

News Release

PHAC updates recommendations on H1N1 vaccine for children

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FOR IMMEDIATE RELEASE

(OTTAWA) – The Public Health Agency of Canada today updated its recommendations on H1N1 flu vaccine dosing for children between 3 years and 9 years of age.

The updated recommendations reflect findings from clinical trial results from Europe that suggest that a single half-dose of adjuvanted H1N1 flu vaccine for healthy children may provide an acceptable level of protection from infection from the H1N1 flu virus.

“For healthy children between 3 and 9 years old, this means that one shot may be enough to provide protection from the H1N1 flu virus,” said Dr. David Butler-Jones, Chief Public Health Officer for Canada. “This is good news for parents of healthy children and for Canadians. It frees up resources that can be devoted to immunizing priority at-risk populations, which means that the H1N1 vaccine will be available for the general public sooner.”

The updated recommendations include three components:

- Children between 6 months of age and under 3 years of age should receive two half-doses of adjuvanted H1N1 flu vaccine, administered at least 21 days apart. Guidance for children in this age group is unchanged.
- Children with chronic health conditions who are between 3 and 9 years of age should receive their first half-dose of the H1N1 flu vaccine as soon as possible. They should also receive a second half-dose of the H1N1 flu vaccine. The interval between the two half-doses should be a minimum of 21 days.
- Healthy children between 3 and 9 years of age should only receive a single half-dose of the H1N1 vaccine, and do not need to return for a second vaccine for now. This recommendation may be updated as more information becomes available.

Further adjustments to the vaccine dosage recommendations may be made once the results of additional research and clinical trials on vaccine effectiveness are available.



The updated recommendations and the studies they are based on have been reviewed with the Canadian Paediatric Society and the provinces and territories. The new guidance reflects the need to adopt a prudent approach to protecting younger children with weaker immune systems and children with underlying medical conditions. It also recognizes that other priority populations are at risk from the H1N1 flu virus and that the H1N1 vaccine should be made available to all Canadians as quickly as possible.

“When we first announced the populations that should have priority access to vaccines in Canada, we stressed three things,” said Dr. Butler Jones. “Those who would benefit most should get it first; our guidance was not set in stone and would evolve based on new knowledge and evidence; and, we ordered enough vaccine so that all Canadians who want and need it will get it. This new guidance reflects these commitments.”

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