

### Clips on 2004 Flu Vaccine Shortage

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*From U.S. Department of Health and Human Services*

Press release: Interim Influenza Vaccination Recommendations: 2004-05  
Tuesday, Oct. 5, 2004

On October 5, 2004, CDC was notified by Chiron Corporation that none of its influenza vaccine would be available for distribution in the United States for the 2004-05 influenza season. The company indicated that the Medicines and Healthcare Products Regulatory Agency (MHRA) in the United Kingdom, where Chiron's Fluvirin vaccine is produced, has suspended the company's license to manufacture Fluvirin vaccine in its Liverpool facility for 3 months, preventing any release of this vaccine for this influenza season. This action will reduce by approximately one half the expected supply of trivalent inactivated vaccine (flu shot) available in the United States for the 2004-05 influenza season.

The remaining supply of influenza vaccine expected to be available in the United States this season is nearly 54 million doses of Fluzone (inactivated flu shot) manufactured by Aventis Pasteur, Inc. Of these doses, approximately 30 million doses already have been distributed by the manufacturer. In addition, approximately 1.1 million doses of live attenuated influenza vaccine (LAIV/FluMist) manufactured by MedImmune will be available this season.

Because of this urgent situation, CDC, in coordination with its Advisory Committee for Immunization Practices (ACIP), is issuing interim recommendations for influenza vaccination during the 2004-05 season. These interim recommendations were formally recommended by ACIP on October 5, 2004, and take precedence over earlier recommendations.

#### **Priority Groups for Influenza Vaccination**

The following priority groups for vaccination with inactivated influenza vaccine this season are considered to be of equal importance and are:

- all children aged 6-23 months;
- adults aged 65 years and older;
- persons aged 2-64 years with underlying chronic medical conditions;
- all women who will be pregnant during the influenza season;

- residents of nursing homes and long-term care facilities;
- children aged 6 months-18 years on chronic aspirin therapy;
- health-care workers involved in direct patient care; and
- out-of-home caregivers and household contacts of children aged < 6 months.

#### Other Vaccination Recommendations

- Persons in priority groups identified above should be encouraged to search locally for vaccine if their regular health-care provider does not have vaccine available.
- Intranasally administered, live, attenuated influenza vaccine, if available, should be encouraged for healthy persons who are aged 5-49 years and are not pregnant, including health-care workers (except those who care for severely immunocompromised patients in special care units) and persons caring for children aged < 6 months.
- Certain children aged < 9 years require 2 doses of vaccine if they have not previously been vaccinated. All children at high risk for complications from influenza, including those aged 6-23 months, who present for vaccination, should be vaccinated with a first or second dose, depending on vaccination status. However, doses should not be held in reserve to ensure that 2 doses will be available. Instead, available vaccine should be used to vaccinate persons in priority groups on a first-come, first-serve basis.

#### Vaccination of Persons in Nonpriority Groups

Persons who are not included in one of the priority groups described above should be informed about the urgent vaccine supply situation and asked to forego or defer vaccination.

#### Persons Who Should Not Receive Influenza Vaccine

Persons in the following groups should not receive influenza vaccine before talking with their doctor:

- persons with a severe allergy (i.e., anaphylactic allergic reaction) to hens' eggs and
- persons who previously had onset of Guillain-Barr syndrome during the 6 weeks after receiving influenza vaccine.

For more information, visit [www.cdc.gov/flu](http://www.cdc.gov/flu), or call the National Immunization Hotline at (800) 232-2522 (English), (800) 232-0233 (español), or (800) 243-7889 (TTY).

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*From PBS News Hour*

#### **U.S. Faces Flu Vaccine Shortage**

10/11/04

Unlike last year when health officials urged more people to get flu vaccines, authorities are asking the public to save the supplies for those most at risk after half of the nation's anticipated supply of vaccine became unavailable last week.



Last year a record 87 million Americans were vaccinated against the flu, but this year there will be less than 54 million flu shots available due to a problem at a British factory. A contagious viral illness marked by high fevers and respiratory symptoms, the flu kills an estimated 36,000 Americans each year. More than 200,000 people are hospitalized each year due to flu complications, according to the Centers for Disease Control and Prevention. For several decades, the flu vaccine has helped people who came in contact with the virus avoid getting sick. This year's flu season is expected to peak between December and February.

