

2020 edition

Flu

Primary
School

Child flu vaccine

What you need to know

With COVID-19 around it's more important
than ever to get the flu vaccine



Healthier
Scotland
Scottish
Government



Flu can be serious.

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

NHS Scotland strongly recommends your child receives their flu vaccine this year. This is for three reasons:

1. Flu can be serious, even for healthy children.
2. To reduce the risk of your child spreading flu to friends and family.
3. To reduce the strain that a spike in seasonal flu would put on our NHS on top of COVID-19.

It's really important that you complete and return your child's consent form as soon as possible.



? What is flu?

- Influenza (flu) is an infectious virus and can be serious.
- Even healthy children can become seriously ill from flu.
- The flu virus spreads through the air when people cough or sneeze, or by touching surfaces where it has landed then touching their eyes, nose and mouth.
- 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.

Symptoms of flu

Children get similar flu symptoms to adults. These symptoms are worse than a normal cold and may 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.

COVID-19 and Flu

It's likely that flu viruses and the virus that causes COVID-19 will both be spreading this autumn and winter. Flu is a respiratory virus so it has similar symptoms to COVID-19. For more information visit www.nhsinform.scot/childflu



Flu can be serious.

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

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

Getting flu can be even more serious for children with health conditions (for example asthma, heart, kidney, liver, or neurological disease, diabetes, immunosuppression or a spleen that doesn't work fully), and can make their condition worse.

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

What are the benefits of the flu vaccine?

With COVID-19 still around, it's more important than ever to get the flu vaccine.

The flu vaccine is the safest, most effective way to protect your child against flu.

It will reduce the risk of your child getting or spreading flu to friends and family who are at greater risk from flu and COVID-19, such as grandparents or people with health conditions.

The more people who are vaccinated against flu, the less likely it is that there will be a spike in flu, which would put pressure on our NHS on top of COVID-19.



The flu vaccine

The flu vaccine is a painless nasal (nose) spray that is the best available protection against flu.

Where and when will my child get the vaccine?

The flu vaccine is offered to all primary school children in Scotland. It is normally given 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 their GP.

If your child is in secondary school and has a health condition, please contact your local NHS Board (find the number on the letter enclosed) to find out about local arrangements for getting their vaccine.

How is the vaccine given?

A tiny amount of the flu vaccine is given as a nasal (nose) spray into each nostril. It's not an injection. It's quick and painless and your child does not have to sniff or inhale the vaccine. Your child will just feel a little tickle in their nose.

NHS Scotland will make sure your child is given the vaccine safely. Strict infection prevention and control measures will be in place.

Is the vaccine safe?

All medicines (including vaccines) are tested for safety and effectiveness before they are allowed to be used. Once they're in use, the safety of vaccines continues to be monitored. The nasal spray flu vaccine has been used safely since 2014 and millions of doses of the vaccine have been given to children in the UK.

Will the vaccine cause any side effects?

As with all medicines, side effects to the nasal spray flu vaccine are possible but usually mild. They may include a headache and muscle aches. Some children may experience a runny or blocked nose. Less common side effects include a nosebleed after the nasal spray vaccine. **These are much less serious than developing flu or complications associated with flu.**

How well does the vaccine work?

The flu vaccine should start to protect most children about 10 to 14 days after they receive their immunisation.

The annual vaccine offers protection against the most common types of flu virus that are around each winter.

Over the last few years the nasal spray flu vaccine has worked very well protecting young children against flu. It has also reduced the chance of them spreading flu into the wider community.

What if my child is ill on the day?

Your child should not have the vaccine if:

- they're very unwell (for example, with a fever, diarrhoea or vomiting)
- their asthma is worse than usual, meaning they are wheezing more or have had to use their inhaler more than they normally do in the three days before their vaccination.

Otherwise there is no reason to delay getting the vaccine.

What if my child misses their immunisation?

If your child misses their immunisation, please contact your local NHS Board (find the number on the letter enclosed) to find out about local arrangements for getting their vaccine at another time.

Can the flu vaccine give my child flu?

No, the flu vaccine cannot give your child flu. The virus in the vaccine has been weakened so that it does not cause flu. It helps your child build up immunity to flu.

