公費流感疫苗接種須知

《什麼是流感》

流感是由「流感病毒」所引起的急性呼吸道疾病，與一般感冒不同，通常症狀較明顯，病程也較長。常見的症狀包括發燒、頭痛、肌肉酸痛、疲倦、流鼻涕、喉嚨痛以及咳嗽等，有時會引起併發症，甚至導致死亡。最常見的併發症是肺炎，其他包括中耳炎、鼻竇炎、腦炎、腦病變、心肌炎、雷氏症候群和其他嚴重的感染症等。

《流感的傳播模式》

流感主要藉由咳嗽、打噴嚏等飛沫將病毒傳染給周圍的人，亦可能經由接觸到受污染物體表面上的流感病毒後，再觸摸自己的口、鼻而感染。罹患流感的人在發病的前1天到發病後的3~7天都可能會傳染給別人，幼童的傳播期則更長。

《學生施打流感疫苗的重要性》

根據研究發現，學生較容易被流感病毒侵襲，往往是流行季時最早的發病者，且學生散播的病毒其傳染力較高、傳播時間較長，所以學生是流感病毒的重要傳播者。**針對學生接種流感疫苗，不但能有效減少學生感染流感的機率，降低醫療費用的支出，且亦能降低流感病毒的散播，進而間接保護老人、幼兒等高危險族群，減少他們因感染而發生嚴重併發症的機率。**

《本季流感疫苗成分》

流感疫苗是一種不活化疫苗，由於流感病毒常常發生變異，所以世界衛生組織每年均會監測流感病毒的流行及變異，以建議疫苗的成分。本（114）年度政府採購的三價流感疫苗含有世界衛生組織所建議適用於2025-2026年北半球流感季之抗原成分，保護效力與國際各國狀況相同。

《接種劑量、間隔與收費方式》

學生每次接種劑量是0.5mL。另外，未滿9歲兒童，若是初次接種，應接種2劑，2劑間隔4週以上；若過去曾接種過流感疫苗（不論1劑或2劑），今年接種1劑即可。9歲以上則不論過去接種史，都只須接種1劑。由於每年流行的流感病毒不一定相同，因此，**符合接種對象者，每年均須重新接種**。接種後至少約需2週的時間以產生保護力，其保護效果可持續1年。

流感疫苗可以和其他疫苗同時接種在身體不同部位或間隔任何時間接種。本年度提供之疫苗分別由國光生物科技股份有限公司、荷商葛蘭素史克藥廠股份有限公司台灣分公司、台灣東洋藥品工業股份有限公司、賽諾菲股份有限公司及高端疫苗生物製劑股份有限公司等疫苗廠生產或進口，5廠牌的疫苗效力與安全性皆符合我國衛生福利部食品藥物管理署查驗登記規定，且經其核准使用/進口，將依照疫苗到貨順序依序提供。**針對學生於學校集中接種，全面提供1劑公費疫苗接種，且無須負擔任何費用，惟倘無法於安排接種日接種者，則需持學校發給之通知單至指定院所接種並自付相關醫療費用**。若為出生後首次接種流感疫苗之國小二年級以下學童，如有自覺需要，可於學校第一劑接種至少4週後，至醫療院所自費接種第二劑。

《疫苗保護力》

流感疫苗的保護力因年齡或身體狀況不同而異，平均約可達30-80%，對18歲以上成人因確診流感而住院的保護力約有41%，入住加護病房的流感重症保護力則可達82%。6個月至未滿18歲兒童青少年族群接種流感疫苗之保護力與成人相仿。

《接種禁忌》

一、已知對疫苗的成分有過敏者，不予接種。

二、過去注射曾經發生嚴重不良反應者，不予接種。

《接種注意事項》

一、發燒或正患有急性中重疾病者，宜待病情穩定後再接種。

二、出生未滿6個月，因無使用效益及安全性等臨床資料，故不予接種。

三、先前接種流感疫苗6週內曾發生Guillain-Barré症候群（GBS）者，宜請醫師評估。

四、其他經醫師評估不適合接種者，不予接種。

《青少年常見的暈針反應》

暈針通常是因為對打針的心理壓力與恐懼感，轉化成身體的症狀，出現眩暈與噁心等症狀，大多發生於青少年集體接種疫苗時。大規模疫苗接種時，偶會發生聚集性暈針現象，被稱為集體心因性疾病。暈針反應與疫苗本身安全性無關，也不會造成身體健康的後遺症。

