2019-20 Influenza Vaccine Screening for Persons who Report Egg Allergy

For the 2019-20 influenza season, the Advisory Committee on Immunization Practices (ACIP) recommends the following:

1. Persons with a history of egg allergy who have experienced only hives after exposure to egg should receive influenza vaccine
   - Use any licensed, recommended influenza vaccine (i.e., IIV, RIV4, or LAIV4) that is otherwise appropriate for their age and health status

2. Persons who report having a reaction to egg involving symptoms other than hives (such as angioedema or swelling, respiratory distress, lightheadedness, or recurrent vomiting) or who required epinephrine or another emergency medical intervention:
   - May receive any licensed, recommended influenza vaccine (i.e., IIV, RIV4, LAIV4) that is otherwise appropriate for their age and health status
   - Vaccine should be administered in an inpatient or outpatient medical setting
   - Administration should be supervised by a health care provider who is able to recognize and manage severe allergic reactions
   - No post-vaccination observation period is recommended specifically for egg-allergic persons
     - However, ACIP recommends that vaccine providers consider observing patients for 15 minutes after administration of any vaccine to decrease the risk for injury should syncope occur

Remember:
A previous severe allergic reaction to influenza vaccine, regardless of the component suspected of being responsible for the reaction, is a contraindication to future receipt of the vaccine.


Michigan Department of Health and Human Services — Division of Immunization
Points to consider for the 2019-20 Influenza Season

- **Influenza vaccine abbreviations**
  - Inactivated Influenza Vaccine (IIV) – trivalent (IIV3) and quadrivalent (IIV4)
  - cell-cultured Inactivated Influenza Vaccine – quadrivalent (ccIIV4)
  - Recombinant Influenza Vaccine – quadrivalent (RIV4)
  - Live Attenuated Influenza Vaccine – quadrivalent (LAIV4)
- **Severe allergic reactions, including anaphylaxis, can occur to components of all vaccines**
  - Such reactions are rare and are not always related to egg proteins
- Tolerance to egg-containing foods does not exclude the possibility of egg allergy
- Review of the studies looking at IIV and LAIV indicate that severe allergic reactions in persons with egg allergy are unlikely
  - Use of LAIV4 for persons with egg allergy of any severity was approved by ACIP in February 2016
  - In discussing LAIV4 for egg-allergic persons in February 2016, ACIP heard data from three studies which evaluated the use of LAIV in egg-allergic children, in which no cases of anaphylaxis occurred
- With the exceptions of ccIIV4 and RIV4, currently available influenza vaccines are prepared by producing virus in embryonated eggs
- Severe allergic reactions to vaccines, although rare, can occur at any time, even in the absence of a history of previous allergic reaction; all vaccine providers should be familiar with their office emergency plan and be certified in cardiopulmonary resuscitation (CPR)
- For clinics that are administering vaccines, a minimum of epinephrine and equipment for maintaining an airway should be readily available, and staff should be trained on how to use it appropriately
  - Emergency medications, such as epinephrine, and equipment for maintaining an airway should not be expired or outdated
  - Refer to Immunization Action Coalition’s handouts on medical management of vaccine reactions at [https://immunize.org/handouts/vaccine-reactions.asp](https://immunize.org/handouts/vaccine-reactions.asp)
- For persons who report an egg allergy, it is not recommended to administer divided doses of influenza vaccine or to skin test with the vaccine before administrating any flu product


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