

Thinking about getting your child the flu vaccine? Here's what you need to know

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As we head toward winter, health professionals and the public are anxious about another influenza season like 2017, when record numbers of Australians were diagnosed with flu.

The flu is usually a mild illness that leaves us out of action for a few days. But for some, especially the [elderly](#) and [children](#), the flu can be much more severe. In fact, influenza [kills more kids](#) than the feared meningococcal infection.

This year, children aged between six months and four years will be eligible for free flu vaccines in [New South Wales](#), [Victoria](#), [Queensland](#), [Tasmania](#), the [Australian Capital Territory](#) and [Western Australia](#).

In addition, children aged six months to four years who are Aboriginal and Torres Strait Islander (who are hospitalised from flu at twice the rate of other Australian children) and children of all ages with specific medical conditions are also eligible for the funded [vaccine](#) under the [National Immunisation Program](#).

Other children in South Australia and the Northern Territory not covered under national programs can still access the vaccine from their GP at a small cost.

Why should I vaccinate my child?

Young children catch and spread the flu more than any other age group. Thousands of children are hospitalised every year; [hospitalisation rates](#) in children are much greater than in older people.

Being hospitalised is just the tip of the flu iceberg: many children will need emergency department or GP visits due to a high fever, cough, pneumonia and convulsions. Rare but severe complications such as [encephalitis](#) (life threatening brain inflammation) can also occur, and mostly in healthy children.

Vaccination is the most effective way to prevent flu. Those vaccinated are [less likely to catch the virus](#) and develop serious complications

compared with those who are unvaccinated. The risk of flu is reduced, on average, by [50-60%](#) in children receiving the vaccine.

Childhood flu vaccination programs have been shown to also [protect others](#) in the household and the community by 22-60%. This is called "herd" or "community" immunity and particularly helps protect vulnerable people who may be at risk of becoming seriously ill with the flu.

The influenza virus continually mutates, seeking to evade the immune system. Even if you have had [flu infection](#) in the past, antibodies generated from that infection may not recognise and fight off a recently mutated virus.

[Every year](#), flu experts predict which viruses are going to be circulating and adjust which strains are included in the vaccine. If unexpected or changed strains circulate, the vaccine is less effective than predicted.

Even with moderate effectiveness, if the vaccine is given to enough people, it protects them and helps drive down the spread of the virus in the community.

Is it safe?

Childhood influenza vaccination was temporarily [suspended](#) in [2010](#) after an unexpectedly large number of children had high fevers. Some children also suffered seizures.

These events were due to a single of brand of vaccine, which was withdrawn from use in this age group and is no longer produced. All flu vaccines now used in children have extensive clinical trial data demonstrating their safety.

These events have been a catalyst for major changes in Australia's approach to monitoring safety once vaccines are registered for use. Vaccine safety and side-effects are now tracked continuously through the [AusVaxSafety](#) program.

In 2017, only 6% of Australians receiving a [flu vaccine](#) reported side effects, with less than 0.5% concerned enough to contact a health professional. The side effects were well within the expected range, mostly mild and did not differ by vaccine brand.

The most common [side effects](#) in children are a mild fever, a sore arm and rash.

How do I vaccinate my child?

Flu vaccines are expected to be widely available from [mid April](#) or early May. They are available at your GP surgery, community clinic and pharmacy, depending on your age and state or territory program.

Children aged under nine years who have not been vaccinated before require two doses in their first year. In [young children](#) previously vaccinated, only one dose is required.

Children less than six months are not recommended to receive the [influenza vaccine](#): the most effective way to protect those too young to be vaccinated is by vaccinating [mothers](#) during pregnancy.

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