#### **Vaccine shortage surprises U.S. officials**

The shortage became public when Chiron Corp., one of two companies that supplies flu vaccine to the American market, announced that the British government suspended the manufacturing license at its major factory in Liverpool, England for three months, citing contamination problems.

"This is very disappointing news that creates a serious challenge to our vaccine supply for the upcoming season," Tommy Thompson, secretary of health and human services, said at an Oct. 5 news conference. "Our immediate focus will be on making sure the supply of vaccines we do have reaches those who are most vulnerable," he added.

Health officials are asking that only those persons at the most risk get the vaccine. They include adults 65 and older, infants 6-23 months, people who care for infants younger than 6 months, women who are pregnant during flu season, persons with underlying health conditions and health care workers involved in direct patient care.

The shortage was not altogether unanticipated. In late August American-owned Chiron said it would delay shipments of its vaccine because a small number of batches were contaminated.

But the complete shutdown of the factory was unexpected, according to company officials and U.S. federal health officials.

"We anticipated the loss of 6 to 8 million doses. We did not anticipate the license would be suspended," Thompson said.

On Oct. 7 an anonymous spokesman for the British regulatory agency said that the vaccines were contaminated with the bacteria *Serratia*, the Associated Press reported.

*Serratia* is commonly found in the environment and although it does not usually harm healthy people, it can cause problems when injected.

#### **Why shortages occur**

Each year scientists try to anticipate the strains of the flu virus for the coming season and make the appropriate vaccine. They have to make this decision months in advance because of current technology limitations. The viruses that are killed to make the flu vaccine are grown in millions of eggs, which takes a long time.

Companies are trying to develop ways to make vaccines in cell cultures, which would speed up the process, but the technology isn't there yet.

Manufacturers try not to make too much vaccine because what is not used has to be destroyed.

In addition, few companies make vaccines because they are not very profitable, a problem according to many health experts.

"You cannot have a vital function like vaccine production limited to the manufacturing capacity of two companies. It leaves no room for failure," Dr. Irwin Redlener, associate dean of the Mailman School of Public Health at Columbia University, told the New York Times.

Many experts in the health industry say that government and private companies need to work together to increase vaccine production.

"We have to realize that the era of dirt cheap vaccines is over," Dr. William Schaffner, chairman of preventive medicine at Vanderbilt University School of Medicine and a member of a government advisory panel on vaccination, told the New York Times.

"We have to be willing to pay more for the wonderful protection we get from vaccines. When there is more profit, it will be an incentive for companies to enter the market," he added.

-- Compiled for NewsHour Extra by Annie Schleicher

*From New York Times*

**Editorial: An Influenza Vaccine Debacle**

Published: October 20, 2004

It is almost unbelievable - and surely unacceptable - that the world's most medically advanced nation should suddenly find nearly half of its expected supply of influenza vaccine wiped out by manufacturing problems at a single plant in England. Yet that is the shocking reality that has panicky patients lining up for flu shots that are not available and has price gougers trying to profit from their misery.

There is plenty of blame to go around for this fiasco. The primary fault lies with Chiron, an American biotechnology company, based in California, that had planned to supply some 46 million to 48 million doses of vaccine to the United States from a plant in Liverpool it acquired last year. That plant had a history of problems under a succession of previous owners, and Chiron may well have put it under additional stress with a huge ramp-up in production for this year's flu season. The result was a major malfunction.



In late August, Chiron detected bacterial contamination that might have infected millions of doses. But the company remained confident - and the Food and Drug Administration remained hopeful - that the problem had been contained. Then came the coup de grâce. British regulators suspended the firm's flu vaccine license early this month because of unspecified failures to comply with good manufacturing practices, suggesting a more deep-seated problem.

