What you need to know about the flu vaccination



Don't want to take this fact sheet with you? Take a photo instead! It's important to keep this information handy.

Your best defence against the flu is to get a yearly flu vaccine. Although having the flu vaccine doesn't guarantee you won't catch the flu, it will give you more protection and mean you are less likely to experience complications from a flu infection.

Protection against the flu reduces over time. Each year the flu is caused by different strains, which may not be included in the previous year's vaccine.

Who can have the flu vaccine?

Flu vaccines are available for anyone aged 6+ months. The new vaccines are available from April each year and are free for those most likely to have complications from a flu infection. The flu vaccine is recommended for those with medical conditions as well as those who are pregnant.

If you've recently had a COVID-19 infection you can have a flu vaccine as soon as you've recovered.

If you have a child under 9 years old, talk to your healthcare provider as they may need one or two vaccinations depending on whether they've had a flu vaccine before.

Giving consent for a vaccination

Before having your vaccine, the vaccinator will ask if you give consent. You have the right to make an informed choice about your healthcare including immunisations.

Before giving consent, the vaccinator will explain to you what the vaccine is for, the risks of having the vaccine, and why it is recommended for you.

The vaccinator will explain what to expect after your vaccine and how and where to seek help if you have any concerns. You will receive this information verbally and take this fact sheet home. There will be time to have all your questions answered and you can also request an interpreter if you need one.

For more information about giving consent, visit healthnavigator.org.nz/health-a-z/i/informed-consent/

Please let the vaccinator know if you/the person being vaccinated:

- is currently unwell with a high fever
- is taking blood thinning medication or have a bleeding disorder
- have had a severe allergic reaction (anaphylaxis) to any vaccine, medicine, or anything else
- have had any other vaccines in the last week.

Wait times after vaccination

You will be asked to stay after the vaccination to make sure you are feeling okay, usually between 5 to 20 minutes. If you have had previous allergies or reactions to a vaccine, food, or something else, you may be asked to stay longer. Your vaccinator will let you know how long you will need to wait.

Recording your vaccination

Te Whatu Ora records vaccines administered on a centralised database. This allows appropriate healthcare professionals to access your vaccine history and will help keep you up to date with your vaccinations.

To understand how we protect your privacy when recording vaccinations visit health.govt.nz/NIS-privacy

Are your whānau up to date with their vaccinations?

Check that you and your whānau are up to date with your vaccinations by talking with your healthcare provider.

It is safe to have other vaccines such as measles, mumps, rubella, shingles, or COVID-19 boosters at the same time as your flu vaccine.

Visit health.govt.nz/immunisation for more information on what vaccines you and your whānau may be due for.

Te Kāwanatanga o Aotearoa

New Zealand Government



After the flu vaccination



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It takes up to 2 weeks after having your vaccine for your body to start protecting against flu. As with any vaccine, you may experience some side effects. Most are mild, do not last long and happen in the first few days of having the vaccine. The flu vaccine is not a live vaccine and cannot give you the flu. Some people notice side effects after their vaccine which show their immune system is working and this can sometimes be confused with a flu infection. Serious side effects after vaccination are very rare.

What you may feel	What can help
Swelling and pain at the injection site (hard or sore to touch) Heavy arm	Place a cold wet cloth or ice pack where the injection was given (leave it on for a short time) Do not rub the injection site
Tiredness Headache Muscle aches Nausea or vomiting Chills and/or fever	Rest and drink plenty of fluids Take paracetamol or ibuprofen for pain, if needed.

Allergic reactions

A severe allergic reaction (anaphylaxis) is very rare but serious. This is the reason you will be asked to wait after your vaccination. Vaccinators are trained to manage these reactions if they occur and have the equipment for this.

Reporting side effects

If you experience any side effects, you can report them to the Centre for Adverse Reactions Monitoring (CARM). Use the online form on the CARM website otago.ac.nz/carm



If you have any concerns about your symptoms after your vaccine, talk to your doctor or practice nurse, or call healthline on **0800 611 116** anytime to get advice.

If you have immediate concerns about your safety, call **111** and make sure you tell them you have had a flu vaccination.

Post vaccine survey – we would like to hear from

If you would like to take part in a post vaccine survey, to help us monitor side effects, scan the QR code available at your vaccination appointment. The QR code links to an online registration form. Once you have registered, a text with be sent to you. Click on the link to access the survey. Thank you!

Are you a smoker or do you vape?

Smokers can be more at risk of complications following flu infection. If you would like free support on quitting or reducing the amount you smoke or vape visit quit.org.nz or call **0800 778 778**. Your vaccinator may also be able to support you with resources.

Children under 9 years who need a second dose

Your child's next flu vaccine is due:

	/	/	
DD '	MM	/ –	YYYY

Other vaccines you can book now:

Ask your vaccinator how to book your next appointment

Influenza vaccine 2024 strains

In 2024, the Southern Hemisphere egg-based and cell culture vaccines contain different strains, as recommended by the WHO.

