

FLU

**Child flu vaccine:
what you
need to know.**

**Primary
school**

The flu vaccine is offered to all primary school children in Scotland at school. It is also offered to younger children aged 2–5 years (and not yet in school) at their GP practice.

Flu can be serious. Even healthy children can become seriously ill from flu and can spread it to family, friends and others.

Having the flu vaccine every year is the best protection available against an unpredictable virus that can cause severe illness.



Facts about flu

- Flu is very infectious and can be serious.
- Even healthy children can become seriously ill from flu and can spread it to family, friends and others.
- Flu can lead to complications that may result in hospitalisation or even death.
- Every year in Scotland, children are hospitalised for the treatment of flu or its complications.
- The flu vaccine helps protect your child against flu and reduces the chance of them spreading the virus to others.
- The vaccine doesn't cause flu.

What is flu?

Flu is a virus; it spreads quickly and can infect children and adults very easily. It causes an unpleasant illness which can be serious. It may lead to days spent ill in bed rather than being at school or doing day-to-day activities.

Symptoms of flu

Children get the same flu symptoms as adults. These symptoms are worse than a normal cold and include:

- stuffy nose, dry cough and sore throat
- fever and chills
- aching muscles and joints
- headaches
- extreme tiredness.

These symptoms can last between two and seven days. Some children have a very high temperature, sometimes without other obvious symptoms, and need to go to hospital for treatment.

Flu can be very serious

In some cases flu can lead to complications. These can include:

- bronchitis
- pneumonia
- painful middle ear infection
- vomiting
- diarrhoea.

For children with health conditions (for example asthma, heart, kidney, liver, neurological disease, diabetes, immunosuppression or no fully working spleen) getting flu can be even more serious.

In the worst cases, flu can lead to disability and even death.



The flu vaccine helps protect your child against flu and reduces the chance of your child spreading the virus.

How does flu spread?

The flu virus spreads through the air when people cough and sneeze without covering their nose and mouth. Other people then breathe in the virus directly or pick it up by touching surfaces where it has landed and touch their eyes, nose and mouth.

Because young children don't always cover their noses or mouths when coughing or sneezing, the virus can spread very quickly from them. Anyone who is in close contact with a young child should ensure good personal hygiene, for example, washing their hands.





The flu vaccine

Where and when will my child get the vaccine?

The flu vaccine is offered to all primary school children in Scotland at school between October and December.

If your child has a health condition they are also offered the vaccine in school and no longer need to get it from your GP.

Children in secondary school are not currently included in the programme. If your child is in secondary school and has a health condition they can get the vaccine at their GP practice.

How is the vaccine given?

A tiny amount of the flu vaccine is given as a nasal (nose) spray into each nostril (see below). It is not an injection. It's quick and painless and there's no need to sniff or inhale the vaccine.



Watch a film of the flu vaccine being given to children in school: immunisationscotland.org.uk/childflu

Children who cannot have the nasal spray vaccine may be offered a flu vaccine as an injection in the upper arm.



Are there any reasons why my child shouldn't have the nasal (nose) spray vaccine?

Very few children cannot have the nasal spray vaccine. This includes children who:

- have their immune system suppressed because they are getting treatment for serious conditions such as a transplant or cancer
- have a serious condition which affects the immune system, such as severe primary immunodeficiency
- are taking regular high doses of oral steroids
- have had a severe reaction to a previous dose of the vaccine
- are undergoing salicylate treatment (taking aspirin).

Children with an **egg allergy** can safely have the nasal spray vaccine, unless they have had a life-threatening reaction to eggs that required intensive care.

The nasal spray vaccine may not be suitable for some children with **severe asthma** who are taking high doses of inhaled steroids, or if they have recently been prescribed oral steroids. Your local NHS Board will advise you about this.

Please make sure you list all of your child's medications on the consent form. **All** consent forms will be checked by the school health team before the immunisation session to make sure your child can have the nasal spray.



Your school health team may need to contact you to understand more about your child's condition, so please ensure you provide a daytime telephone number on the consent form.



