

Influenza vaccination of the egg-allergic individual: 2012 update

TO THE EDITOR: Recent studies have highlighted the safety of administering influenza vaccine derived from embryonated chicken eggs to egg-allergic individuals,¹⁻³ as long as the vaccine contains no more than 1 µg of egg ovalbumin per dose. This is reflected in recommendations by expert advisory groups including the Australasian Society of Clinical Immunology and Allergy.⁴ These recommendations have been strengthened by further evidence of the safety of influenza vaccines, even in patients with egg-induced anaphylaxis.⁵ All the seasonal influenza vaccines currently available in Australia contain haemagglutinin from influenza A, B and H1N1 strains, and less than 1 µg of egg ovalbumin per dose (data available on request from the author). We thus reiterate the safety of administering currently available influenza trivalent vaccines in medically supervised primary care settings as a single dose, with a 30-minute observation period (rather than the standard 15 minutes) for patients with non-anaphylactic reactions to egg.

For patients with a history of egg anaphylaxis (or positive allergy tests without a history of ingestion), we recommend a split-dose protocol (10% of the vaccine dose, followed 30

minutes later with the remaining 90% of the dose, and a final 30-minute waiting period), after discussion with an allergy specialist to decide whether vaccination should be done in a primary care setting or in specialist facilities. Appropriate facilities for treating anaphylaxis are required. Prior allergy testing with the vaccine is not required.

We acknowledge that these recommendations remain at variance with those in the *Australian immunisation handbook*⁶ and most product information sheets (accessible at <http://www.tga.gov.au/newsroom/media-2012-seasonal-flu-120206.htm>). While a small study of 64 patients suggests that administering vaccines containing more than 1 µg of ovalbumin per dose may also be tolerated,⁷ this practice is not currently recommended.

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2 Mullins RJ, Gold MS. Influenza vaccination of the egg-allergic individual [letter]. *Med J Aust* 2011; 195: 52-53.

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We thus reiterate the safety of administering currently available influenza trivalent vaccines

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Mullins et al

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- 7** Owens G, MacGinnitie A. Higher-ovalbumin-content influenza vaccines are well tolerated in children with egg allergy. *J Allergy Clin Immunol* 2011; 127: 264-265. □