



influenza



a guide for general practitioners

Risks of influenza and benefits of vaccination

Influenza is a potentially fatal disease. In Australia influenza and its complications is estimated to cause between 1,500 and 3,500 deaths and more than 18,000 hospitalisations per year.¹

There has been good progress in vaccinating older Australians against influenza but there is room for significant improvement in protecting younger people considered at risk of complication.

The NHMRC recommends vaccination in adults and children older than 6 months with chronic pulmonary or circulatory disease, including severe asthma, and other chronic illness that require regular medical follow up or hospitalisation in the preceding year. Research shows that only 42% of people aged between 18 and 65 in the at-risk groups are being vaccinated annually.²

Influenza infection usually has different symptoms and causes a more severe illness than most other common viral respiratory infections and may be a life-threatening infection in certain people; it should not be confused with the common cold!

In most parts of Australia, influenza outbreaks are seasonal, occurring between late autumn and early spring. Seasonal outbreaks occur every year and vary from mild sporadic outbreaks to serious epidemics.

It is estimated that between 5 and 20% of the population may be infected every year.³ Occasionally severe worldwide outbreaks (pandemics) occur involving higher infection rates and more severe disease.

The ISG recommends annual influenza vaccination for optimal protection

The influenza vaccine strains for the 2012 season are unchanged. For 2012 annual vaccination is recommended even for those, who received the vaccine in the previous season. Several studies have demonstrated that post-vaccination antibody titre declines over the course of a year.

Annual vaccination is recommended for optimal protection against influenza.

“GPs have a vital role in prompting patients to consider the benefits of influenza vaccination and addressing concerns about efficacy and safety!”

A/Prof John Litt, Discipline of General Practice, Flinders University in Adelaide and a Director of the ISG



Over 80 percent of Australian hospital admissions for confirmed or suspected influenza occur in those aged under 65 years⁴

Influenza prevention in general practice

Some simple steps can facilitate influenza vaccination programs in general practice:

- Flagging patient records of those who are part of a risk group early in the year. The flag can be used to identify who has had their flu shot, leaving a residue of patients who then need following up.
- Using annual influenza vaccination as a prompt to check whether patients have also received five-yearly pneumococcal vaccination, which remains significantly under-used and can be administered at the same time (and is government funded for those 65 and over).
- Reminding patients of the benefits of vaccination, including substantial reductions in hospitalization and all-cause mortality in the elderly.
- Organizing vaccination clinics, with appropriate publicity and staff support, to minimize the disruption to normal practice during the vaccination and influenza season.

REFERENCES

- 1 Newall AT, Wood JG, MacIntyre CR. Influenza-related hospitalisation and death in Australians aged 50 years and older Vaccine 2008;051:3
Australian Bureau of Statistics. 3303.0 - Causes of Death, Australia. 2007. Available at [http://www.ausstats.abs.gov.au/ausstats/subscriber.nsf/0/0704E1206AE55EB5CA25757C00137C46/\\$File/33030_2007.pdf](http://www.ausstats.abs.gov.au/ausstats/subscriber.nsf/0/0704E1206AE55EB5CA25757C00137C46/$File/33030_2007.pdf) and <http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/3303.0.55.0012008>
- 2 National Institute of Clinical Studies, numbers published by the NHMRC, May 2008
- 3 World Health Organisation, Factsheet No 211, Revised March 2003
- 4 Australian Institute of Health and Welfare. National Hospital Morbidity Database. Separation, Patient, Day and Average Length of Stay By Principal Diagnosis in ICD-10-AM, Australia 1998-99 to 2007-08. Last viewed February 2010
Based on estimating the average number of hospitalisations annually where the primary cause was laboratory confirmed influenza or suspected influenza (between 1998-99 and 2007-2008)
- 5 Australian Immunisation Handbook, 9th Edition (2008)



“Nurses are in an ideal environment to utilise every encounter to remind patients of the benefits of vaccination”

Kerryn Lajoie: Immunisation Practitioner
President of the Immunisation Nurses Special Interest Group
Victoria (INSIG) and a Director of the ISG

Who should be vaccinated?⁵

While people 65 years and older are high risk, nearly a quarter of all deaths may occur in younger age groups.

Annual influenza vaccination is recommended for any person (6 months+) who wishes to reduce the risk of becoming ill with influenza.

People at increased risk of influenza complications:*

- Older adults (65+)
- Indigenous Australians (15+)
- Those with underlying medical conditions (over age 6 months), including people with:
 - Heart conditions, severe asthma and other lung conditions, diabetes (type 1 and 2), chronic neurological disease, renal and metabolic disease, and impaired immunity
 - Pregnant women
 - Residents of nursing homes and other long-term care facilities
 - People who may transmit flu to high-risk individuals

* This group may also qualify for free vaccine under the Australian Government's National Immunisation Program

Published by the Influenza Specialist Group 2012
Suite 1222, 1 Queens Road, Melbourne, Victoria 3004
T: 03 98638651 E: Info@isg.org.au

www.isg.org.au

The Influenza Specialist Group (ISG) is a not for profit organization, consisting of medical and scientific specialists from around Australia and New Zealand, with an expertise in influenza.