2024 egg-based vaccine strains* (Influvac Tetra, Fluad Quad, Fluquadri, Afluria Quad)	2024 cell culture vaccine strains* (Flucelvax Quad)
 A/Victoria/4897/2022 (H1N1) pdm09-like virus A/Thailand/8/2022 (H3N2)-like virus B/Austria/1359417/2021-like virus B/Phuket/3073/2013-like virus 	 A/Wisconsin/67/2022 (H1N1) pdm09-like virus A/Massachusetts/18/2022 (H3N2)-like virus B/Austria/1359417/2021-like virus B/Phuket/3073/2013-like virus

^{*} The top two strains listed for both egg-based and cell based culture vaccines are new for 2024

The available 2024 influenza vaccines are quadrivalent vaccines, which includes two influenza A strains and two influenza B strains. The WHO has recently advised that the B/Yamagata lineage viruses are not actively circulating, and the risk of infection is considered to be low. The WHO recommendation for future influenza vaccines is to revert to a trivalent formulation as soon as practicable. This may happen for the 2025 influenza season.

Production of 2024 influenza vaccines

All five available influenza vaccines contain haemagglutinin proteins from the surface of the influenza virus. These proteins are harvested and purified from an influenza virus that is either grown in embryonated chicken eggs (egg-based vaccine) or propagated in Madin Darby Canine Kidney (MDCK) cells (cell-based vaccine, Flucelvax Quad). Four virus strains are produced separately and combined to make the quadrivalent formulation. The adjuvanted formulation, Fluad Quad, also contains a squalene-based oil-in-water emulsion adjuvant, MF59, to stimulate a stronger immune response in older people.

Egg-based vs cell-based vaccines

Egg-based and cell-based vaccines differ in their method of manufacture. Egg-based vaccines are traditionally manufactured by cultivating influenza viruses in embryonated chicken eggs. Once the influenza viruses have replicated in the eggs, the viral particles are harvested, purified and inactivated for use in vaccines. In comparison, cell-based vaccine manufacture uses mammalian cell cultures to propagate the influenza virus.

Replication via cell-line eliminates the requirement for chicken eggs. This can be advantageous in scenarios where egg-based production faces challenges, such as a shortage of eggs, egg adaptation or poor antigenic match due to mutations occurring in the circulating seasonal influenza virus during production. Egg adaptation is a phenomenon in which the virus can undergo genetic mutations as it adapts to growing in the egg environment. This can potentially impact the accuracy of the vaccine to match the circulating influenza strains.

Some studies, comparing the relative efficacy of egg-based and cell-based vaccines, show that cell-based influenza vaccine advantage is more significant during seasons when the variations between the egg-based vaccine strains and the influenza strains circulating in the population are substantial.

In healthy adults, inactivated influenza vaccine provided effectiveness against:

Type of outcome for healthy adults	Level of protection (95% confidence interval)
Confirmed influenza	59% (53-64%) to 66% (55-75%)
Influenza-related hospitalisation	61% (34-77%)
Influenza-like presentations to general practice	55% (24-73%)

For pregnant women, inactivated influenza vaccine provided effectiveness against:

Type of outcome for pregnant women	Level of protection (95% confidence interval)
Confirmed influenza	50% (15-71%)
Acute respiratory illness requiring ED visit	81% (31-95%)
Acute respiratory illness requiring hospitalisation	65% (3-87%)

For adults over the age of 65 years, inactivated influenza vaccine provided effectiveness against:

Type of outcome for adults over 65 years	Level of protection (95% confidence interval)
Confirmed influenza	60% (-1.3-84%)
Pneumonia/influenza related hospitalisation in community-dwelling elderly	51% (39-61%)
Non-fatal and fatal complications	28% (26-30%)

Other formulations and brands

2024 influenza vaccines

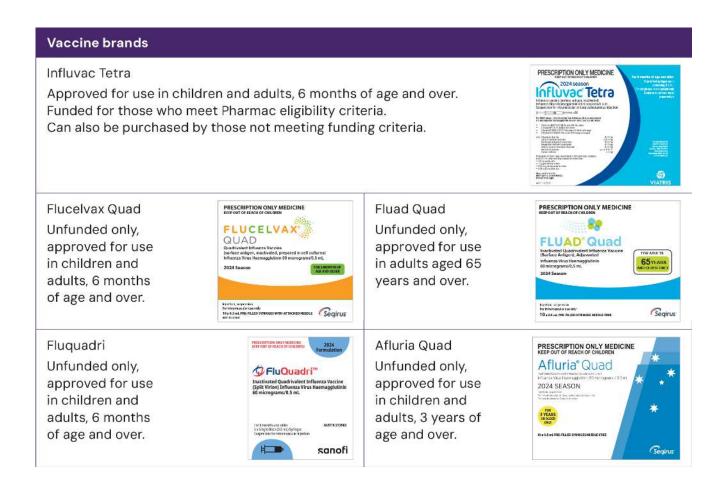
There are five quadrivalent influenza vaccines for 2024.

Brands: Influvac Tetra, Flucelvax Quad, Fluad Quad, FluQuadri, Afluria Quad

Influvac Tetra, FluQuadri and Afluria Quad are all inactivated influenza vaccine, split virion, egg-based vaccines.

Flucelvax Quad is an inactivated subunit influenza vaccine, cell culture-based vaccine.

Fluad Quad is an inactivated influenza vaccine, surface antigen, adjuvanted, egg-based vaccine.



The Afluria Quad vaccine will be used for all clinics.

Further information and source from the Immunisation Advisory Centre:

https://www.immune.org.nz/vaccine/influenza-vaccine#:":text=Influvac%20Tetra%20is%20the%20funded,years%20of%20age%20and%20over