



Getting the Panvax® vaccine for pandemic (H1N1) 2009 influenza

The Panvax® H1N1 vaccine is made by CSL Limited, which has been producing seasonal influenza vaccines in the same way over the last 40 years. The process used to manufacture Panvax® H1N1 vaccine is the same as the process used to manufacture seasonal influenza vaccines. However, unlike seasonal vaccines, which usually protect against three strains (or types) of influenza, the Panvax® H1N1 vaccine targets only one strain – pandemic (H1N1) 2009 influenza. The vaccine only has a fragment of the killed virus. It does not contain any live virus.

Why am I being vaccinated?

While this pandemic influenza is mild in most cases it has been severe in some people and has caused a number of deaths. The Australian Government is making Panvax® H1N1 vaccine available to protect those people who are at risk of severe disease if they catch pandemic influenza and other people who wish to protect themselves or their family. It will also help protect against future waves of the virus.

How long before I'm protected? How long will I be protected?

Immunity after vaccination varies from person to person, but you will generally start producing the antibodies that provide protection after two weeks. It will protect the majority of people for the next winter influenza season and for at least one year afterwards. It is important to remember that no vaccine provides protection in every person vaccinated.

Remember, this vaccine only protects you against the pandemic (H1N1) 2009 influenza virus. You can still be infected by other seasonal influenza viruses circulating in the community. If you normally get the seasonal influenza vaccine you should continue to do so.

Is there any reason that I shouldn't get Panvax® H1N1 vaccine?

You should not be given Panvax® H1N1 vaccine (or other influenza vaccines) if you:

- have experienced anaphylaxis, a severe form of a generalised allergic reaction, following a previous dose of any influenza vaccine;
- have experienced anaphylaxis following any vaccine component, including the antibiotics neomycin or polymyxin;
- are under six months of age; or
- have a severe allergy to eggs. This includes people who have experienced swelling of the lips or tongue, or experienced acute breathing problems or convulsions, following eating eggs. People who experience less severe allergic reactions to eating eggs should discuss the risks and benefits of getting Panvax® H1N1 vaccine with their health care provider.

What about interactions with my other medicines?

Some medicines may interfere with influenza vaccines, and influenza vaccines may affect the usual dose of some medicines. People taking any medicines should discuss with their health care provider whether any precautions may be necessary.

What about side effects?

Clinical trials of the vaccine on adults and children confirmed that it was safe in those who participated. The vaccine will continue to be monitored for safety. Any reports of adverse events (side effects) will be investigated.

As with seasonal influenza vaccinations, some people may experience minor side effects after vaccination. Most commonly, you may get some swelling, redness and/or pain where the injection was given. This only lasts a short time.

Other symptoms such as tiredness, headaches, muscle aches or fever may occur and can start within a few hours of the vaccination. These simple reactions can be managed at home with rest, drinking plenty of fluid, taking paracetamol for fever or discomfort, or applying a cold compress to ease discomfort at the injection site. If you develop a fever that persists, consult your health care provider.

Some extremely rare side effects may occur at a frequency of one in a million or even less and cannot be detected by clinical trials. There have been reports overseas of a possible association between influenza vaccinations and Guillain-Barré syndrome (GBS), a rare and sometimes severe condition affecting the body's nerves. However, the link with vaccination (including with this vaccine) is not definite and evidence shows that you are four to seven times more likely to contract GBS after an attack of the actual influenza than after the vaccination.

If you experience a side effect and are worried, consult your health care provider. If you feel it is serious you may need to call an ambulance or go directly to a hospital emergency department.

You can report side effects online at www.tga.gov.au
You can also report side effects by calling the **Pandemic Hotline on 180 2007.**

Vaccine provided in multi-dose vials contains a small amount of mercury-based preservative called thiomersal to prevent growth of bacteria in vaccine. Thiomersal has a very long safety record and the levels of mercury in your vaccination are not sufficient to warrant concern.

Allergic reactions

Allergic reactions are very uncommon after vaccination but can be severe in some people if they do happen. These are most commonly due to allergy to egg protein which is why people who are allergic to eggs should not be given Panvax® H1N1 vaccine.

Vaccination of special groups

There is special concern about the risk this pandemic influenza presents to pregnant women and people with underlying medical conditions, including Indigenous people, who are at increased risk of severe disease if they catch this influenza. This vaccine is especially needed to provide protection for people vulnerable to severe outcomes from influenza.

Indigenous Australians

All Indigenous Australians have been included in the priority group, including Indigenous children six months of age and older. Indigenous Australians are approximately five times more likely than non-Indigenous Australians to be hospitalised for pandemic (H1N1) 2009 influenza. Due to the presence of underlying chronic disease, some of which is undiagnosed, and the higher level of social disadvantage, Indigenous Australians are vulnerable to severe disease and complications from the pandemic (H1N1) 2009 influenza virus.

Pregnant Women

Pregnant women should get the vaccine. Pregnant women are more susceptible to complications of the pandemic (H1N1) 2009 influenza virus than the general population, putting both mother and baby at risk. Some women who have caught this disease have miscarried or have gone into premature labour or have died. Vaccination will protect both mother and baby. Influenza vaccines are safe during pregnancy and are normally recommended for pregnant women. The Panvax® H1N1 vaccine is not a 'live' vaccine and is not a risk to unborn babies.

Health Care and Community Care Workers

Health care and community care workers are at risk of getting influenza. Vaccination not only protects health care workers from getting influenza from patients, it also prevents them transmitting the virus to patients, especially those vulnerable to severe disease if they catch pandemic influenza.

Children

It is important to vaccinate children as they have the highest rate of pandemic (H1N1) 2009 influenza infections requiring admission to hospital. Not only are children more at risk of infection themselves, they are more likely to transmit infection to others, including people vulnerable to serious outcomes. As is usual with seasonal influenza vaccination, Panvax® H1N1 vaccine is not recommended for children less than six months of age. A pre-filled syringe, rather than a multi-dose vial, may be used for children aged six months to under three years.

For more information visit www.healthemergency.gov.au or
call Pandemic Hotline on 180 2007