

## On the Front Line: Nurses Urged To Get Influenza Vaccination

It's been said that "nurses are the heartbeat of the health care system." Without them, the system could not survive.

Sometimes, however, in their dedication to caring for others, nurses may forget *to take care of themselves*. This, too, can significantly burden the healthcare system, especially when nurses catch the flu. Statistics show that fewer than half (41.8 percent) of all health care workers were vaccinated against the flu during the 2005-2006 influenza season.<sup>1</sup> In an era of nursing staff shortages and mandatory overtime, nurses may be heaping additional responsibilities on their co-workers when stricken with flu and unable to work.

But there is a quick and easy fix for this problem: a flu vaccine. In fact, the Centers for Disease Control and Prevention (CDC) and the Advisory Committee on Immunization Practices (ACIP) recommend that *all* health care professionals who work directly with patients get an annual influenza vaccination. Because flu illness is caused by flu viruses that change constantly and the vaccine is updated every year, annual vaccination is needed for protection to remain current.

### ***Fact vs. Fiction***

So why *aren't* nurses, and other health care professionals protecting themselves?

It may be because even within the medical community, research indicates there's a great deal of misinformation circulating about the flu vaccine. Despite the well-known benefits of the influenza vaccine, common misconceptions persist.

- **Fiction:** The influenza vaccine can *cause* the flu.  
**Fact:** This is untrue. The flu shot contains inactivated viruses and the nasal spray contains weakened strains that are too insignificant to cause flu illness. Many studies confirm this. If a person gets the flu following a flu vaccine, it means that person had been exposed to the virus at least 3 to 5 days prior to showing symptoms. It can take up to two weeks from the time the vaccine is administered for immunity to kick in.
- **Fiction:** Nurses are immune to influenza, or have stronger immune systems, because they work around sick people every day.  
**Fact:** Because influenza viruses are constantly changing, past exposure does not provide protection against new influenza virus strains.
- **Fiction:** The vaccine's side effects are worse than getting the flu itself.  
**Fact:** The most common side effects are redness and mild soreness at the injection site. These symptoms usually resolve themselves in one to two days. Persons who chose to get the nasal vaccine can avoid these injection-related problems, but can have nasal congestion or a runny nose for a day or two. The most serious side effect is an allergic reaction by those who have a severe allergy to eggs (the vaccine viruses are grown in eggs). For this reason, getting an influenza vaccination is not advised for people with an egg allergy. But egg allergies are rare, and severe allergic reactions are even rarer.
- **Fiction:** The flu vaccine is not effective.  
**Fact:** When there is a good match between circulating influenza virus strains and those in the vaccine, effectiveness rates have been as high as 70%-90% in healthy adults. Although the

vaccine does not prevent *everyone* from getting ill, vaccination can make your illness milder. Plus the vaccine greatly reduces the chances of hospitalization and death.

### ***The Scoop on Flu***

Although influenza is mainly spread by droplet transmission, the virus can also infect others by remaining infectious on contaminated objects—such as doorknobs, telephone receivers, food utensils and trays, beds and medical equipment—for hours. Also, people can spread the flu for a day or so before they even develop symptoms.

The period when an infected person is most likely to transmit the virus to others is during the first three days of illness. The chance of transmission wanes over five to seven days in otherwise healthy adults.

Influenza usually starts suddenly and may include the following symptoms:

- Fever (usually high)
- Headache
- Tiredness (can be extreme)
- Cough
- Sore throat
- Runny or stuffy nose
- Body aches
- Diarrhea and vomiting also can occur, but are more common in children.

General treatment for influenza includes bed rest, drinking plenty of fluids and taking over-the-counter medicines such as acetaminophen. Children suspected of having influenza should not be given aspirin, as this may increase the risk of a complication known as Reye Syndrome. In addition, there are prescription antiviral medicines that can help prevent influenza infection and, when used within the first 48 hours, can reduce the duration and severity of the illness.

The role that nurses and other health care workers play in helping prevent influenza-related illness and death—especially in at-risk elderly patients and young children—cannot be underestimated.

Patients of nurses and health care workers who are at the greatest risk for influenza-related complications include people 65 or older; individuals with chronic pulmonary or cardiovascular conditions; people with chronic illnesses such as diabetes mellitus, cardiovascular disease, kidney disease, cancer, AIDS/HIV and asthma; pregnant women; infants; children ages six months through 5 years and residents of nursing homes and other chronic care facilities. In addition to high risk groups, CDC recommends vaccination for all children aged 6 months through 18 years; people age 50 or older; and all healthcare workers to help curb the spread and possibly severe complications of influenza

### ***Two Easy Options***

The influenza vaccination remains the *best way* for nurses and others to protect themselves, their families and their patients during the annual influenza epidemic. All they need to do is choose the method of delivery.

**Intramuscular influenza vaccination:** Administered by shot, this is one of few immunizations that is recommended for *all* health care professionals, regardless of any special conditions (i.e., pregnancy, HIV infection, severe immunosuppression, renal failure, asplenia, diabetes and alcoholism/alcoholic cirrhosis.)<sup>2</sup>

**Live intranasal influenza vaccine:** This live vaccine is approved for use in healthy persons 5 to 49 years of age, who are not pregnant, and do not provide care for severely immuno-compromised people

when they are in a protective environment, such as a bone marrow transplant unit.. Most healthcare workers who are younger than 50 years of age can receive the intranasal vaccine if they choose to.

***Safe, Not Sorry***

The role that nurses play in helping others is well known. Now, it's time for nurses to consider how protecting *themselves* against the flu will also help them in their mission to protect others.

For more information about influenza and the influenza vaccine, visit [www.cdc.gov/flu](http://www.cdc.gov/flu) or call 800-CDC-INFO (800-232-4636).

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<sup>1</sup> CDC. Prevention and control of influenza: Recommendations of the Advisory Committee on Immunization Practice (ACIP). *MMWR*. 2008;57(Early Release):1-60

<sup>2</sup> CDC, *MMWR*. 2004;52(RR06):1-40.