The Publicly Funded Seasonal Influenza Vaccine Information Statement and Consent Form

《 What is influenza?》

Influenza (also known as the flu) is an acute respiratory illness caused by influenza viruses. The flu is different from the common cold in that it tends to come with noticeable symptoms and lasts longer. The flu symptoms include fever, headache, muscle aches, fatigue, runny nose, sore throat, cough, etc. The flu, in some cases, can cause complications and even lead to death. The most common complication is pneumonia. Other complications include otitis media, sinusitis, encephalitis, brain lesions, myocarditis, Reye's syndrome and other serious infections.

《 How is influenza transmitted?》

The influenza viruses are transmitted mainly from person to person through coughing or sneezing. People may also get infected by touching surfaces contaminated by the flu viruses and then touching their mouths or noses. People with flu can be infectious from 1 day before to 3~7 days after symptom onset. Children tend to shed the virus for a longer period of time.

Why should students get vaccinated?

Research indicates that school-aged children and teenagers are among the first groups to be affected during flu season. Since the flu spreads easily and quickly among students, they are more likely to become spreaders of the virus. Vaccinating students against influenza not only reduces transmission among them and lowers medical costs, but also helps protect high-risk groups (such as the elderly and young children) from developing severe complications by limiting the spread of virus.

« Flu vaccine components »

The influenza vaccine is an inactivated vaccine. Since the influenza virus mutates frequently, the World Health Organization (WHO) monitors its prevalence and mutations each year to recommend the appropriate vaccine components. The trivalent influenza vaccine purchased by the government this year (2025) contains the antigen components recommended by the WHO for the 2025-2026 northern hemisphere flu season. Its efficacy is consistent with that reported in other countries.

« Vaccine dosage, interval and charge **»**

Students should receive 0.5mL vaccine per dose. Children below the age of 9 who have never been vaccinated against influenza need 2 doses, with an interval of at least 4 weeks apart. Children below the age of 9 who have previously been vaccinated against influenza need only 1 dose. Children aged 9 and above need only 1 dose regardless of their vaccine history. Since the circulating influenza viruses may vary from year to year, annual vaccination is required for eligible individuals. Protection begins around two weeks after vaccination and lasts for one year.

Influenza vaccines can be administered at the same time (or at any time interval) with any other vaccine(s) in different body sites. The vaccines provided this year were produced or imported by Taiwan Adimmune Corporation, GlaxoSmithKline Far East B.V., Taiwan Branch, TTY Biopharm Company Limited, Sanofi Taiwan Co., Ltd., and the Medigen Vaccine Biologics Corporation. In terms of efficacy

and safety, all vaccines from these 5 companies meet the regulatory requirements of the Food and Drug Administration under Taiwan's Ministry of Health and Welfare. These vaccines have been approved for use/import, and will be distributed based on the order of arrival. All schools will be subsidized with one dose of vaccine for each student free of charge. Students who are unable to receive vaccination on the scheduled school vaccination day must bring the form issued by the school to a designated clinic/hospital to get vaccinated at their own expense. Students below grade 2 who are receiving their first-ever flu vaccine may receive the second dose at their own expense at any designated clinic/hospital at least 4 weeks after the first dose received at school.

« Vaccine effectiveness »

The vaccine is 30-80% effective depending on the age or physical condition of the individual vaccinated. For adults over the age of 18, the vaccine is approximately 41% effective against influenza-associated hospitalization, and 82% effective against severe cases requiring intensive care unit admission. The vaccine effectiveness for children and adolescents aged 6 months to under 18 years is generally equivalent to that for adults.

« Vaccine contraindications »

- 1. The vaccine should not be administered to anyone allergic to any component of the vaccine.
- 2. The vaccine should not be administered to anyone who has had severe allergic reactions to previous dose(s) of influenza vaccine.

« Vaccine precautions »

- 1. Individuals with a fever or moderate to severe acute illness are advised to postpone vaccination until their condition has stabilized.
- 2. Due to insufficient clinical data on relevant vaccine efficacy and safety, infants younger than 6 months of age should not receive the vaccine.
- 3. Individuals who have suffered from Guillain–Barré syndrome within 6 weeks following a previous dose of influenza vaccine should consult doctors before receiving the vaccine.
- 4. The vaccine should not be administered to persons deemed medically unfit for vaccination by a doctor.

« Fainting after vaccination (common among adolescents)

Fainting is often accompanied by symptoms such as dizziness and nausea, typically triggered by psychological stress or anxiety. Fainting after vaccination is especially common among adolescents. During mass vaccination, instances of collective fainting may occur and can be categorized as a collective psychogenic disease. Scientific evidence shows that fainting after vaccination is not linked to the safety of the vaccine itself and does not lead to any long-term health consequence.

