Government of **Western Australia**
Department of **Health**

BE WISE
IMMUNISE

WA Influenza Nasal Spray Vaccination for children and adolescents – Provider fact sheet

The live attenuated influenza vaccine (LAIV) known as FluMist protects children and adolescents from serious influenza-related illness and helps mitigate the spread of influenza virus in the community.

The weakened viruses in LAIVs are adapted to grow only in cold temperatures. This means they can replicate at the lower temperatures found in the nose but cannot grow well at the warmer temperatures in the rest of the body and cannot cause influenza disease.

Hospitalisation rates for influenza are highest in children under 5 years and in older adults. Most children who develop severe influenza illness were previously healthy.

Annual vaccination is the most important way to prevent influenza and its complications.

The importance of annual influenza vaccination should be reinforced. A recommendation from a healthcare provider is the strongest predictor of whether a person decides to vaccinate themselves or their child.

LAIV is approved for use in children and adolescents aged 2 to 17 years in Australia.

LAIV has similar effectiveness to inactivated influenza vaccines in preventing severe influenza in children.

Inactivated influenza vaccines (IIV) remain available for children who:

- are not age-eligible for the nasal spray influenza vaccine
- prefer an injectable vaccine
- have contraindications for receiving a LAIV intranasal vaccine.

Administering LAIV

LAIV is absorbed rapidly in the nose. The dose does not need to be repeated if a child sneezes, blows their nose or experiences nasal dripping after receiving it.

If LAIV is inadvertently given into only one nostril or only half dose is delivered (that is, 0.1 mL), it is not necessary to repeat the dose of vaccine as this contains enough attenuated viral particles to induce an immune response.

LAIV is intranasally-administered and must not be injected. Each 0.2 mL dose is given by quickly spraying approximately half of the contents of the sprayer into each nostril.

LAIV can be given at the same time as, or at any interval before or after, other currently used vaccines, including live vaccines.

Refer to the Australian Immunisation Handbook (AIH) influenza chapter for more details.



Who should not receive LAIV, or receive it with caution?

Intranasal LAIV is contraindicated for people who:

- had anaphylaxis after receiving a previous dose of any influenza vaccine
- had anaphylaxis after receiving any component of an influenza vaccine (for example, gentamicin present as a trace residual in the LAIV)
- are moderately or severely immunocompromised
- are taking oral salicylate therapy (for example, aspirin).

Pregnant women should receive inactivated influenza vaccines, rather than LAIV.

The following people should receive LAIV with caution (noting it is only registered for children aged 2 to 17 years):

- close contacts of people who are severely immunocompromised should avoid direct contact for 1 to 2 weeks after receiving LAIV or receive an IIV instead
- individuals with a history of Guillain-Barre syndrome where the first episode occurred within 6 weeks of receiving an influenza vaccination
- individuals receiving more than one immune checkpoint inhibitor for cancer treatment
- if a child has severe asthma requiring intensive care or a recent episode of wheezing, delay LAIV until symptoms have improved and the child's condition is stable – or use an IIV instead
- LAIV should be deferred if a child has a runny or blocked nose, as this may hinder absorption of the vaccine. In such cases, IIV should be considered instead.

A child with asthma or wheeze can receive LAIV. Data confirms that LAIV and IIV are equally safe for children with asthma or recurrent wheeze. A child receiving low-dose systemic or inhaled corticosteroids may receive intranasal LAIV at the same time. If the child's parent or guardian cannot identify the current dosage of oral or inhaled steroid, an IIV can be offered. If the child has severe asthma requiring intensive care admission or has had a recent wheezing episode, vaccination should be delayed until the symptoms have improved and the child's condition is stable, or an IIV can be offered instead.

Considerations for faith-based concerns regarding porcine gelatine content in LAIV

Nasal spray influenza vaccine contains a highly processed form of porcine gelatine as a stabiliser to protect the live viruses from the effects of temperature. The gelatine used in live vaccines is highly purified and broken down, and differs from the gelatine used in food products.

Many religious authorities, including representatives from Islamic and Jewish communities, have issued guidance supporting the use of porcine-derived gelatine in vaccines.

Families who prefer to avoid porcine-derived gelatine, can opt for an inactivated influenza vaccine (IIV).

Possible adverse events after LAIV

As LAIV is administered intranasally, it can cause upper respiratory and nasal symptoms, like runny nose, nasal congestion or sore throat. Data from large clinical trials show that children who received LAIV have increased odds of experiencing nasal symptoms relative to children who received IIV. These side effects usually begin soon after vaccination and are mild and short-lived.

There is no difference in potential serious adverse events for LAIV and inactivated influenza vaccines.

Training requirements

Information on intranasal influenza vaccines is included in the WA Department of Health Influenza Update module.

Completion of the free online education module is mandatory for WA immunisation providers working under Structured Administration and Supply Arrangements (SASA).

Further training information and resources are available at Immunisation Education on the WA Health website.

Reporting to the Australian Immunisation Register (AIR)

Under the *Australian Immunisation Register Act 2015* (AIR Act), all vaccinations given under the National Immunisation Program (NIP) must be reported to the AIR. Reporting state-funded vaccinations to the AIR is a condition of holding a OneLink Australia vaccine order account.

Accurate and timely reporting helps ensure individuals have complete and up-to-date immunisation records and healthcare providers can easily identify a person's vaccination status and determine their future needs.

WA providers can access a detailed guide on how to report to the AIR.

Managing illness

Vaccinations should generally be postponed for anyone with a moderate or severe acute illness, as symptoms of the illness may be confused with vaccine-related reactions.

Reporting adverse events

Report adverse events online at SAFEVAC or call WAVSS on 08 6456 0208 (9 am to 5 pm, Monday to Friday).

Vaccine ordering and management

To order government-funded vaccines, providers must:

- have an active Onelink Australia account, with current email address
- ensure email contact details are up to date so they receive Department of Health updates about the program and vaccine availability.

Nasal spray vaccine (LAIV) storage requirements

- store between +2°C and +8°C
- protect from light
- do not freeze
- keep in the original packaging until use
- LAIV has a 15-week expiry from the date of manufacture. The expiry date is printed on the package. All doses for use in 2026 have now expired.

Cold chain requirements

All WA immunisation service providers and stakeholders involved in transporting, storing, and/or using government-funded vaccines must:

- adhere to the National Vaccine Storage Guidelines: Strive for 5
- follow WA Health Cold Chain Management resources
- complete the Cold Chain Management Training Module.

Additional resources

Influenza immunization resources are updated regularly, including throughout the influenza season. For the latest guidance and advice visit:

- WA Health Vaccine Updates e-newsletter – subscribe for program updates
- Influenza immunisation – provider website and resources (WA Health)
- Influenza – statutory notification and alerts (WA Health)
- Influenza vaccine FAQs National Centre for Immunisation Research and Surveillance (NCIRS)
- Information for consumers – influenza vaccine.

For more information about the LAIV visit AstraZeneca Australia. Providers must enter their AHPRA number to access restricted AstraZeneca content.



Produced by © Department of Health 2026

Copyright to this material is vested in the State of Western Australia unless otherwise indicated. Apart from any fair dealing for the purposes of private study, research, criticism or review, as permitted under the provisions of the Copyright Act 1968, no part may be reproduced or re-used for any purposes whatsoever without written permission of the State of Western Australia.

IMM-015184 Digital AUG'26