建議接種者於接種前避免空腹及脫水情形，等待注射時間不宜過久，可用音樂、影片或聊天等方式放鬆心情，並於接種時採取坐姿。另外，建議於接種後應坐或躺約15分鐘，離開後請自我密切觀察15分鐘，以避免因發生昏厥而摔倒受傷。

倘若發生暈針狀況，建議先至休息區休息，採坐姿或平躺姿勢緩解其緊張情緒，同時通知醫護人員（在學校應通知學校老師及醫護人員）。如暈針現象持續，宜送醫診治。

《安全性及副作用》

流感疫苗是由死病毒製成的不活化疫苗，因此不會因為接種流感疫苗而得到流感。接種後可能會有注射部位疼痛、紅腫，少數的人會有全身性的輕微反應，如發燒、頭痛、肌肉酸痛、噁心、皮膚搔癢、蕁麻疹或紅疹等，一般會在發生後1至2天內自然恢復。和其他任何藥品一樣，雖然極少發生，但流感疫苗也有可能造成嚴重的副作用，如立即型過敏反應，甚至過敏性休克等不適情況（臨床表現包括呼吸困難、聲音沙啞、氣喘、眼睛或嘴唇腫脹、頭昏、心跳加速等），若不幸發生，通常於接種後幾分鐘至幾小時內即出現症狀。其他曾被零星報告過之不良事件包括神經系統症狀（如：臂神經叢炎、顏面神經麻痺、熱痙攣、腦脊髓炎、對稱性神經麻痺為表現的Guillain-Barré症候群等）和血液系統症狀（如：暫時性血小板低下，臨床表現包括皮膚出現紫斑或出血點、出血時不易止血等）。除了1976年豬流感疫苗、2009年H1N1新型流感疫苗與部分季節性流感疫苗經流行病學研究證實與Guillain-Barré症候群可能相關外，其他少有確切統計數據證明與接種流感疫苗有關。此外，現有研究結果與世界衛生組織報告均顯示，孕婦於懷孕期間接種不活化流感疫苗，並未增加妊娠及胎兒不良事件之風險。

目前研究發現，**雞蛋過敏者接種雞胚胎製程之流感疫苗並不會影響過敏反應發生率，國際上皆建議雞蛋過敏者可安心接種流感疫苗。**

《接種後注意事項》

一、流感疫苗是一種相當安全的不活化疫苗，**接種後可能會有注射部位疼痛、紅腫，少數的人會有全身性的輕微反應**，如發燒、頭痛、肌肉酸痛、噁心、皮膚搔癢、蕁麻疹或紅疹等，但**一般均於接種後一到二天內恢復，嚴重的副作用則極少發生**。

二、接種流感疫苗後48小時內約有1-2%可能有發燒反應，應告知醫師曾經接種過流感疫苗以作為鑑別診斷的參考。接種48小時後仍然持續發燒時，應考慮可能另有其他感染或發燒原因。

三、接種後如有持續發燒、意識或行為改變、呼吸困難、心跳加速等不適症狀，應儘速就醫，並通報學校班導師/護理人員、當地衛生局或撥打疾病管制署1922諮詢專線。

四、暈針通常是因為對打針的心理壓力與恐懼感，轉化成身體的症狀，出現眩暈與噁心等症狀，大多發生於青少年集體接種疫苗時。大規模疫苗接種時，偶會發生聚集性暈針現象，被稱為集體心因性疾病。暈針反應與疫苗本身安全性無關，也不會造成身體健康的後遺症。倘若學生於回家後暈針現象持續，宜送醫診治。

五、完成疫苗接種後，雖可降低感染流感的機率，但仍有可能罹患其他非流感病毒所引起的呼吸道感染，請注重個人衛生保健及各種預防措施，以維護身體健康。

六、使用抗血小板或抗凝血藥物或凝血功能異常者，施打後於注射部位加壓至少2分鐘，並觀察是否仍有出血或血腫情形。

七、貴子女如為出生後首次接種流感疫苗之國小二年級以下學童，如有自覺需要，可於第一劑接種至少四週後，至醫療院所自費接種第二劑。

The Publicly Funded Seasonal Influenza Vaccine Information Statement and Consent Form

《 What is influenza?》

Influenza (also known as the flu) is an acute respiratory illness caused by influenza viruses. The flu is different from the common cold in that it tends to come with noticeable symptoms and lasts longer. The flu symptoms include fever, headache, muscle aches, fatigue, runny nose, sore throat, cough, etc. The flu, in some cases, can cause complications and even lead to death. The most common complication is pneumonia. Other complications include otitis media, sinusitis, encephalitis, brain lesions, myocarditis, Reye's syndrome and other serious infections.

