

Press release: Nasal spray effective at protecting vaccinated children from flu

Data published today (31 August 2017) by Public Health England (PHE) has shown that the flu vaccine nasal spray reduced the risk of vaccinated children getting flu by 65.8% in the 2016 to 2017 season in England, Wales, Scotland and Northern Ireland.

Effectiveness of flu vaccine in younger adults aged 18 to 64 years reduced the risk of flu by 40.6% among those who received the vaccine in the 2016 to 2017 season, which is within the range we would typically expect to see.

The UK programme plans to offer flu vaccine to all children aged 2 to 11 years with the aim of providing both direct protection to those children who have been vaccinated, but also by reducing their risk of infecting others. This will indirectly protect other vulnerable members of the population such as those with weakened immune systems and the elderly.

The flu strain and the flu vaccine, recommended by the World Health Organization, changes every year and the flu vaccine generally provides an important level of protection. This year we did not find that the vaccine was significantly effective in protecting against influenza for the over-65 population. This highlights the importance of the vaccine programme in children, which is intended to indirectly protect other vulnerable members of the community, as well as the children themselves.

Further action can be taken to mitigate flu such as influenza antiviral treatment and prophylaxis. New flu vaccines are also being developed, which may provide better protection for the elderly.

Jenny Harries, Deputy Medical Director for Public Health England (PHE) said:

It is good news that last winter children were particularly well protected against flu with the vaccine nasal spray. We know children can spread flu more than others and if we can keep them well it means that the infection is less likely to pass to those who are at high risk. We also saw the risk of flu fall by over 40% in vaccinated adults under 65 allowing more people to stay well last winter.

For the vast majority of us flu passes reasonably quickly, but for some, it can be extremely serious and even fatal. Vaccines are the best defence we have against flu and not only protect people who have received the vaccine but also those around them.

Achieving high coverage in children with a vaccine which has been shown to work well will offer those over 65 protection from flu, even though we did not find that the vaccine offered significant protection in this age group.

The lower effectiveness in the older population this season highlights the need to continue to expand the programme among the young, as by protecting them, we can also protect those at risk of severe disease.

The childhood flu vaccine programme is being expanded to include children in school year 4 in 2017 to 2018. Also, 4 year olds, who were previously offered flu vaccination in general practice, will now be offered it at school in reception class. So all children from reception class through to year 4 will be offered flu vaccination in the forthcoming season.

The [latest data on flu effectiveness](#) is based on contributions submitted by PHE, Public Health Wales, Health Protection Scotland, the Public Health Agency of Northern Ireland and RCGP.

The flu vaccine nasal spray used in the children's programme is the live attenuated influenza vaccine (LAIV). The vaccine used in the adult programme is 'inactivated' vaccine. It is crucial that people who are eligible for flu vaccination get vaccinated this coming season.

The flu virus continually changes and evolves – it is unpredictable. In February each year, the World Health Organisation recommends the strains of flu virus that should be included in the flu vaccine for the Northern hemisphere for the forthcoming season. These strains are those predicted to circulate in the coming season. There is always the possibility that the virus will change after the point at which vaccine strain selection has taken place, although this is unusual

Each season, the effectiveness of the vaccine will vary slightly due to a number of factors such as the age group mainly affected, the dominant circulating strain and the composition of the influenza vaccine that particular season.