

Ministry of Health

# Health Care Provider Fact Sheet: Influenza Immunization for Individuals ≥65 years of age

This document is intended for informational purposes only. It is not intended to provide medical or legal advice.

## Publicly funded influenza vaccines for individuals ≥65 years of age

The publicly funded influenza vaccines available for individuals 65 years of age and older include:

1. Quadrivalent Inactivated Vaccine (QIV) for ≥6 months of age
2. High-Dose Quadrivalent Inactivated Vaccine (QIV-HD) for ≥65 years
3. Adjuvanted Trivalent Inactivated Vaccine (TIV-adj) for ≥65 years

	<b>1. Quadrivalent Inactivated Vaccines</b>		
UIIP Abbreviation	QIV		
NACI Abbreviation	IIV4-SD		
Vaccine product	FluLaval Tetra	Fluzone® Quadrivalent	Flucelvax® Quad
Manufacturer	GSK	Sanofi Pasteur	Seqirus
Age indication	≥6 months	≥6 months	≥6 months
Vaccine type	Egg-based	Egg-based	Cell culture-based
Micrograms of hemagglutinin	15 µg	15 µg	15 µg
Dosage	0.5 mL	0.5 mL	0.5 mL
Format	MDV	MDV and PFS	PFS
Route	IM	IM	IM
Most common allergens <sup>1</sup>	<ul style="list-style-type: none"> <li>• Egg protein<sup>2</sup></li> <li>• Thimerosal</li> </ul>	<ul style="list-style-type: none"> <li>• Egg protein<sup>2</sup></li> <li>• Thimerosal<sup>3</sup></li> </ul>	Does NOT contain egg protein or thimerosal

	<b>2. High-Dose Quadrivalent Inactivated Vaccine</b>	<b>3. Adjuvanted Trivalent Inactivated Vaccine</b>
UIIP Abbreviation	QIV-HD	TIV-adj
NACI Abbreviation	IIV4-HD	IIV3-Adj
Vaccine product	Fluzone® High-Dose Quadrivalent	Fluad®
Manufacturer	Sanofi Pasteur	Seqirus
Age indication	≥65 years	≥65 years
Vaccine type	Egg-based	Egg-based
Micrograms of hemagglutinin	60 µg	15 µg
Dosage	0.7 mL	0.5 mL
Adjuvant	No	Yes
Format	PFS	PFS
Route	IM	IM
Most common allergens <sup>1</sup>	<ul style="list-style-type: none"> <li>• Egg protein<sup>2</sup></li> </ul>	<ul style="list-style-type: none"> <li>• Egg protein<sup>2</sup></li> <li>• Kanamycin</li> <li>• Neomycin</li> </ul>

MDV = Multi-dose vial      PFS = Pre-filled syringe      IM = Intramuscular injection

NACI = National Advisory Committee on Immunization

<sup>1</sup> Any component in a vaccine may be a potential allergen. This table identifies the most common allergens.

<sup>2</sup> See the contraindications and precautions section on page 6 regarding egg allergies

<sup>3</sup> Multi-dose vial format only

### Important notes:

- Fluzone® Quadrivalent and Fluzone® High-Dose Quadrivalent are **different products**. Please use caution when administering Fluzone® products to ensure that the right vaccine is being administered to the right person.

## Dose recommendations

For adults 65 years of age and older, one dose of the influenza vaccine is needed each year to provide protection each influenza season.

## Protection against influenza vaccine strains

The QIV-HD and QIV both contain four influenza strains (A(H3N2), A(H1N1) and two influenza B strains – B/Victoria lineage and B/Yamagata lineage). The TIV-adj is a trivalent vaccine, meaning it is designed to protect against three influenza strains (A(H3N2), A(H1N1) and B/Victoria lineage).

Given there have been no confirmed naturally occurring B/Yamagata lineage virus detections since March 2020, the WHO no longer recommends it to be included in influenza vaccine formulations as it is no longer warranted. QIV formulations are, however, continuing to be offered for the current season per Canadian manufacturers and World Health Organization (WHO) recommendations for influenza strains.

More details on the specific strains included in this season's influenza vaccines are outlined on page 7 of the Health Care Provider Fact Sheet: Information for the 2024/2025 Influenza Season.

The publicly funded vaccines, QIV, QIV-HD and TIV-adj are all inactivated vaccines so individuals cannot get influenza from the vaccine.

## Fluzone® High-Dose Quadrivalent (QIV-HD)

Fluzone® High-Dose Quadrivalent (QIV-HD) is an inactivated influenza vaccine that is licensed for persons 65 years of age and over. QIV-HD contains a higher amount of antigen per strain than standard-dose influenza vaccine formulations. The QIV-HD vaccine contains 60 µg of hemagglutinin (HA) protein for each of the four vaccine strains, compared to 15 µg of HA per strain in a standard dose QIV.