American health officials had no clue that almost half of the nation's flu vaccine supply was about to be impounded. The question that has to be explored is whether the F.D.A. was asleep at the switch. There had been hints of trouble in the past. An F.D.A. inspection of the plant in June 2003 found quality-control problems and bacterial contamination at an early stage of the production process, but those shortcomings were reportedly resolved, allowing Chiron to produce clean vaccine for last year's flu season. Now even more severe contamination has emerged in this year's production, forcing Chiron to the sidelines. Congressional committees will need to determine whether the federal drug agency pushed hard enough over the past year to ensure that the Liverpool plant could be relied on.

They will also need to investigate whether the F.D.A. responded fast enough after the first reports of contamination in August. Events leave the impression that the company deluded itself into thinking the problem had been isolated and that the drug agency more or less accepted its reassurances. We are left to guess whether more aggressive intervention by government experts might have helped the company surmount its difficulties.

By late August there was little hope of finding enough additional vaccine elsewhere. But a nearly total breakdown in communication between British and American regulators surely slowed this nation's response to the crisis. The British failed to alert the F.D.A. that they were inspecting the plant for deficiencies in late September, and they gave no hint that they were considering a license suspension until the deed was done. The F.D.A. seems to have made no great effort to stay on top of what the British were doing. With some 90 percent of the plant's flu vaccine headed for the United States, that seems an unforgivable lapse by regulators on both sides of the Atlantic. American health officials need to press their British colleagues for a better alert system.

Underlying this crisis is the increasing fragility of the vaccine manufacturing base. This may be mostly an American problem rather than a global problem. There are six major manufacturers in the world who produced some 200 million doses for other nations this year, but only two of them are licensed to produce the 100 million doses of injectable vaccine for this country. The British coped with the loss of Chiron's vaccine far better than the United States, mostly because they order far less vaccine and have a diversity of suppliers that can fill in if one company falters.

Experts are pondering ways to induce more companies to make flu vaccine for the American market. The issue is not that manufacturers are worried about lawsuits over liability, as President Bush has suggested. Litigation is seldom, if ever, cited in

authoritative analyses of vaccine shortages. The main problem is that influenza vaccine needs to be reformulated every year, and companies suffer huge losses if they overestimate the amount that will be needed because they end up having to destroy millions of doses. The administration needs to find a way to expand and stabilize the vaccine manufacturing base. The lesson of the Chiron debacle is that a diversity of supply is critical.

*From CNN Money*

### **Flu shot shortage looms**

Chiron, vaccine maker that was to provide half of U.S. supply, forced to shut down British plant.

October 6, 2004

NEW YORK (CNN/Money) - Public health officials predicted a flu vaccine shortage in the United States this season after Chiron Corp. said Tuesday it won't be able to make millions of doses of the vaccine due to problems at its British plant.

The drug maker's bombshell that it will not be able to ship its supply of flu shots this year presents a major problem for consumers and investors alike. CNNfn's Fred Katayama reports.

Chiron, based in Emeryville in northern California, said in a statement that it had expected to provide nearly half the U.S. supply of flu shots for the 2004-2005 season. It said it was discussing the impact of the problems with the U.S. authorities at the Food and Drug Administration and the Centers for Disease Control and Prevention (CDC).

Public health officials said plans to vaccinate millions of people this fall would be disrupted by the announcement. And on Wall Street, the news sent investors fleeing from Chiron stock.

"Clearly, the loss of the Chiron flu vaccine poses a serious challenge to our vaccine supply for the upcoming flu season," the Department of Health and Human Services said in a statement. "Our immediate focus will be on making sure that the supply we do have reaches those who are most vulnerable."

The CDC said it is convening an advisory committee on vaccines to refine its recommendations on who should get the flu vaccine this season.

Public health officials said it was important that many of those who received flu shots in the past pass up shots this year to help maintain enough supply for those at risk.

"I get a shot every year, but I probably won't this year since I'm a healthy adult," said Karen Miller, a county commissioner in Missouri and the immediate past president of the



National Association of Counties. She said counties will have to be careful who will get the more limited supply of vaccine this year.

"We'll be doing what we need to educate the public," she said.

Last year, reports of children who died from the flu early in the season led to shortages of the vaccine in the United States. Hundreds of thousands of U.S. residents who wanted flu shots were not able to get them, said Laura Segal of the Trust for America's Health, a public interest health group.