The nasal spray vaccine contains a small trace of **pork gelatine**. Many faith groups, including Muslim and Jewish communities, have approved the use of gelatine-containing vaccines. However, it is your choice whether or not you want your child to get the nasal spray vaccine. The nasal spray vaccine is a much more effective vaccine than the injection in children. If you do not want your child to get the nasal spray vaccine for religious reasons you may request the injectable alternative by ticking the box on the consent form.

You will be sent a consent form for your child every year of primary school (your child will not automatically be offered the injectable alternative – you will need to tick the box every year).

What if my child is ill on the day?

If your child is very unwell (for example, with a fever, diarrhoea or vomiting), or if your child's asthma has worsened (with more wheezing or increased use of their inhalers three days before their immunisation) they should not have the vaccine. Speak to your school health team if you have any concerns.

What if my child misses their immunisation?

If your child misses their immunisation in school, please contact your local NHS Board (on the number in the letter enclosed) to find out about other arrangements.

I've heard the vaccine is live. Does this mean my child will get flu?

No, the virus in the vaccine has been weakened so that it doesn't cause flu. It helps your child build up immunity to flu, in the same way as a natural infection (but without the severe symptoms). The flu vaccine should start to protect most children about 10 to 14 days after they receive their immunisation.

Can my child get the flu from viral shedding?

Children who didn't get the vaccine are not at risk of catching flu from the vaccine, either through being in the same room where flu vaccine has been given or by being in contact with a recently vaccinated child. The amount of virus shed is normally below the levels needed to pass on infection to others and the virus does not survive for long outside of the body. Excluding children from school during the period when the vaccine is being offered, or in the following weeks, is therefore not considered necessary. The only exception to this would be children who are extremely immunocompromised (have a weakened immune system).

Does my child need a second dose?

Almost all children will only need one dose of the vaccine. The table below shows when children will need a second dose (4 weeks after the first) to make sure their immunity has fully built up.

Second dose is needed if your child is...

Under 9 years old
+ Health condition
+ First time getting the flu vaccine

or

Under 9 years old
+ Given the injectable vaccine
+ First time getting the flu vaccine

Please contact your local NHS Board (on the number in the letter enclosed) to find out about local arrangements.

Will there be any side effects of the vaccine?

As with all medicines, side effects to the nasal spray flu vaccine are possible but usually mild and may include a headache and muscle aches. Some, but not all, children may experience a runny or blocked nose following the nasal spray vaccine. Less common side effects include a nosebleed after the nasal spray vaccine.



Visit immunisationscotland.org.uk/childflu for a link to the full patient information leaflet.

Is the vaccine safe?

Before they are allowed to be used, all medicines (including vaccines) are tested for safety and effectiveness. Once they are in use, the safety of vaccines continues to be monitored.

The nasal spray flu vaccine has been used successfully and safely for several years and millions of doses of the vaccine have been given to children in the last four years in the UK.

Will my child be protected for life?

No, your child will need to get the flu vaccine every year. Flu viruses are constantly changing and a different vaccine has to be made every year to ensure the best protection against flu. This is why the flu vaccine is offered every year during autumn/winter.



The annual vaccine offers protection against the types of flu virus that are most likely to be circulating each winter.

How effective is the vaccine?

During the last 10 years, the flu vaccine has generally been a good match for the circulating strains of flu, even though it is not possible to predict exactly which strains will circulate each year.



Being immunised is the best protection available against an unpredictable virus that can cause severe illness.

What if I change my mind?

If you change your mind, please telephone your local NHS Board on the number given in the letter enclosed. To withdraw consent, you must write to your local NHS Board. To give consent, you will need to fill in a new consent form.

Where can I get more information?

Visit immunisationscotland.org.uk/childflu for more information.

You can also talk to your school health team, practice nurse or GP, or call the NHS inform helpline on **0800 22 44 88** (textphone 18001 0800 22 44 88). The helpline is open every day and also provides an interpreting service.



