



DEPARTMENT OF VETERANS AFFAIRS
Veterans Health Administration
Washington DC 20420

In Reply Refer To: 13B

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Dear Colleagues,

While we strongly advise that all VA employees and patients be vaccinated against influenza this year, we are writing to communicate important issues about the use of a new vaccine product, live attenuated intranasal influenza vaccine (LAI V, FluMist™), in VA employees.

The standard, inactivated trivalent influenza vaccine ('the flu shot') recommended by the Advisory Committee on Immunization Practices (ACIP) for the 2003-2004 season is or shortly will be available at your facility for administration through your Influenza Immunization Programs. ACIP, the Centers for Disease Control and Prevention, and VHA recommend influenza immunization for patients and health care workers to protect them from influenza and to help prevent influenza transmission to others. The inactivated vaccine cannot cause influenza or lead to transmission of influenza to others. It is safe and advised for people with immunosuppression, immune deficiency diseases, chronic illnesses, health care workers, and others who wish to avoid getting influenza and transmitting it to others.

A new product for immunization against influenza was approved earlier this year. Live attenuated intranasal influenza vaccine (LAI V) is a form of active immunization with specific approval by the Food and Drug Administration for the prevention of disease caused by influenza A and B viruses in healthy persons 5 to 49 years of age. LAI V is administered by a small volume intranasal spray of fluid containing live, but weakened, influenza virus.

As is true with other vaccines made from live viruses, LAI V should not be given to people with impaired immune function because of a risk of infection from the vaccine virus itself. People with immune deficiency diseases such as HIV/AIDS or cancer, people who are treated with drugs that cause immune suppression, or people with underlying medical conditions that might predispose them to severe disease from influenza are included in the list of those who should not receive LAI V. In addition, persons with asthma or reactive airways disease should not receive LAI V because clinical studies demonstrated an increase in asthma symptoms among children aged 12-59 months.

Studies in children also showed that LAI V recipients shed vaccine virus in their nasal and throat secretions for up to 3 weeks after receiving it. Therefore, there is a small risk that people who receive LAI V may transmit the vaccine virus to others during this 3-week period, causing influenza disease. The manufacturer is conducting studies of viral shedding and transmission in adults.

The many published exclusions for LAIV, including the age restrictions, the chronic illness restrictions, and the theoretical risk that vaccine virus could be shed and infect others mean that many, if not most, VA employees and patients are among those who should not be vaccinated against influenza with LAIV this year. Ongoing studies may provide more information about viral shedding in adults in the future. In the absence of data defining the risk of transmitting the vaccine virus from LAIV recipients to immunosuppressed contacts, use of inactivated influenza vaccine ('the flu shot') is preferred for VA employees in close contact with immunosuppressed persons.

A few VA employees, however, may choose to be vaccinated with LAIV by their community health care provider. We recommend that these employees, together with their supervisors and appropriate local VA facility experts in Occupational Health, Infection Control, or Infectious Diseases, review the employee's working situation to assess the risk of transmitting vaccine virus to others (both at-risk patients and at-risk employees). A determination may be made to change the employee's duties temporarily or to recommend that the employee take sick or annual leave for the 3-week period of viral shedding. This determination is most likely to be made for the employee who has close contact with immunosuppressed individuals, such as persons on chemotherapy for cancer, or those on bone marrow transplant protocols.

Finally, we would like to reiterate that immunization against influenza is vital to protect individuals, patients, and the community from a serious disease that can become epidemic. Inactivated influenza vaccine ('the flu shot') should be easily available at VA facilities and from private sources and is safe and effective for nearly everyone. We strongly encourage VA employees to receive it.

Victoria Davey, RN, MPH
Deputy Chief Consultant, Public Health Strategic Health Care Group
Office of Public Health and Environmental Hazards (13)

Lawrence R. Deyton, MSPH, MD
Chief Consultant, Public Health Strategic Health Care Group
Office of Public Health and Environmental Hazards (13)

Michael Hodgson, MD, MPH
Director, Occupational Health Program
Office of Public Health and Environmental Hazards (13)

Gary Roselle, MD
Program Chief for Infectious Diseases
Office of Patient Care Services (11)

References: (available at www.cdc.gov/nip/flu/News.htm):

MMWR April 25, 2003: Prevention and Control of Influenza.

MMWR August 22, 2003: Timing of Influenza Vaccination, 2003-2004 Season.

MMWR September 26, 2003: Supplemental Recommendations of the Advisory Committee on Immunization Practices (ACIP).