A Postmarketing Evaluation of the Frequency of Use and Safety of Live Attenuated Influenza Vaccine in Nonrecommended Children Less Than 60 Months of Age

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Introduction

The Centers for Disease Control and Prevention’s (CDC) Advisory Committee on Immunization Practices (ACIP) recommends that all children from 6 months of age through 18 years of age receive influenza vaccine on a yearly basis.

Objectives

The objective of this study was to assess the frequency of LAIV use in eligible individuals and the safety of LAIV use in children with immunocompromise. We also wished to identify the safety of LAIV use in children at risk for asthma or recurrent wheezing.

Methods

This retrospective descriptive cohort study of children ≤60 months of age included a large, employer-based, anonymized database. The study included children ≤60 months of age, or those 24–59 months of age with recurrent wheezing in children 6–23 months of age (LAIV, 5.9%; trivalent inactivated influenza vaccine [TIV], 2.2%).

Safety Assessment Within Each Cohort

Among other contraindications, warnings, and precautions, the package insert for LAIV states warnings and precautions against administration to children with the following conditions: immunocompromised children.

Results

In seasons 1, 2, and 3, there were 12,479, 62,657, and 70,789 LAIV vaccinations reported, respectively, among children ≤60 months of age.

Conclusions

In the United States, LAIV is the preferred vaccine for healthy children 6 months of age through 18 years of age. LAIV is considered a safe and effective vaccine for this age group. LAIV is the preferred vaccine for children at highest risk for seasonal influenza-related hospitalizations and deaths. LAIV is recommended for all healthy children ≤18 years of age because it is the preferred vaccine for this age group. LAIV is the preferred vaccine for children at highest risk for seasonal influenza-related hospitalizations and deaths. LAIV is considered a safe and effective vaccine for this age group.