《 How is influenza transmitted?》

The influenza viruses are transmitted mainly from person to person through coughing or sneezing. People may also get infected by touching surfaces contaminated by the flu viruses and then touching their mouths or noses. People with flu can be infectious from 1 day before to 3~7 days after symptom onset. Children tend to shed the virus for a longer period of time.

《 Why should students get vaccinated?》

Research indicates that school-aged children and teenagers are among the first groups to be affected during flu season. Since the flu spreads easily and quickly among students, they are more likely to become spreaders of the virus. Vaccinating students against influenza not only reduces transmission among them and lowers medical costs, but also helps protect high-risk groups (such as the elderly and young children) from developing severe complications by limiting the spread of virus.

《 Flu vaccine components》

The influenza vaccine is an inactivated vaccine. Since the influenza virus mutates frequently, the World Health Organization (WHO) monitors its prevalence and mutations each year to recommend the appropriate vaccine components. The trivalent influenza vaccine purchased by the government this year (2025) contains the antigen components recommended by the WHO for the 2025-2026 northern hemisphere flu season. Its efficacy is consistent with that reported in other countries.

《 Vaccine dosage, interval and charge 》

Students should receive 0.5mL vaccine per dose. Children below the age of 9 who have never been vaccinated against influenza need 2 doses, with an interval of at least 4 weeks apart. Children below the age of 9 who have previously been vaccinated against influenza need only 1 dose. Children aged 9 and above need only 1 dose regardless of their vaccine history. Since the circulating influenza viruses may vary from year to year, annual vaccination is required for eligible individuals. Protection begins around two weeks after vaccination and lasts for one year.

Influenza vaccines can be administered at the same time (or at any time interval) with any other vaccine(s) in different body sites. The vaccines provided this year were produced or imported by Taiwan Adimmune Corporation, GlaxoSmithKline Far East B.V., Taiwan Branch, TTY Biopharm Company Limited, Sanofi Taiwan Co., Ltd., and the Medigen Vaccine Biologics Corporation. In terms of efficacy

and safety, all vaccines from these 5 companies meet the regulatory requirements of the Food and Drug Administration under Taiwan's Ministry of Health and Welfare. These vaccines have been approved for use/import, and will be distributed based on the order of arrival. All schools will be subsidized with one dose of vaccine for each student free of charge. Students who are unable to receive vaccination on the scheduled school vaccination day must bring the form issued by the school to a designated clinic/hospital to get vaccinated at their own expense. Students below grade 2 who are receiving their first-ever flu vaccine may receive the second dose at their own expense at any designated clinic/hospital at least 4 weeks after the first dose received at school.

《 Vaccine effectiveness 》

The vaccine is 30-80% effective depending on the age or physical condition of the individual vaccinated. For adults over the age of 18, the vaccine is approximately 41% effective against influenza-associated hospitalization, and 82% effective against severe cases requiring intensive care unit admission. The vaccine effectiveness for children and adolescents aged 6 months to under 18 years is generally equivalent to that for adults.

《 Vaccine contraindications 》

1. The vaccine should not be administered to anyone allergic to any component of the vaccine.
2. The vaccine should not be administered to anyone who has had severe allergic reactions to previous dose(s) of influenza vaccine.

《 Vaccine precautions 》

1. Individuals with a fever or moderate to severe acute illness are advised to postpone vaccination until their condition has stabilized.
2. Due to insufficient clinical data on relevant vaccine efficacy and safety, infants younger than 6 months of age should not receive the vaccine.
3. Individuals who have suffered from Guillain–Barré syndrome within 6 weeks following a previous dose of influenza vaccine should consult doctors before receiving the vaccine.
4. The vaccine should not be administered to persons deemed medically unfit for vaccination by a doctor.

《 Fainting after vaccination (common among adolescents) 》

Fainting is often accompanied by symptoms such as dizziness and nausea, typically triggered by psychological stress or anxiety. Fainting after vaccination is especially common among adolescents. During mass vaccination, instances of collective fainting may occur and can be categorized as a collective psychogenic disease. Scientific evidence shows that fainting after vaccination is not linked to the safety of the vaccine itself and does not lead to any long-term health consequence.

