

# The Legacy of 50 years experiences<sup>1</sup>



Quadrivalent influenza vaccine  
(Split virion, inactivated)

Supporting you to  
protect your patients  
against influenza<sup>1,2</sup>

**Vaxigrip®** is the most widely used influenza vaccine globally, almost 50 year experiences with more than 1.8 billion doses distributed in more than 120 countries<sup>1</sup>

Now, with **VaxigripTetra™**, The potential to further reduce influenza-related morbidity and mortality beyond that achieved with trivalent vaccines<sup>2</sup>

#### References:

- 1.) Margaret H. et al.(2017), A trivalent, inactivated influenza vaccine (Vaxigrip®): summary of almost 50 years of experience and more than 1.8 billion doses distributed in over 120 countries Expert Review of Vaccines, 16:6, 545-564.
- 2.) Vivian G.(2016) Quadrivalent inactivated influenza vaccine (VaxigripTetra™), EXPERT REVIEW OF VACCINES, 2018 VOL. 17.

VaxigripTetra™ 1. NAME AND PRESENTATION: VaxigripTetra is an inactivated quadrivalent influenza vaccine (split virion, inactivated), suspension for injection in pre-filled syringe 0.5 ml. 2. THERAPEUTIC INDICATIONS: For the prevention of influenza disease caused by two influenza A virus subtypes and two influenza B virus subtypes contained in the vaccine for 1. active immunisation of adults, including pregnant women, and children from 6 months of age 2. passive protection of infants less than 6 months of age and born to women vaccinated during pregnancy. 3. POSOLOGY AND METHOD OF ADMINISTRATION: The vaccine should be given by intramuscular or subcutaneous injection. Children from 6 months of age and older should receive one dose of 0.5 ml. For children who are less than 9-years-old and have never received influenza vaccine before, the second dose of 0.5 ml should be given at, no shorter than, 4 weeks after the first dose. Regarding passive protection, one 0.5 ml dose administered to a pregnant woman may protect infants from birth to almost 6 months of age; however, not all infants may be protected. 4. CONTRAINDICATIONS: Hypersensitivity to the active substances, to any of the excipients or to any component that may be present as traces such as eggs (ovalbumin, chicken proteins), neomycin, formaldehyde and octoxinol-9. Vaccination should be postponed in case of moderate or severe febrile disease or acute disease. 5. SPECIAL WARNINGS AND SPECIAL PRECAUTIONS FOR USE: As with all injectable vaccines, appropriate medical treatment and supervision should always be readily available in case of anaphylactic reaction happens. Procedures should be in place to prevent injury from fainting and manage syncopal reactions as syncope (fainting) can occur. The vaccine should be administered with caution in the subjects with thrombocytopenia or any other bleeding disorders because of the bleeding risk from intramuscular administration. The vaccine should not be administered intravascularly. As with any vaccine, the vaccine may not protect all vaccinees. Regarding passive protection, not all infants less than 6 months of age born to women vaccinated during pregnancy may be protected. The antibody response in patients with endogenous or iatrogenic immunosuppression may be insufficient. 6. DRUG INTERACTIONS: No interaction studies have been performed. Separate injection sites and separate syringes should be used in case of concomitant administration with other vaccines. The immunological response may be reduced if the patient is undergoing immunosuppressant treatment. Following influenza vaccination, false positive results in serology tests using the ELISA method to detect antibodies against HIV1, Hepatitis C and especially HTLV1 have been observed. The Western Blot technique disproves the false-positive ELISA test results. The transient false positive reactions could be due to the IgM response by the vaccine. 7. PREGNANCY AND LACTATION: Pregnancy-Pregnant women are at high risk of influenza complications, including premature labour and delivery, hospitalisation, and death; pregnant women should receive an influenza vaccine. VaxigripTetra can be used in all stages of pregnancy. One animal study did not indicate direct or indirect harmful effects with respect to pregnancy, embryo-fetal development or early post-natal development. Lactation: VaxigripTetra may be used during breastfeeding. There are no fertility data available in Humans. One animal study did not indicate harmful effects on female fertility. 8. UNDESIRABLE EFFECTS: Very common and Common: headache, myalgia, malaise, shivering, injection site pain, ecchymosis, irritability, appetite lost, swelling, crying abnormal, fever, drowsiness, vomiting. For uncommon and rare and undesirable effects; see full prescribing information. 9. OVERDOSE: No information. 10. PHARMACODYNAMIC PROPERTIES: Influenza vaccine (ATC code: J07B02)

For more information, please see full prescribing information. (Abbreviated Prescribing Information (Version V02-19))



**หมายเหตุ** เป็นยาใหม่ใช้เฉพาะสถานพยาบาล  
แพทย์ควรติดตามผลการใช้ยา

โปรดอ่านรายละเอียดเพิ่มเติมในเอกสารอ้างอิงฉบับสมบูรณ์และเอกสารกำกับยา  
ใบอนุญาตโฆษณาเลขที่ ขส.15-17/2562

หากท่านพบอาการไม่พึงประสงค์ใดๆ ที่อาจเกิดจากการใช้วัคซีน VaxigripTetra™  
สามารถติดต่อเพื่อรายงานข้อมูลได้ที่อีเมลล์ PVThai@sanofi.com หรือ  
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