

2024/25 Seasonal Influenza Vaccine Eligibility

Quadrivalent and Trivalent Inactivated Influenza Vaccines (QIV & TIV) and Quadrivalent Live Attenuated Influenza Vaccine (LAIV-Q)

Contains:

- A/Victoria/4897/2022 (H1N1)pdm09-like virus
- A/Thailand/8/2022 (H3N2)-like virus
- B/Austria/1359417/2021-like virus
- B/Phuket/3073/2013-like virus (in quadrivalent vaccines only)

The A/Thailand strain is different from the strain in the 2023/24 season vaccines.

Recommended and provided free to people 6 months of age and older. Influenza vaccination is particularly recommended for the following groups:

1. **People at high risk:**

- People aged 65 years and older
- People of any age who are residents of long-term care facilities
- Adults (including pregnant people) and children with the following chronic health conditions:
 - Cardiac or pulmonary disorders (e.g., bronchopulmonary dysplasia, cystic fibrosis, asthma)
 - Diabetes and other metabolic diseases
 - Cancer; immunodeficiency (including human immunodeficiency virus [HIV] infection); immunosuppression due to underlying disease or therapy (e.g., severe rheumatoid arthritis requiring immunosuppressive therapies)
 - Chronic kidney disease
 - Chronic liver disease, including hepatitis C
 - Anemia and hemoglobinopathy
 - Conditions that compromise the management of respiratory secretions and are associated with an increased risk of aspiration (e.g., cognitive dysfunction, spinal cord injury, seizure disorder, and neuromuscular disorders)
- Children and adolescents (6 months to 18 years of age) with conditions treated for long periods with acetylsalicylic acid
- Children and adults who are morbidly obese (adult BMI ≥ 40 ; child BMI assessed as $\geq 95^{\text{th}}$ percentile adjusted for age and sex)
- Indigenous peoples ^A
- Healthy children 6 to 59 months of age
- Pregnant people at any stage of pregnancy during the influenza season (typically spanning Nov-Apr)
- Inmates of provincial correctional institutions
- People who interact closely with influenza-susceptible animals, including poultry, dairy and swine industry workers (Immunization may reduce the potential for human-avian re-assortment of genes should such workers become co-infected with human and avian influenza.)

2. **People capable of transmitting influenza to those at high risk:**

- All health care workers (including all health authority staff, accredited physicians and residents, volunteers, students, contractors, and vendors) who come into contact with patients at health care facilities including long-term care facilities. This includes independent health care practitioners and their staff in community settings.
- Visitors to health care facilities and other patient care locations
- Household contacts (including children) of people at high risk whether or not those high risk people have been immunized
- Those who provide care and/or service in potential outbreak settings housing high risk persons (e.g., crew on ships)
- Household contacts of healthy children 0 to 59 months of age
- Those providing regular child care to children 0 to 59 months of age, whether in or out of the home

3. **People who provide essential community services:**

- First responders: police, fire fighters, paramedics
- Corrections workers

^A Indigenous peoples (including First Nations, Métis and Inuit) may be disproportionately affected by influenza because of longstanding inequities related to the social determinants of health due to the impacts of colonization.