She said Chiron's news may cause a run on the flu shots for the coming season. "There's going to need to be a prioritization of people who are most at risk," Segal said.

The CDC reported 152 children died of flu-related deaths during last year's flu season in the 40 states that reported results to the health agency. In addition, tens of thousands of people, mostly the elderly and chronically ill, die from the flu each year. But it was the deaths of an unusually large number of children that sparked concerns last year.

#### **Who's at risk**

The CDC's previous recommendations were for all people 50 and older to get a flu shot, as well as infants ages 6 to 23 months and women who become pregnant during the flu season. In addition, those with certain conditions or health-care providers who could spread the flu to those at risk are urged to get vaccines.

Those at risk include people with chronic heart or lung conditions, including asthma, and people who were in a hospital during the previous year because of a metabolic disorder, such as diabetes, chronic kidney disease or weakened immune system.

The British Department of Health confirmed to CNN that it suspended Chiron's manufacturing license for three months. A spokesman said problems with the sterility of the manufacturing process meant the vaccines produced could not be released for shipment.

The problems were uncovered as part of a regular inspection of the plant.

Company officials said the problem was with a relatively small amount of the vaccine that had already been prepared for the coming season.

"We believe that our confirmatory testing indicated that the problem was confined to a limited number of lots," said Howard Pien, president and CEO of Chiron. "Therefore, today's action ... is unexpected and disappointing. But we respect the regulatory authority's judgment, because we believe it's fundamentally based on concerns for safety."

Chiron supplies about 15 percent of Britain's flu vaccines, but British officials said they should be able to complete their vaccination plans.

Chiron produces vaccines at its facilities in Liverpool, as well as Marburg, Germany and Siena, Italy. But only the product from the Liverpool plant was approved for U.S. use, and that is the one that was cited by British health authorities.

Chiron has started talks with British regulators to determine the appropriate steps to correct the problems at the plant. But it said it is looking to supply vaccines for the 2005-2006 season, rather than making any supply projections for the upcoming season.

Chiron said on Aug. 26 that it would supply 46 million to 48 million Fluvirin influenza virus vaccine doses in the United States this season, starting early this month. It also planned a late-season delivery of 2 million Fluvirin doses for a national stockpile held by the CDC.

The HHS said it had about 54 million doses of flu vaccine from Chiron competitor Aventis Pasteur Inc., and another 1 million to 2 million doses of FluMist nasal spray.

Chiron also said it no longer will hit its earlier earnings guidance and now expects to earn 70 to 80 cents a share excluding special items, for 2004, or 35 to 45 cents a share on a generally accepted accounting principles (GAAP) basis.

The company had previously expected to earn between \$1.80 to \$1.90 a share, or \$1.50 to \$1.60 on a GAAP basis. That lower guidance means the company is estimating a drop in income of \$206 million to \$216 million due to the drug problem.

Shares of Chiron (CHIR: Research, Estimates) tumbled \$7.44, or 16 percent, to close regular-hours trading at \$37.98, and then it fell another 39 cents after hours. Swiss drugmaker Novartis (NVS: Research, Estimates), which owns 40 percent of Chiron, slipped 22 cents to close New York trading at \$46.60 Tuesday.

Meanwhile shares of MedImmune (MEDI: Research, Estimates), maker of the less widely used FluMist nasal spray flu vaccine, rose \$1.41, or about 6 percent, to close Tuesday trading at \$25.78. The news also lifted Sanofi-Aventis (SNY: Research, Estimates), which owns Aventis Pasteur, leaving it up 36 cents to \$37.14 in regular-hours New York trading Tuesday.