Children who do not get the vaccine are not at risk of catching flu from children who have had the vaccine. It is therefore not necessary to keep children off school during the period when the vaccine is being given or in the following weeks. 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. Only certain children will need a second dose (four weeks after the first) to make sure their immunity has built up fully.

A second dose is only needed if your child is under 9 years old and getting the flu vaccine for the first time and...

Has a health condition **or** Is given the injectable vaccine

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



Visit www.nhsinform.scot/childflu#the-vaccine for a link to the full patient information leaflet.

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 and winter.

What if I change my mind?

If you change your mind, please call 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.

Are there any reasons why my child should not have the nasal spray vaccine?

An alternative injectable form of the vaccine is available for children who 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 cancer, or if they have had a transplant
- have a serious condition which affects the immune system, such as severe primary immunodeficiency
- live with or are in close regular contact with very severely immunocompromised people who require isolation
- are taking regular high doses of oral steroids
- have had a severe reaction to a previous dose of the vaccine
- are undergoing salicylate treatment (for example 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 regularly need oral steroids for asthma control. Your local NHS Board will explain this.

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

A health or immunisation 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 vaccine contains a highly processed form of gelatine (pork gelatine), which is used in a range of many essential medicines. The gelatine helps to keep the vaccine viruses stable so that the vaccine provides the best protection against flu. Many faith groups, including Muslim and Jewish communities, have approved the use of vaccines containing gelatine. However, it's 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 injected flu vaccine and is the preferred option. 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'll be sent a consent form for your child during every year of primary school. Your child will not automatically be offered the injectable alternative – you will need to tick the box every year. It's really important that you complete and return your child's consent form as soon as possible.



Where can I get more information?

Visit www.nhsinform.scot/childflu for more information.

You can also talk to a health or immunisation team, practice nurse or GP.



| 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"> Six-in-one (DTaP/IPV/Hib/HepB) |
| | <ul style="list-style-type: none"> Rotavirus | <ul style="list-style-type: none"> Rotavirus |
| | <ul style="list-style-type: none"> Meningitis B (MenB) | <ul style="list-style-type: none"> MenB |
| 12 weeks old | <ul style="list-style-type: none"> Diphtheria, tetanus, whooping cough, polio, Hib and HepB | <ul style="list-style-type: none"> Six-in-one (DTaP/IPV/Hib/HepB) |
| | <ul style="list-style-type: none"> Pneumococcal disease | <ul style="list-style-type: none"> Pneumococcal |
| | <ul style="list-style-type: none"> Rotavirus | <ul style="list-style-type: none"> Rotavirus |
| 16 weeks old | <ul style="list-style-type: none"> Diphtheria, tetanus, whooping cough, polio, Hib and HepB | <ul style="list-style-type: none"> Six-in-one (DTaP/IPV/Hib/HepB) |
| | <ul style="list-style-type: none"> Meningitis 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 meningitis C (MenC) | <ul style="list-style-type: none"> Hib/MenC |
| | <ul style="list-style-type: none"> Pneumococcal disease | <ul style="list-style-type: none"> Pneumococcal |
| | <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"> Meningitis B (MenB) | <ul style="list-style-type: none"> MenB |
| Every year from age 2 until the end of primary school | <ul style="list-style-type: none"> Influenza (flu) | <ul style="list-style-type: none"> Flu |
| 3 years 4 months old or soon after | <ul style="list-style-type: none"> Diphtheria, tetanus, whooping cough and polio | <ul style="list-style-type: none"> Four-in-one (DTaP/IPV) |
| | <ul style="list-style-type: none"> Measles, mumps and rubella (German measles) | <ul style="list-style-type: none"> MMR (check first dose has been given) |
| 11 to 13 years old | <ul style="list-style-type: none"> Cancers caused by human papillomavirus (HPV) including cervical cancer (in women) and some head and neck, and anogenital cancers (in men and women) | <ul style="list-style-type: none"> HPV |
| 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"> Meningitis ACWY (MenACWY) | <ul style="list-style-type: none"> MenACWY |

Correct at the time of printing, but subject to change. For the most up-to-date timetable visit: www.nhsinform.scot/immunisation





Translations



Easy read



BSL



Audio



Large print



Braille

Other formats available at:



www.nhsinform.scot/childflu



0131 314 5300



nhs.phs-otherformats@nhs.net

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