Studies have shown that the higher antigen content in the high-dose vaccine improves the immune response and prevention of influenza hospitalizations for adults 65 years of age and older compared to standard dose vaccine, which is important since older individuals may not respond as well to influenza vaccines compared to younger individuals.

## Fluad® (TIV-adj)?

Fluad® (TIV-adj) is an adjuvanted inactivated influenza vaccine that is licensed for persons 65 years of age and over. An adjuvant is a substance added to a vaccine that helps the recipient develop an improved immune response compared to receiving an unadjuvanted vaccine, which is important since older individuals may not have as strong an immune response to influenza vaccine as younger individuals. The adjuvant in Fluad® is an oil-in-water mixture called MF59.

## Recommendations for individuals ≥65 years

The QIV-HD and TIV-adj vaccines should be offered, when available, over QIV influenza vaccines for adults 65 years of age and older. If a preferred product is not available, any of the available age-appropriate influenza vaccines should be used. The most important thing is for older adults to be vaccinated. DO NOT DELAY VACCINATION TO WAIT FOR A PARTICULAR PRODUCT.

There is no preferential recommendation for the use of QIV-HD versus TIV-adj vaccine for this age group.

To date, there is limited evidence directly comparing QIV-HD and TIV-adj formulations or TIV-adj and QIV formulations.

Per [NACI recommendations for individuals 65 years of age and older](#), the following information should be considered when discussing vaccine options:

- There is limited evidence directly comparing QIV-HD and TIV-adj against each other.
- QIV-HD and TIV-adj both appear to provide better protection compared to QIV standard dose.
- QIV-HD and TIV-adj are both effective alternatives to QIV, with no identified difference in safety, based on direct evidence among adults 65 years of age and older.
- Given there have been no confirmed naturally occurring B/Yamagata lineage virus detections since March 2020, the additional B/Yamagata lineage strain found in the QIV-HD is no longer warranted, but continues to be offered in some formulations.

For more information on the vaccines available for individuals 65 years of age and older, please refer to the following:

- [An Advisory Committee Statement \(ACS\) National Advisory Committee on Immunization \(NACI\) Statement on Seasonal Influenza Vaccine for 2024-2025](#),
- [An Advisory Committee Statement \(ACS\) National Advisory Committee on Immunization \(NACI\) Supplemental guidance on influenza vaccination in adults 65 years of age and older](#) and;
- [Public Health Ontario's](#) Influenza Vaccines for the 2024-2025 Influenza Season.

## Vaccine administrators

Individuals who can administer the influenza vaccine include:

- Regulated health professionals who are authorized under the [Regulated Health Professions Act, 1991](#) to administer vaccines.
  - Note: trained pharmacists, pharmacy technicians, pharmacy students and interns may only administer publicly funded influenza vaccine to individuals 2 years of age and older.
- Trained individuals under a delegation made in accordance with the requirements set by the regulatory College of the regulated health professional.

## Protection against COVID-19 or other diseases

The influenza vaccine will not protect against respiratory viruses other than influenza, including the coronavirus that causes COVID-19, but will help prevent infection and illness from the influenza virus.

Expert groups and evidence indicate that getting the influenza vaccine will not increase your risk of COVID-19 infection or severe outcomes related to COVID-19.

Protection against infection and illness from the influenza virus through influenza vaccination may provide added benefit in protecting against other diseases such as invasive Group A Streptococcal Disease (iGAS) or worsening of existing chronic illnesses such as cardiovascular disease.

## Co-administration

The influenza vaccines for individuals 65 years of age and older (i.e., QIV-HD, TIV-adj, and QIV) may be given at the same time, or at any time before or after other vaccines, including COVID-19 vaccine and/or respiratory syncytial virus (RSV) vaccine. There are, however, no direct studies on the co-administration of Shingrix<sup>®</sup> with Flud<sup>®</sup> (TIV-adj) or Fluzone<sup>®</sup> High-Dose Quadrivalent (QIV-HD). With Flud<sup>®</sup>, it is unknown how the adjuvants may interact when Shingrix<sup>®</sup> is co-administered.

If multiple injections are to be given at the same visit, separate limbs should be used if possible. Alternatively, the injections may be administered into the same muscle separated by at least 2.5 cm (1"). Different immunization equipment (needle and syringe) must be used for each vaccine.

## Contraindications and Precautions

Do not administer influenza vaccine to:

- Persons with a history of serious allergic reaction (anaphylaxis) to a previous dose of influenza vaccine, and/or
- Persons with proven immediate or anaphylactic hypersensitivity to any ingredient in the vaccine, except for egg.

According to [NACI](#), egg-allergic individuals may be vaccinated against influenza using the full dose of any age-appropriate product, including QIV, QIV-HD and TIV-adj. See section IV of the Canadian Immunization Guide chapter on Influenza and statement on seasonal influenza vaccine for 2018-2019 for studies supporting the [NACI recommendation for egg-allergic individuals](#).

