



The Advisory Committee on Immunization Practices (ACIP) has updated its recommendations for the use of seasonal influenza vaccines in the United States during the 2021-22 season. The committee recommends routine annual influenza vaccination for everyone aged six months and older who does not have contraindications. There is no preferential recommendation for any particular vaccine as long as it is licensed, recommended, and age-appropriate. For the 2021-22 influenza season, inactivated influenza vaccines (IIV4s), recombinant influenza vaccine (RIV4), and live attenuated influenza vaccine (LAIV4) are expected to be available.

The 2021-22 influenza season is expected to coincide with the continued circulation of SARS-CoV-2, which causes COVID-19. The committee emphasizes the importance of influenza vaccination to reduce the prevalence of illness caused by influenza and to alleviate stress on the U.S. healthcare system. Influenza vaccination could also reduce the severity of influenza illness and the number of hospitalizations and intensive care unit admissions.

The report includes updates discussed during public meetings of ACIP held on October 28, 2020; February 25, 2021; and June 24, 2021. The report notes that all seasonal influenza vaccines available in the United States for the 2021-22 season are expected to be quadrivalent. The composition of 2021-22 U.S. influenza vaccines includes updates to the influenza A(H1N1)pdm09 and influenza A(H3N2) components.

The report also recommends that vaccines be given at separate anatomic sites, and guidance has been updated concerning the timing of influenza vaccination for pregnant women in the third trimester. Children who require two doses of the vaccine should receive the first dose as soon as possible after vaccine becomes available, while non-pregnant adults should avoid vaccination in July and August unless there is a concern that later vaccination might not be possible.

Finally, the report discusses contraindications and precautions to the use of cIIIV4 and RIV4, particularly in patients with a history of severe allergic reactions to an influenza vaccine. A history of a severe allergic reaction to a previous dose of any egg-based IIV, LAIV, or RIV of any valency is a precaution to use of cIIIV4, while a history of a severe allergic reaction to a previous dose of any egg-based IIV, cIIIV, or LAIV of any valency is a precaution to use of RIV4. Use of these vaccines in such instances should occur in an inpatient or outpatient medical setting under the supervision of a provider who can recognize and manage a severe allergic reaction.

The Advisory Committee on Immunization Practices (ACIP) has recommended routine annual influenza vaccination for all people aged six months and older who do not have contraindications. There is no preference for a specific influenza vaccine when there are more than one licensed, recommended, and age-appropriate vaccine available. The updated information includes the following:

All seasonal influenza vaccines for the 2021–22 season are quadrivalent and contain hemagglutinin (HA) derived from one influenza A(H1N1)pdm09 virus, one influenza A(H3N2) virus, one influenza B/Victoria lineage virus, and one influenza B/Yamagata lineage virus.

The 2021–22 U.S. seasonal influenza vaccines include updates to the influenza A(H1N1)pdm09 and influenza A(H3N2) components, with different

strains based on the type of vaccine.

The FDA has approved Flucelvax Quadrivalent for children aged two through less than four years old. The vaccine has shown efficacy against laboratory-confirmed influenza in a randomized observer-blinded clinical efficacy study conducted among children aged two through less than 18 years over three seasons.

Guidance regarding the administration of influenza vaccines with other vaccines has been updated to reflect consideration for COVID-19 vaccination.

The guidance concerning the timing of vaccination has been modified, with early vaccination for nonpregnant adults discouraged unless there is a concern that later vaccination might not be possible.

The contraindications and precautions for the use of cclIV4 and RIV4 have been modified with regard to persons with a history of severe allergic reaction to an influenza vaccine.

The groups recommended for vaccination include all people aged six months and older who do not have contraindications, with specific recommendations for pregnant women, children aged six months to eight years old who need two doses, and people with certain medical conditions. The influenza vaccine can be administered at the same time as other vaccines, including COVID-19 vaccines, and in the same anatomical site, as long as proper administration techniques are followed.