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**NEWS**

**FOR IMMEDIATE RELEASE**

October 25, 2004

**Gov. Blagojevich locates 62,000 to 87,000 doses of flu vaccine, negotiates deal to quickly provide flu shots from Europe for Illinois' most vulnerable residents**

***Through His Prescription Drug Importation Program Network, Blagojevich Identifies up to 87,000 Doses of Aventis Flu Vaccine That Could Be Shipped This Week to Meet Need for State's Nursing Home Residents and Hospitalized Children Governor Calls on FDA to Further Reduce Shortage by Expediting Approval Process for GlaxoSmithKline Flu Vaccine Used in European Countries***

CHICAGO – Governor Rod Blagojevich (D-Illinois) today announced that his administration has negotiated a tentative agreement -- subject to approval from the U.S. Food and Drug Administration (FDA) -- to immediately ship at least 30,000 doses of flu vaccine from Europe for Illinoisans at critical risk. Another 32,000 to 57,000 will be available to the State for purchase by mid-week. The flu vaccine was made available to Illinois through wholesalers in the United Kingdom that the state has been in contact with through the Governor's I-Save Rx program, which offers Illinois and Wisconsin residents access to affordable, safe prescription drugs from pharmacies in the United Kingdom and Canada.

"The flu season is nearly here, and based on the supply offered to us by the federal government, thousands of senior citizens and others in Illinois would be forced to brave the winter without a flu shot. It's dangerous to expect them to do that," Blagojevich said. "We can provide the same exact flu shots, made by the same manufacturer, so that people who face the most serious risk will be taken care of. I am calling on the FDA to work with us immediately to allow us to purchase the flu shots we need. The sooner they give their approval, the sooner we can get flu vaccines to the senior citizens who need them the most."

The United States' flu vaccine supply was recently decimated after British health officials found that some doses produced by Chiron Corp., a manufacturer that was expected to produce nearly half of the 100 million doses needed for U.S. residents, were infected by bacteria and its entire supply was condemned. As a result, the United States has only the 55 million doses of vaccine manufactured by its other supplier – the French drugmaker Aventis Pasteur – to meet its entire demand.

While the FDA announced last week that it has asked Aventis Pasteur to manufacture an additional 2.6 million doses of vaccines to address shortages across the United States, the new shots are not expected to be ready until January. Flu season in Illinois lasts from November to April, peaking in January and February. State health officials encourage the elderly and young children to get vaccinated early in the winter to allow the vaccine at least two weeks to become effective before peak season.

When news of the flu vaccine shortage was made public, Illinois officials turned to suppliers outside the U.S. that they have developed relationships with while establishing Illinois' new I-SaveRx prescription drug importation program.

"The opportunity to purchase flu vaccine from Europe came about because of our prescription drug program, I-Save Rx. Last week, our inspectors happened to be in the United Kingdom to inspect more



pharmacies for our program, and they began discussions with some of the wholesalers who are part of program to see whether they could obtain flu vaccines for the people of Illinois. After a week of scouring Europe for as much flu vaccine as they could find, we were able to identify at least 30,000 doses that can be shipped within hours of approval by the FDA," the Governor explained.

By immediately obtaining existing Aventis vaccine from European countries not facing shortages, Gov. Blagojevich would provide Illinois' most vulnerable residents -- senior citizens in nursing homes -- with flu shots within days, long before peak flu season. President Bush and HHS Secretary Tommy Thompson have both said recently that the federal government is looking into buying the Aventis vaccine, and similar vaccines from Canada. Blagojevich today asked the FDA to act quickly if it needs to inspect Aventis' manufacturing facility in Lyon, France -- which makes the Aventis flu vaccine that is distributed in Canada and Europe. The Illinois Department of Public Health's evaluation of the manufacturer's product descriptions and examination of dosage, strains of flu, processing and formulation, advisories and contraindications all show that the Aventis vaccine produced for Canada and Europe contains the identical properties as the Aventis vaccine produced for the United States.

To further reduce the nation's flu vaccine shortage, the Governor also called on the FDA to expedite U.S. inspections and approval of a flu vaccine made by GlaxoSmithKline (GSK) that is widely used in Europe for the same purpose as the Aventis and Chiron products. An initial evaluation by the Illinois Department of Health found the GSK vaccine is the same as the one being used now in the U.S. If approved soon by the FDA for distribution in the U.S., it could be used as soon as November to help meet the need in Illinois and other states across the country.

"We should leave no stone unturned. The FDA needs to immediately inspect those companies. They should send their inspectors to the Glaxo Smith Kline facility in Germany so we can see whether their supply can be used here in Illinois, and across the United States," Blagojevich said.

