

Influenza Vaccine in Pregnancy and Breastfeeding 2021

MotherSafe - Royal Hospital for Women

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Information in this leaflet is general in nature and should not take the place of advice from your health care provider. With every pregnancy there is a 3 to 5% risk of having a baby with a birth defect.

Influenza (the flu)

Influenza is a viral infection of the respiratory tract commonly known as “the flu”, and can be caused by a number of different viruses. Common symptoms of influenza include high fever, headache, runny nose, muscle aches and pains, sore throat, cough and feeling generally unwell. The common cold tends to be milder and without the fever, muscle aches and pains. Influenza usually occurs during the winter months, and is highly contagious. Risk factors for more severe disease include obesity, pregnancy, heart and lung conditions such as asthma and diabetes, and being of Aboriginal or Torres Strait Islander descent.¹

What happens if you get influenza when you are pregnant?

Pregnant women who develop any type of influenza are at greater risk of developing serious complications such as pneumonia. These complications can put both mother and baby at risk.² The H1N1 influenza (“swine flu”) pandemic of 2009 showed that pregnant women were more susceptible to severe complications of the influenza virus than the general population. Some women with influenza miscarried or went into premature labour while some had to undergo early emergency caesarean sections. A greater than expected number of pregnant women with influenza required admission to intensive care and were more likely to die than non-pregnant women.²

If you have suspected influenza at any stage of pregnancy, oseltamivir (Tamiflu) is recommended to reduce severity and the risk of complications and should be taken preferably within 48 hours of symptoms. Studies in pregnancy have suggested that it is safe and beneficial. Paracetamol is also recommended to treat fever.³

Vaccination for influenza

The influenza vaccine released in Australia in April 2021 was produced in response to the strains of influenza virus predicted to be present in Australia this winter. This vaccine is different to the influenza vaccine manufactured in 2020 and previous years. All influenza vaccines available in 2021 have 4 strains (quadrivalent) – 2 influenza A strains H1N1 (Victoria or Wisconsin) and H3N2 (Hong Kong) and 2 B strains (Phuket and Washington).⁴ The vaccine contains only fragments of killed virus, and **does not contain any live virus.**⁵

Is it safe for pregnant women to receive the seasonal influenza vaccine?

Yes. Pregnant women are considered a high priority group, and it is recommended that all women who will be pregnant or planning to be pregnant during the flu season receive the vaccine as early as possible. The vaccine can safely be given before pregnancy or at any stage of pregnancy, including the first trimester. If a woman has received the previous year’s influenza vaccine early in her pregnancy, she may receive the new seasonal vaccine later in the same pregnancy. If a woman has received the vaccine before pregnancy, she should receive the same vaccine again while pregnant to protect her unborn baby.⁴

COVID-19 and Influenza

Although COVID-19 is worldwide the current virus of most public concern, it is important for women to protect themselves from any serious respiratory illness while pregnant such as influenza. If a pregnant woman decides to have the COVID-19 vaccine, there should be a minimum interval of 14 days between that and an influenza vaccine. For further information on COVID-19, see Coronavirus (COVID-19) Information Hub available at <https://ranzcog.edu.au/statements-guidelines/covid-19-statement> and the Australian Government Department of Health Shared decision making guide available at <https://www.health.gov.au/resources/publications/covid-19-vaccination-shared-decision-making-guide-for-women-who-are-pregnant-breastfeeding-or-planning-pregnancy>

How long after vaccination before protection occurs and how long will it last?

Protection after vaccination varies from person to person, but there is evidence of protection developing usually within 14 days.⁵ The currently available influenza vaccine confers protection for the whole season but best protection is within the first 3-4 months.⁴

Will the baby be protected if the mother is immunised?

Yes. Research has shown that after pregnant women are given the influenza vaccine, their antibodies are selectively transported across the placenta.^{2,4} Babies are born with antibody levels even higher than their mothers, which help protect them from the influenza virus for up to 6 months after birth.^{2,4}

Who should be vaccinated?

Under the National Immunisation Program the seasonal influenza vaccine is available free of charge to groups regarded as high priority for vaccination. This includes **all pregnant women**. It is advisable that all parents and carers of infants also have the influenza vaccine to reduce the risk of passing the infection to young babies, as influenza vaccination is not available for children until 6 months of age.^{4,5} Adults and children with egg allergy, including anaphylaxis, can be safely vaccinated with influenza vaccine, although this should be discussed with their doctor or immunisation provider.⁵

Vaccination of breastfeeding mothers

The vaccine is safe to be given to a breastfeeding mother. There is no evidence that the vaccine affects breast milk, and no evidence of risk to the breastfeeding baby.⁶

Where do I get the seasonal influenza vaccine?

Vaccination is available from a range of locations, including General Practitioner offices, vaccination clinics, hospitals and pharmacies. The seasonal influenza vaccine is free for all pregnant women, although there may be a consultation fee from the doctor or immunisation service provider. Many workplaces also offer the influenza vaccine to their staff free of charge.

References

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NSW Medications in Pregnancy & Breastfeeding Service

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