Recommendations for the Use of Influenza Vaccines, 2021–22

Groups Recommended for Vaccination

Routine annual influenza vaccination is recommended for all persons aged ≥6 months who do not have contraindications.

When traveling to or from parts of the world, it's important to consider the risk of influenza. In temperate climate regions, such as the Northern and Southern Hemispheres, influenza tends to be seasonal and occur between October-May and April-September, respectively. However, in tropical regions, influenza can happen at any time of the year. Travelers can be exposed to influenza when visiting areas where the virus is circulating or when traveling with large tourist groups that include people from regions with active influenza viruses. To reduce the risk of influenza, it's recommended that travelers get vaccinated at least two weeks before

departure. This is especially important for those who live in the United States and are at higher risk for influenza complications, as well as those traveling to the tropics, the Southern Hemisphere during their flu season, or on organized tourist groups or cruise ships. Those who received the previous season's vaccine should consult with their healthcare provider before traveling during the summer. It's also recommended that all travelers receive the current vaccine the following fall or winter. However, it's important to note that the Southern Hemisphere vaccine may differ in viral composition from the Northern Hemisphere vaccine, and access to Southern Hemisphere formulations in the United States may be limited. For more information on influenza vaccines and travel, visit <https://wwwnc.cdc.gov/travel/diseases/influenza-seasonal-zoonotic-and-pandemic>.

FluQuadri® is an inactivated quadrivalent inactivated influenza vaccine (SPLIT VIRION) I.P. SH- 2023. FluQuadri® is indicated for the prevention of influenza disease caused by influenza types A and B viruses contained in the vaccine.

Each dose of 0.5ml contains:

- A/Sydney/5/2021 (H1N1) pdm09 - like strain.....15 mcg hemagglutinin
- A/Darwin/9/2021 (H3N2) - like strain).....15 mcg hemagglutinin
- B/Austria/1359417/2021- (B/Victoria lineage)- like strain.15 mcg hemagglutinin
- B/Phuket/3073/2013- (B/Yamagata lineage)- like strain..15 mcg hemagglutinin

with other inactive ingredients

| Age | Dose | Schedule |
|----------------------------|---|---|
| 6 months through 35 months | One or two doses ^a , 0.5 ml each | If 2 doses, administer at least 4 weeks apart |
| 36 months through 8 years | One or two doses ^a , 0.5 ml each | If 2 doses, administer at least 4 weeks apart |
| 9 years and older | One dose, 0.5ml | - |

a 1 or 2 doses depends on vaccination history as per Advisory Committee on Immunization Practices annual recommendations on prevention and control of influenza with vaccines.

(Please refer to PI on www.Sanofi.in if more information is required)

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*Based on innovative global healthcare company - Sanofi (Paris, France) - Sanofi (India) 2023 (1st Qtr). Available from <https://www.sanofi.com/your-health/flu>

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2. Safety and immunogenicity of an inactivated Quadrivalent Influenza Vaccine in Children 6 months through 8 Years of Age. The Pediatric Influenza Vaccine Study (PIDS) 059-058. JAMA. 2011;305(12):1611-1621.

3. Safety and immunogenicity of an inactivated split-virion quadrivalent influenza vaccine in Indian children 6 months to 12 years. Hum Vaccines Immunotherap. 2015;11(10):1911-1921.

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5. WHO Prequalified List of Vaccines and Biologicals. Available at: <https://www.who.int/prequal/list-of-vaccines>

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Read the full article and other vaccine compositions recommended by WHO in the link below-
<https://www.cdc.gov/mmwr/volumes/70/rr/rr7005a1.htm>

Reference: *Grohskopf LA, Alyanak E, Ferdinands JM, et al. Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices, United States, 2021–22 Influenza Season. MMWR Recomm Rep 2021;70(No. RR-5):1–28. DOI: <http://dx.doi.org/10.15585/mmwr.rr7005a1>

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For full prescribing information visit - <https://app.hidoc.co/5A87F1>

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