In 2002, there were nearly 3,000 influenza and pneumonia-related deaths in Illinois. Of those, 2,610 were people over the age of 65, and ten were children under the age of five. Last year, the Center for Disease Control (CDC) reported that roughly 36,000 people nationwide died from flu-related illnesses.

The Illinois Department of Public Health has developed a plan for distributing the initial 30,000 additional flu shots to nursing home residents throughout the state. Because nursing home patients are usually elderly or disabled, and live in communal settings where illnesses can spread quickly, they are often highly vulnerable to the flu. Illinois has approximately 100,000 residents living in nursing homes. The Department had received previous assurances from the federal government that 35,000 doses of flu vaccine would be available for nursing homes. With the 32,000 to 57,000 more doses later in the week, Illinois would be able to vaccinate nursing home patients and the most at-risk children who are being treated in hospitals. Once those populations are served, the Governor said the priority would be getting vaccine to seniors not living in nursing homes and children under the age of four.

Gov. Blagojevich asked the federal Center for Disease Control to allow Illinois to use federal funds to purchase the vaccinations. If the CDC refuses his request, Blagojevich has pledged to cover the cost through existing state funds.

The Governor also said that the state is in discussions with its European suppliers for the I-SaveRx program to find additional stocks of the Aventis flu vaccine. He offered to provide any doses not needed for critical cases in Illinois to the Centers for Disease Control (CDC) to distribute immediately to senior citizens, young children and the chronically ill in other states. The Governor requested that the CDC first provide the excess vaccinations to Wisconsin, which is participating in I-Save Rx.



In addition to securing more vaccine, the Governor and the Department of Public Health are also taking steps to prepare in the event that the state faces another difficult flu season. On Wednesday, public health and local experts will meet in Chicago to discuss how to best coordinate efforts this upcoming flu season. In particular, the state will be working with hospitals to develop contingency plans and strategies to help ensure that everyone receives proper care.

U.S. Representative Rahm Emanuel (D-Chicago) stood with the Governor today in support of his efforts to obtain flu vaccine from Europe for at-risk Illinois residents. "This is a serious crisis that demands real leadership and quick action at both the state and federal levels. I am pleased that Gov. Blagojevich is taking these steps on behalf of the people of Illinois, while at the same time a bipartisan coalition of members of Congress works for speedy action on my legislation, the 'Flu Protection Act,'" said Emanuel.

Emanuel is chief sponsor of the bill, HR 3758, which would improve the vaccine production system and lessen the chance of future shortages. He and other bill sponsors have asked House Speaker Dennis Hastert for a vote on the legislation during a Congressional session to be held in November.

"Today's announcement also underscores the value and effectiveness of the Governor's I-SaveRx program," said Emanuel. "It's not merely about saving money – it's about saving lives."

On October 4, Blagojevich and Emanuel were joined by Wisconsin Governor Jim Doyle in launching I-Save Rx to help the nearly 13 million residents of Illinois and more than 5 million residents of Wisconsin save money on the cost of their prescription drugs. Illinois and Wisconsin residents can enroll in I-Save Rx by calling 1-866-ISAVE33 or visiting [www.I-SaveRx.net](http://www.I-SaveRx.net).

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Video	Archived Governor's News Conference	56k	135k	300k
Audio	Archived Governor's News Conference	Audio Stream		



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**NEWS**

**FOR IMMEDIATE RELEASE**

December 29, 2004

**Gov. Blagojevich Expands Access to Flu Vaccine to Reduce Risk of Dangerous Outbreak**  
*As more people who normally get flu shots abstain in face of shortage, risk to elderly and sick residents much greater this year*

CHICAGO – Gov. Rod Blagojevich today announced that Illinois is encouraging local health departments and health care providers who have adequate supplies of influenza vaccine to expand access of vaccine beyond the highest risk populations to other groups that would normally be encouraged to receive the immunization, including people 50 years of age or older and those in close contact with high-risk individuals. The change will go into effect on January 3, 2005.

