INFLUENZA VACCINE

by Ann Gerhardt, MD www.drgsmedisense.com (12/2006)

Do get vaccinated this year. Manufacturers do not anticipate a vaccine shortage this year, so you don't have an excuse to avoid vaccination. The optimal time (in order for your body to have time to make protective antibodies) is before flu season starts, in October and November. They have passed, but vaccination any time through the end of flu season (April) helps.

Both the inactivated and live vaccines contain two new components to protect against new viruses. None of the vaccine components protects against bird flu.

Those who should be vaccinated are... just about everyone: children aged 6-59 months, their household contacts and out-of-home caregivers; pregnant women; persons 50 years old or older; any person with a chronic medical condition; healthcare workers. It would be easier to say that the only people who shouldn't be vaccinated are healthy, non-pregnant people between the ages of 5 and 50 who have contact only with healthy people.

Adverse effects: Any person with a significant egg allergy should avoid both types of vaccine. A painful, red, swollen arm at the injection site usually means you have persistent immunity, leftover from previous vaccines. The swelling is your immune system attacking the vaccine as if it were a real infection. This is a good thing. Fever, shortness of breath or a red area that continues to expand over days are not and you should call your doctor.

The inactivated vaccine contains a small amount of thimerosal, which contains mercury. Though no documented toxicity to children has resulted from thimerosal exposure, parents have the option of their child receiving Flumist which contains no mercury. Flumist is like a superhero who lost his powers - it might cause some sniffles and sore throat, but not florid flu.

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