The screenshot shows the homepage of the Immunisation Scotland website. The header is blue with the text "Immunisation Scotland" and "Protection for everyone". There is a search bar and logos for "healthier scotland" and "NHS". Below the header are five navigation buttons: "Home", "Why immunise?", "When to immunise?", "Vaccines and diseases", and "Your questions answered". The main content area features a blue banner with the title "Your guide to immunisation and vaccines" and an image of a young girl flexing her arm, a woman, and a baby. Text on the banner reads: "Immunisation helps protect against serious diseases such as flu, measles, mumps, whooping cough, meningitis, and polio. Find out why immunisation is important, when to immunise, what vaccines are available and what they protect against." At the bottom of the page, there are links for "Publications", "About this website", "Accessibility", "Cookies", "Terms", and "Disney".

This resource may also be made available on request in the following formats:



0131 314 5300



nhs.healthscotland-alternativeformats@nhs.net

When to immunise	Diseases protected against	Vaccine given
8 weeks old	<ul style="list-style-type: none"> • Diphtheria, tetanus, pertussis (whooping cough), polio, Haemophilus influenzae type b (Hib) and hepatitis B (HepB) 	<ul style="list-style-type: none"> • DTaP/IPV/Hib/HepB
	<ul style="list-style-type: none"> • Pneumococcal disease 	<ul style="list-style-type: none"> • PCV
	<ul style="list-style-type: none"> • Rotavirus 	<ul style="list-style-type: none"> • Rotavirus vaccine
	<ul style="list-style-type: none"> • Meningococcal group B (MenB) 	<ul style="list-style-type: none"> • MenB
12 weeks old	<ul style="list-style-type: none"> • Diphtheria, tetanus, pertussis, polio, Hib and HepB 	<ul style="list-style-type: none"> • DTaP/IPV/Hib/HepB
	<ul style="list-style-type: none"> • Rotavirus 	<ul style="list-style-type: none"> • Rotavirus vaccine
16 weeks old	<ul style="list-style-type: none"> • Diphtheria, tetanus, pertussis, polio, Hib and HepB 	<ul style="list-style-type: none"> • DTaP/IPV/Hib/HepB
	<ul style="list-style-type: none"> • Pneumococcal disease 	<ul style="list-style-type: none"> • PCV
	<ul style="list-style-type: none"> • Meningococcal group B (MenB) 	<ul style="list-style-type: none"> • MenB
Between 12 and 13 months old – within a month of the first birthday	<ul style="list-style-type: none"> • Hib and meningococcal group C 	<ul style="list-style-type: none"> • Hib/MenC
	<ul style="list-style-type: none"> • Pneumococcal disease 	<ul style="list-style-type: none"> • PCV
	<ul style="list-style-type: none"> • Measles, mumps and rubella (German measles) 	<ul style="list-style-type: none"> • MMR
	<ul style="list-style-type: none"> • Meningococcal group B (MenB) 	<ul style="list-style-type: none"> • MenB
2 to 11 years – annually	<ul style="list-style-type: none"> • Influenza (flu) 	<ul style="list-style-type: none"> • flu vaccine
3 years 4 months old or soon after	<ul style="list-style-type: none"> • Diphtheria, tetanus, pertussis and polio 	<ul style="list-style-type: none"> • dTaP/IPV or DTaP/IPV
	<ul style="list-style-type: none"> • Measles, mumps and rubella 	<ul style="list-style-type: none"> • MMR (check first dose has been given)
Girls aged 11 to 13 years old	<ul style="list-style-type: none"> • Cervical cancer caused by human papillomavirus (HPV) types 16 and 18 	<ul style="list-style-type: none"> • HPV vaccine
Around 14 years old	<ul style="list-style-type: none"> • Tetanus, diphtheria and polio 	<ul style="list-style-type: none"> • Td/IPV, and check MMR status
	<ul style="list-style-type: none"> • Meningococcal groups ACWY 	<ul style="list-style-type: none"> • MenACWY