The Governor's recommendation is in response to warnings from his Director of Public Health Dr. Eric E. Whitaker that a flu outbreak could be especially severe this year, given the unusually low number of individuals vaccinated due to the shortage, both low and high risk. In an average year with normal vaccination patterns, approximately 3000 Illinoisans die from influenza and pneumonia.

"Since the flu vaccine shortage began, hundreds of thousands of people in Illinois who normally get flu shots have held back to make sure those who needed it most could get it. Unfortunately, that means more people are vulnerable to the virus than in a normal year – including many who are elderly and have chronic illnesses. We want to make sure people who need protection get it so that when the flu season hits in full force, the impact on our citizens is as minimal as possible," said the Governor.

"Several months of the flu season remain and we have yet to hit the peak, so we need to remain vigilant in taking precautions against spreading the flu virus. Our top priority is still to reach the sick, elderly and very young who have not yet gotten their shots. But we also want to provide the vaccine to people 50 years of age and older and those who live with people in the high risk categories so we can prevent a dangerous outbreak this winter."

After it was announced in October that the nation faced a severe vaccine shortage, Gov. Blagojevich instructed the Department of Public Health to follow CDC recommendations and asked health care providers to use all available supplies to vaccinate those at the highest risk of severe disease or death. Health officials have reported that many individuals eligible for flu shots did not get a vaccine due to reports of the shortage, long lines or chose to step aside for others who were at greater risk.

"Some people may think they are not eligible for flu vaccine because they don't live in a nursing home or aren't confined to a hospital bed – they're wrong. Through the steps we are taking, we hope to reach people who were eligible before, but didn't know it, as well as many people who live and work with those at the highest risk," said Dr. Whitaker.

Soon after news of the vaccine shortage, the Governor sought additional flu vaccine from Europe to ensure Illinois would have an adequate supply to protect its most vulnerable citizens. His administration located nearly 300,000 doses of flu vaccine made in Germany and France that could be shipped to Illinois for distribution immediately upon approval from the Food and Drug Administration. Today, the Governor reiterated the need for additional vaccine supplies.



"Fewer than half of the people in Illinois who are usually protected against the flu have gotten vaccines this year. That means a mild outbreak could quickly become severe. We need additional vaccine soon before flu activity peaks," the Governor said. "We have been working with the FDA for more than two months to give them all relevant information about the vaccine from Europe they need to approve our request. And while they've given their counterparts in the federal Centers for Disease Control and Prevention the green light to import vaccine from Germany, they've dragged their feet on the Illinois request. The risk is far too great for them to continue this waiting game."

As restrictions on vaccine are loosened, Dr. Whitaker said it will be up to each of the state's 95 local health departments to determine if they have sufficient supply of the vaccine to expand the eligibility requirements.

The Department of Public Health encourages individuals in the following groups to contact their health care provider or local health department about obtaining a flu shot:

- Children ages 6 months to 23 months;
- Persons 50 years of age and older;
- Persons 2 to 64 years of age with underlying medical conditions;
- Pregnant women;
- Residents of long-term care facilities;
- Children ages 6 months to 18 years of age who are on long-term aspirin therapy;
- Household contacts of persons belonging to anyone in the priority group;
- Health care workers providing direct patient care; and
- Out-of-home caregivers and household contacts of children younger than 6 months of age.

Eligibility under the Vaccines for Children (VFC) program has also been expanded to include VFC-eligible children who are household contacts of persons in high-risk groups. Children who are eligible for the VFC vaccine include those 18 years or younger; eligible for Medicaid; uninsured; or Native American or Alaskan Native. The VFC eligibility expansion is effective immediately.

Influenza, commonly called the flu, is caused by viruses that infect the respiratory tract and spreads from person to person when an infected person coughs or sneezes. Flu symptoms include fever (usually 100 degrees F in adults and often higher in children), dry cough, runny or stuffy nose, headache, muscle aches and extreme fatigue.

After a person is infected with the virus, symptoms usually appear within one to four days. The infection is considered contagious for up to five days after symptoms appear and illness usually lingers for a week or two. Each year, an estimated 10 percent to 20 percent of the population contracts influenza.