Anyone who has developed Guillain-Barré Syndrome (GBS) within six weeks of a previous influenza vaccination should generally NOT be vaccinated, HOWEVER, this should be weighed against the risks of not being protected against influenza.

Those with a severe acute illness at the time of immunization should wait until the symptoms subside before being immunized. Immunization should not be delayed because of minor acute illness, with or without fever.

## Adverse events

Many people who receive influenza vaccine have no side effects or adverse events. For those that do, side effects are usual mild and last a few days. The most common side effects from the influenza vaccine are:

- Redness, swelling, and soreness at the injection site
- Headache
- Tiredness/weakness
- Fever

Life-threatening allergic (anaphylactic) reactions are very rare. If they do occur, it is typically within a few minutes to a few hours after receiving the vaccine.

Some studies have found a possible small association between injectable influenza vaccine and Guillain-Barré Syndrome (GBS) and others have not found any association. Oculorespiratory Syndrome (ORS) may occur in extremely rare instances. Please refer to the Adverse events section on page 9 of the Health Care Provider Fact Sheet: Information for the 2024/2025 Influenza Season for further details.

# Guidance on reporting Adverse Events Following Immunization (AEFI)

To ensure the ongoing safety of vaccines in Ontario, reporting AEFIs by physicians, nurses, pharmacists or other persons authorized to administer an immunizing agent is mandatory under the [Health Protection and Promotion Act](#). Vaccine providers are asked to report AEFIs through local [public health units](#) using the [Ontario AEFI Reporting Form](#).

Those administering vaccines should advise vaccine recipients or their parents/guardians to contact their health care provider if they experience an adverse event after vaccination.

Health care providers should report any event which may be related to receipt of a vaccine, as outlined in [Public Health Ontario's AEFI Reporting fact sheet](#). Of particular importance are events which require medical consultation, or unusual or unexpected events. Submitting a report does not mean that the vaccine caused the event.

Some common or mild events do not need to be reported. These include:

- fever that is not accompanied by any other symptoms
- injection site reactions that last less than 4 days
- vasovagal syncope (without injury)
- events that are clearly attributed to other causes

Vaccine recipients should be advised to go to the nearest emergency department if severe reactions develop, including the following:

- Signs and symptoms of severe allergic reaction, including:
  - Hives
  - Swelling of the mouth or throat
  - Trouble breathing, hoarseness or wheezing
- Convulsions (seizures)
- High fever (over 40°C or 104°F)
- Other serious reactions

## Observation period following immunization

NACI recommends a [15-minute post-vaccination observation period](#), as specified in the Canadian Immunization Guide (CIG). If there is a specific concern about possible vaccine allergy, 30 minutes is a preferred interval as per NACI.

A reduced post-vaccination observation period (i.e., less than 15 minutes) is no longer recommended per the NACI recommendations that were made during the COVID-19 pandemic response.

## Health Care Provider information

Health care providers looking for more information about influenza, influenza vaccine, or the province's UIIP can refer to the Health Care Provider Fact Sheet: Information for the 2024/2025 Influenza Season sheet, [Public Health Ontario](#) or to their local [public health unit](#).

## Public / patient information

Individuals looking for general information about influenza, the influenza vaccine or the province's UIIP can call ServiceOntario, INFOline at 1-866-532-3161 toll free in Ontario (TTY#1-800-387-5559) or visit: [www.ontario.ca/flu](http://www.ontario.ca/flu). Questions about the vaccine that are specific to an individual's medical condition should be discussed with a health care provider or local [public health unit](#).

## Additional information

Please visit the following websites or call your local public health unit:

- a) Universal Influenza Immunization Program:  
[www.ontario.ca/page/universal-influenza-immunization-program](http://www.ontario.ca/page/universal-influenza-immunization-program)
- b) Public Health Agency of Canada - National Advisory Committee on Immunization (NACI) Statement on Seasonal Influenza Vaccine:  
[www.phac-aspc.gc.ca/naci-ccni/#rec](http://www.phac-aspc.gc.ca/naci-ccni/#rec)
- c) Public Health Ontario: [www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/influenza](http://www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/influenza)
- d) Immunize Canada: [www.immunize.ca/](http://www.immunize.ca/)
- e) Centers for Disease Control and Prevention (CDC) - Seasonal Influenza:  
[www.cdc.gov/flu/](http://www.cdc.gov/flu/)
- f) List of public health unit locations: [www.ontario.ca/page/public-health-unit-locations](http://www.ontario.ca/page/public-health-unit-locations)

Version française disponible en communiquant avec le 1-866-532-3161 ATS: 1-800 387-5559 (site web: [www.ontario.ca/fr/page/programme-universel-de-vaccination-contre-la-grippe](http://www.ontario.ca/fr/page/programme-universel-de-vaccination-contre-la-grippe)).