Students are recommended to avoid fasting or dehydration prior to the vaccination. Prolonged waiting time before injection should be avoided, either. Students may listen to music, watch videos or chat with others to relax themselves while waiting for receiving vaccination. Students should receive the vaccination in a seated position and remain seated or lying down for around 15 minutes after the injection. They are advised to continue monitoring themselves closely for 15 minutes more afterwards to prevent injury in case of fainting.

Students who faint after vaccination are advised to sit or lie down in a rest area, and medical staff should be notified. (At school, teachers and medical staff should be informed.) If the student does not recover as expected, please seek emergency medical services.

《 Side effects and vaccine safety 》

The influenza vaccine is an inactivated vaccine made from killed viruses. People do not get infected as a result of the influenza vaccine injection. Pain, redness and swelling may occur at the injection site after vaccination. A small number of people may experience mild reactions such as fever, headache, muscle aches, nausea, itchy skin, hives or rash, which typically resolve within 1 to 2 days. As with other medicines, the influenza vaccine may, in rare circumstances, cause severe side effects, such as immediate allergic reactions, and even anaphylactic shock (clinical manifestations include difficulty in breathing, hoarseness, asthma, swollen eyes or lips, dizziness, and increased heart rate). If such side effects occur, symptoms usually appear within a few minutes to a few hours after the injection of the vaccine. Other adverse events that have been occasionally reported include nervous system symptoms (such as brachial neuritis, facial nerve paralysis, febrile seizure, meningitis, and Guillain-Barré syndrome characterized by symmetrical paralysis) and blood system symptoms (such as transient platelet reduction, with clinical symptoms such as purple spots or blood spots on the skin and bleeding disorder). Except for the 1976 swine flu vaccine, the 2009 H1N1 influenza vaccine, and some seasonal influenza vaccines, which epidemiological studies have shown may be associated with Guillain-Barré syndrome, there is little evidence linking influenza vaccines to other side effects. In addition, current studies and WHO reports both indicate that receiving inactivated influenza vaccines during pregnancy does not increase the risk of adverse pregnancy or fetal outcomes.

Current studies show that individuals with egg allergies do not experience a significantly higher incidence of allergic reactions after receiving egg-based influenza vaccines. Based on international recommendations, people with egg allergies can safely receive flu vaccines.

《 Post-Vaccination Care information》

- 1. Influenza vaccine is a safe and inactivated vaccine containing killed viruses. Possible side effects of the vaccine include pain, redness and swelling at the injection site. A small number of people may experience mild reactions, such as fever, headache, muscle aches, nausea, itchy skin, hives or rash, which typically resolve within 1 to 2 days after vaccination. Serious side effects are very rare.
- 2. Approximately 1~2% of individuals may have a fever within 48 hours after vaccination. If this is the case for your child, please inform the doctor about the recent vaccination as a reference for diagnosis. If the fever persists for more than 48 hours after vaccination, it may be due to other possible infections or causes.
- 3. If your child experiences any symptoms of discomfort after vaccination, such as a persistent fever, changes in consciousness or behavior, difficulty breathing, or a rapid heartbeat, please seek medical attention immediately. You should also report the situation to your child's homeroom teacher/school nurse, the local health bureau, or call the Taiwan CDC's 1922 consultation hotline.
- 4. Fainting is often accompanied by symptoms such as dizziness and nausea, typically triggered by psychological stress or anxiety. Fainting after vaccination is especially common among adolescents. During mass vaccination, instances of collective fainting may occur and can be categorized as a collective psychogenic disease. Scientific evidence shows that fainting after vaccination is not linked to the safety of the vaccine itself and does not lead to any long-term health consequence. If fainting or dizziness persists after vaccination, please seek medical help immediately.
- 5. While the vaccine can reduce the risk of influenza infection, your child may still suffer from other respiratory tract infections. Please help your child to keep good hygiene and take preventive measures to stay healthy.
- 6. If your child is taking antiplatelet or anticoagulant medications or suffering from dysfunction of blood coagulation, he/she should compress the injection site for at least 2 minutes after vaccination and monitor for any signs of hemorrhage or hematoma.
- 7. In school-based influenza immunization programs, every student gets one dose of vaccine in school. Students below grade 2 who are receiving their first-ever flu vaccine may receive the second dose at their own expense at any designated clinic/hospital at least 4 weeks after the first dose received at school.