Students are recommended to avoid fasting or dehydration prior to the vaccination. Prolonged waiting time before injection should be avoided, either. Students may listen to music, watch videos or chat with others to relax themselves while waiting for receiving vaccination. Students should receive the vaccination in a seated position and remain seated or lying down for around 15 minutes after the injection. They are advised to continue monitoring themselves closely for 15 minutes more afterwards to prevent injury in case of fainting.

Students who faint after vaccination are advised to sit or lie down in a rest area, and medical staff should be notified. (At school, teachers and medical staff should be informed.) If the student does not recover as expected, please seek emergency medical services.

《 Side effects and vaccine safety》

The influenza vaccine is an inactivated vaccine made from killed viruses. People do not get infected as a result of the influenza vaccine injection. Pain, redness and swelling may occur at the injection site after vaccination. A small number of people may experience mild reactions such as fever, headache, muscle aches, nausea, itchy skin, hives or rash, which typically resolve within 1 to 2 days. As with other medicines, the influenza vaccine may, in rare circumstances, cause severe side effects, such as immediate allergic reactions, and even anaphylactic shock (clinical manifestations include difficulty in breathing, hoarseness, asthma, swollen eyes or lips, dizziness, and increased heart rate). If such side effects occur, symptoms usually appear within a few minutes to a few hours after the injection of the vaccine. Other adverse events that have been occasionally reported include nervous system symptoms (such as brachial neuritis, facial nerve paralysis, febrile seizure, meningitis, and Guillain-Barré syndrome characterized by symmetrical paralysis) and blood system symptoms (such as transient platelet reduction, with clinical symptoms such as purple spots or blood spots on the skin and bleeding disorder). Except for the 1976 swine flu vaccine, the 2009 H1N1 influenza vaccine, and some seasonal influenza vaccines, which epidemiological studies have shown may be associated with Guillain-Barré syndrome, there is little evidence linking influenza vaccines to other side effects. In addition, current studies and WHO reports both indicate that receiving inactivated influenza vaccines during pregnancy does not increase the risk of adverse pregnancy or fetal outcomes.

Current studies show that individuals with egg allergies do not experience a significantly higher incidence of allergic reactions after receiving egg-based influenza vaccines. Based on international recommendations, people with egg allergies can safely receive flu vaccines.

《 Post-Vaccination Care information》

1. Influenza vaccine is a safe and inactivated vaccine containing killed viruses. Possible side effects of the vaccine include pain, redness and swelling at the injection site. A small number of people may experience mild reactions, such as fever, headache, muscle aches, nausea, itchy skin, hives or rash, which typically resolve within 1 to 2 days after vaccination. Serious side effects are very rare.
2. Approximately 1~2% of individuals may have a fever within 48 hours after vaccination. If this is the case for your child, please inform the doctor about the recent vaccination as a reference for diagnosis. If the fever persists for more than 48 hours after vaccination, it may be due to other possible infections or causes.
3. If your child experiences any symptoms of discomfort after vaccination, such as a persistent fever, changes in consciousness or behavior, difficulty breathing, or a rapid heartbeat, please seek medical attention immediately. You should also report the situation to your child's homeroom teacher/school nurse, the local health bureau, or call the Taiwan CDC's 1922 consultation hotline
4. Fainting is often accompanied by symptoms such as dizziness and nausea, typically triggered by psychological stress or anxiety. Fainting after vaccination is especially common among adolescents. During mass vaccination, instances of collective fainting may occur and can be categorized as a collective psychogenic disease. Scientific evidence shows that fainting after vaccination is not linked to the safety of the vaccine itself and does not lead to any long-term health consequence. If fainting or dizziness persists after vaccination, please seek medical help immediately.
5. While the vaccine can reduce the risk of influenza infection, your child may still suffer from other respiratory tract infections. Please help your child to keep good hygiene and take preventive measures to stay healthy.
6. If your child is taking antiplatelet or anticoagulant medications or suffering from dysfunction of blood coagulation, he/she should compress the injection site for at least 2 minutes after vaccination and monitor for any signs of hemorrhage or hematoma.
7. In school-based influenza immunization programs, every student gets one dose of vaccine in school. Students below grade 2 who are receiving their first-ever flu vaccine may receive the second dose at their own expense at any designated clinic/hospital at least 4 weeks after the first dose received at school.