Flu Vaccination

Vaccination during pregnancy protects both mother and unborn child.
Staying healthy during pregnancy

During pregnancy, the well-being and health of the mother and unborn child come first.

Flu (influenza) can be detrimental to the health of the mother and unborn child. During pregnancy, the risk increases of severe cases of flu with complications, such as pneumonia, which must be treated in a hospital. In addition, having the flu during pregnancy increases the risk of delayed growth and miscarriage or premature birth.
Seasonal flu: preventable risk to the mother and child
The Standing Committee on Vaccinations (STIKO), an independent group of experts, recommends that all pregnant women have the flu vaccine to protect against seasonal flu. This vaccination has been proven to offer effective protection to the mother and child.

Seasonal flu: what is it?
Flu (seasonal Influenza) is a highly infectious disease. During the winter months, especially from January to March, flu outbreaks occur regularly in our part of the world. The chance of becoming infected and falling ill is particularly high during this season.

Influenza viruses are transmitted by tiny droplets, for example when people speak or cough, as well as by hands or touching contaminated surfaces. The viruses infect the mucous membranes or upper respiratory tract, causing the typical symptoms, such as a dry cough and sore throat, and making the body more susceptible to certain bacterial pathogens, which can then cause a simultaneous infection with other pathogens.
The influenza vaccine only protects against influenza viruses and not generally against other colds or infection with COVID-19.

**GOOD TO KNOW**

Symptoms of a real bout of flu

- Sudden onset accompanied by fever (≥ 38.5°C)
- Dry irritating cough
- Headache, sore throat, aches and pains in the joints and muscles
- Fatigue and occasional, nausea/vomiting
- Sweats

These typical symptoms develop in around one third of all cases.

Flu can even cause serious complications, such as pneumonia or myocarditis.

Whereas the common cold, caused by different types of viruses, comes with much milder symptoms and subsides after a few days.

**Why is the flu dangerous during pregnancy?**

During pregnancy, the immune system is less active. This is a natural defence mechanism for the unborn child – as it prevents it from being attacked as a foreign body by the pregnant mother’s immune system. It also means, however, that women are more susceptible to infection.
That is why:
Prevention through vaccination
is better than treatment.

In addition, respiration and circulation change during pregnancy, increasing the risk of a serious bout of the flu.

**Limited treatment options during pregnancy**

All drugs administered during pregnancy must be carefully considered as the healthy development of the child and safety of the mother have the utmost priority. The same also applies to antiviral drugs, which should only be administered in individual cases after careful consideration.

Antibiotics are ineffective in combatting a viral infection, such as the flu because they are only suitable for treating bacterial infections. For this reason, antibiotics are used at most for the simultaneous onset of complications caused by bacteria.

**That is why**: Prevention through vaccination is better than treatment.
How can I protect myself?
The best protection against flu is vaccination in time before the flu season starts. It helps the body to produce antibodies against flu viruses.

VACCINATION RECOMMENDED

The STIKO recommends vaccination against seasonal flu for all healthy pregnant women from the second trimester of pregnancy. Pregnant women with chronic primary diseases, such as asthma, diabetes or high blood pressure, should be vaccinated independent of the stage of pregnancy, and in particular already from the first trimester of pregnancy. Corona vaccination is also recommended for pregnant women (from the second trimester).

Single vaccination against whooping cough (pertussis) is also recommended in every pregnancy in the third trimester (after the 28th week of pregnancy). However, a whooping cough vaccine is not available separately. Hence vaccination is performed with a combined vaccine against tetanus, diphtheria and pertussis (whooping cough) and sometimes additionally against polio (infantile paralysis).

Annual reformulation of vaccines
Since the influenza virus readily changes, the vaccines must be adjusted each year to provide the best possible protection. The so-called quadrivalent vaccines protect against the four influenza viruses which are predicted to occur most frequently in the next flu season. The Standing Committee on
Vaccination (STIKO) recommends the use of quadrivalent vaccines.

As with any type of medical treatment, not every person reacts the same to each of the different active ingredients. In individual cases, in which pregnant women became infected with flu, the illness was milder.

**Good tolerability for the mother and child**

When vaccinating adults, no live vaccines capable of reproduction are administered, rather only certain parts which are required to provoke the immune response. It is therefore impossible for mother and child to develop influenza from the vaccine. So-called inactivated vaccines – as are also used for tetanus and whooping cough – are safe and effective for mother and child. Immunisation with live vaccines (such as for measles, mumps and rubella) should, by contrast, not occur during pregnancy, but rather prior to a possible pregnancy.
Safety of vaccination confirmed

The safety of the vaccine for both pregnant women and unborn children has been confirmed through a number of studies. An increase in the number of serious reactions due to the vaccine was not determined. There was neither an increase in the number of premature births or caesarean sections, nor were there differences in the babies’ state of health after birth.

Influenza vaccination for pregnant women may be performed as part of general pregnancy care in a prenatal clinic. General or internal medicine practices, some health agencies, pharmacies or employers also offer the vaccination. Health insurance companies bear the cost of recommended vaccinations. The flu vaccine can be administered together with a vaccine to protect against Corona. In this case, vaccine reactions may occur more frequently in comparison to doses given at different times.
When should you not vaccinate?

Vaccines should not be given during a febrile illness (38.5°C) or severe acute infection. However, the vaccine should be delivered as soon as possible afterwards.

In the event of a medically diagnosed severe allergy to chicken protein, which is very rare, vaccination should only be given in an environment in which clinical monitoring and treatment is possible after vaccination. Please speak to your doctor about this.

Risks: possible side effects
Possible side effects of the flu vaccination commonly include reddening and soreness at the site of the injection. Fever, nausea or muscle pain are uncommon. These symptoms are generally harmless and indicate that the immune system is being activated. Serious side effects, such as a rash or allergic immediate reaction, only occur in extremely rare cases.

One thing is sure: The risks associated with vaccination are significantly lower than the risk of contracting a serious bout of influenza!
Twice the benefit

Vaccination also protects children after birth because antibodies are passed to the child by the placenta, and is known as ‘passive immunity’. This is vital protection as both flu and whooping cough have been frequently linked to complications in children during the first year of life. Infants can only get vaccinated against the flu once they are six months old. Initial vaccination against whooping cough is started after the age of two months, but reliable protection by the vaccine only develops in the 5th month of life.
Additional protection: good hygiene practice
The risk of contracting the virus can also be reduced in conjunction with the flu vaccine by practicing good hygiene:

➤ Wash your hands frequently with soap
➤ If you do become infected, keep a distance from other people
➤ Try not to use tissues more than once and dispose of them quickly
➤ Cough or sneeze into the crook of your arm and not into your hand to minimise the spread of viruses/bacteria

GOOD TO KNOW
Anyone who has regular contact with a newborn baby should consider a flu vaccination to protect themselves as well as the infant. Furthermore, the STIKO recommends up-to-date vaccine protection against whooping cough for household contacts and carer givers of newborns.
Further information
on vaccinations can be found at:
➤ www.impfen-info.de/grippe
➤ www.infektionsschutz.de
➤ www.rki.de/influenza-impfung
on healthy growth and development at:
➤ www.kindergesundheit-info.de

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