



## ***Pandemic Influenza Q & A for Pregnant Women/Children***

### **Q: What special considerations should be given to pregnant women when preparing for a possible influenza pandemic?**

A: Pregnancy has been shown to increase the risk for serious medical complications of influenza, especially during the later stages of pregnancy, as documented in limited studies and case reports. Women in their third trimester of pregnancy were hospitalized at a rate comparable with that of non-pregnant women with high-risk medical conditions. During the influenza pandemic of 1918, people age 20 to 34 years experienced high fatalities, and pregnant women had the highest case fatality rates.

### **Q: What special considerations should be given to young children when preparing for a possible influenza pandemic?**

A: Young children infected with the influenza virus can become ill enough to require hospitalization, just like the elderly, although death is rare. Infants less than 6 months of age are the pediatric group at greatest risk for serious complications from influenza. School-age children often serve as a reservoir for influenza, bringing the virus home to their younger siblings and other family members. Infants, toddlers, and school-age children and their caretakers are all at increased risk for spreading influenza, and infants may shed influenza virus for up to 14 days compared to the more typical 7 days for adults.

### **Q: What steps can be taken to protect pregnant women and young children in the event of an influenza pandemic?**

A: The same common prevention measures that are recommended during seasonal influenza outbreaks should also be taken to reduce the risk of infection during a pandemic. They include:

- Frequent and thorough hand washing.
- Covering your mouth when you sneeze or cough, preferably using a tissue, and then disposing of the tissue appropriately.
- Staying home if experiencing symptoms of illness. Ill family members can wear masks if they must interact with the public.

### **Q: How can vaccinations help protect pregnant women?**

A: If influenza vaccine is available, pregnant women are often considered as high-risk groups, thus being eligible for limited supplies of vaccine. Generally, live virus vaccines should not be administered to pregnant women, but inactivated viral vaccines pose no problem. Vaccination can take place in any trimester. It is estimated that an average of 1-2 hospitalizations can be prevented for every 1,000 pregnant women vaccinated. One study of influenza vaccination of about 2,000 pregnant women demonstrated no adverse fetal effects associated with influenza vaccine.

**Q: How can vaccinations help protect young children?**

A: For children less than 6 months of age, vaccination of household contacts and out-of-home caregivers might decrease their probability of infection. Children less than 9 years of age should receive two doses of influenza vaccine at least 1 month apart. All children 6-23 months of age should be vaccinated against influenza due to their increased risk of influenza-related hospitalization. Vaccine should also be administered to all children and adolescents 6 months of age or older who have high-risk medical conditions.

**Q: Can antivirals help?**

A: If antiviral medication is available, there is often very limited data upon which to base decisions whether to use a specific antiviral medication for prophylaxis or treatment of influenza in pregnant women and young infants. Oseltamivir (TamiFlu) is the antiviral medication felt to be most efficacious at this time against the H5N1 strain of influenza that has been circulating in Asia and Europe. This medication is recommended to be used during pregnancy only if the potential benefit justifies the potential risk to the fetus (similar statement for breastfeeding mothers). The safety and efficacy of TamiFlu in patients younger than 1 year of age has not been studied. TamiFlu is licensed for treatment of influenza in patients age 1 year or older, but must be started within 48 hours of symptom onset. It is licensed for prophylaxis of influenza in adolescents 13 years and older.

Sources: Prevention and control of Influenza: Recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR* July 13, 2005, Vol. 54