaccines will be available in single-dose units, which will not need to use thimerosal as a preservative. Also, the live-attenuated nasal spray version of the vaccine is made in single-units and will not contain thimerosal. You can learn more about thimerosal online by going to www.cdc.gov/h1n1flu/vaccination/thimerosal_qa.htm.

What should I do if I get sick with flu-like symptoms before I get vaccinated?
Anyone with a fever (temperature higher than 100°) AND a cough or sore throat should stay home from work or school for at least 24 hours after the fever is gone without use of fever-reduced medications (e.g. Tylenol, ibuprofen). Wash your hands frequently. Always cover your mouth and nose when you cough or sneeze. Call your health care provider if you are sick enough that you would normally see a health care provider. Use the same judgment you would use during a normal flu season. If you would not usually see a health care provider for the symptoms you have now, you do not need to see a health care provider. You should not go to the hospital for mild illness, but anyone with severe symptoms, such as difficulty breathing, should seek health care and treatment immediately.

Take flu antiviral drugs if your doctor prescribes them.

- Some people who get seasonal or novel H1N1 flu will be recommended by their doctor to be treated with antiviral drugs.
- Antiviral drugs are prescription medicines (pills, liquid or an inhaled powder) that fight against the flu by keeping flu viruses from reproducing in your body.
- Antiviral drugs can make your illness milder and make you feel better faster. They may also prevent serious flu complications.
- Antiviral drugs are not sold over-the-counter. You must get them from your health care provider.
- Antiviral drugs are different from antibiotics.
- Antiviral drugs are recommended especially for people who are very sick (hospitalized) or people who are sick with flu-like symptoms and who are at increased risk of serious flu complications, such as pregnant women, young children, people 65 and older, and people with chronic health conditions.
- For treatment, antiviral drugs work best if started within the first 2 days of symptoms.

Are there other ways to prevent the spread of illness?
Take everyday actions to stay healthy.

- Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it.
- Wash your hands often with soap and water, especially after you cough or sneeze. Alcohol-based hands cleaners are also effective.
- Avoid touching your eyes, nose or mouth. Germs spread that way.
- Stay home if you get sick. CDC recommends that you stay home from work or school and limit contact with others to keep from making them sick.
- Follow public health advice regarding school closures, avoiding crowds and other social distancing measures. These measures will continue to be important after a novel H1N1 vaccine is available because they can prevent the spread of other viruses that cause respiratory infections.

If I had H1N1 influenza in the spring, will I need to be vaccinated?
Only those people with laboratory-confirmed novel H1N1 influenza, meaning that a sample was tested at a laboratory and found to be positive for novel H1N1 influenza, are believed to be protected from novel H1N1 influenza and do not need to get the vaccine. You may still need a seasonal influenza vaccine, so check with your health care provider who did the novel H1N1 influenza test.

Do those that have been previously vaccinated against the 1976 swine influenza need to get vaccinated against the novel H1N1 influenza?
The 1976 swine flu virus and the novel H1N1 virus are different enough that it is unlikely a person vaccinated in 1976 will have full protection from the novel H1N1 flu. People vaccinated in 1976 should still be given the novel H1N1 vaccine.

I am a health care provider, how can I get the novel H1N1 vaccine for my patients?
Health care providers who are interested in getting the novel H1N1 vaccine for their patients should pre-register with the Department of Public Health as soon as possible. Providers can get information and forms for pre-registration online at [www.ct.gov/ctfluwatch/providers](http://www.ct.gov/ctfluwatch/providers) or by calling 860-509-7929.