ABC interview with Dr Paul Effler, Senior Medical Advisor about flu vaccination

Geoff Hutchinson: 00:00 – 00:14

So we’re being warned of a horrid flu season authorities expecting nationally, maybe, 4,000 flu related deaths. Dr Paul Effler is the Senior Medical Advisor at the Communicable Disease Control Directorate within the Department of Health. Paul, good afternoon to you –

Dr Paul Effler: 00:15 – 00:16

Thanks for having me.

Geoff Hutchinson: 00:17 – 00:20

Yeah, nice to have you here. How are you describing this coming season?

Dr Paul Effler: 00:21 – 00:37

Well we’ve had a lot more flu detected in our between our regular seasons, we call inter-seasonal periods and that suggests to us that either we’re up for a big flu season coming or actually it’s a carry-over from our light flu season last year where we’re having cases dragged on into Summer.

Geoff Hutchinson: 00:38 – 00:41

Okay so you’re not sure if it’s up ahead or the tail of something else?

Dr Paul Effler: 00:43 – 00:50

Absolutely, but what we do know is it’s unusual and for that reason it concerns us and we also know that it’s better to be prepared for a big flu season than regret it.

Geoff Hutchinson: 00:51 – 00:55

Yeah and when we talk about numbers, how significant have those numbers been, let’s say for April?

Dr Paul Effler: 00:56 – 01:08

We’ve been about three times what they normally are this time of year still pale in comparison to what we expect to see in the flu season, so it’s a tripling of relatively low numbers but it may be a warning sign of what’s to come.

Geoff Hutchinson: 01:09 – 01:21

Look, we’ve had Michael say (listener called in). For as long as I recall, look for every year the message goes out to get flu vaccinations, firstly the value of the flu vaccination. His observation was “I’ve known many people to get the flu anyway”.
Dr Paul Effler: 01:22 – 02:00

Okay, so there’s a couple of reasons that that can occur and one is you get a flu vaccine it take a couple of weeks to work so you can actually be exposed to flu right at the time you get the vaccine or before the vaccine has done its work. The other is, there’s a lot of other viruses circulate during the winter season that cause the flu-like illness and people get those and think they have the flu. And then the third is, that the vaccine isn’t perfect and some people that are vaccinated with the flu do will get the flu. The reason it’s hard to make a flu vaccine that’s perfect is because virus is constantly changing, and we’re trying to guess what viruses are going to look like during the flu season and sometimes the guess is better when…

Geoff Hutchinson: 02:01 – 02:15

Yeah, I’m interested then in that the flu virus is constantly changing so you have warning signs that suggest there is danger ahead but you don’t know…Tell us what you think you know about the forthcoming flu strain?

Dr Paul Effler: 02:16 – 02:38

Well, we actually can’t predict very well which strain is going to circulate every year and where I trained we used to say if you’ve seen one you’ve seen one flu season. Having said that, usually we have a heavier year follow a light year, and last year was a light year so we’re anticipating that there will be increased flu activity and obviously people can get vaccinated to reduce the risk.

Geoff Hutchinson: 02:38 – 02:44

Are there two strains of flu in Australia this year? I read that but I don’t what’s true, what’s not

Dr Paul Effler: 02:44 – 02:57

There’s typically three and up to four and so the vaccine will contain four for most people so we’re trying to cover all the bases since we don’t know what the front runner will be (umm) it’s as I said, it’s a challenge.

Geoff Hutchinson: 02:58 – 03:16

I’m curious to see whether you think we underestimate the significance of what influenza is because it does kill many, many people and yet for a lot of people we’re not quite know what the definition is, we say we’ve got it when we want the day off work, what’s the difference there? Is there a grey area here, Paul?

Dr Paul Effler: 03:16 – 03:38

Oh absolutely I think we underestimate flu’s impact. In-part because flu when it kills will often do so by causing a complication of a pre-existing medical condition like if you have heart disease it’ll push somebody over the edge, or respiratory disease. So the deaths attributed to flu are really undercounted. Then, unfortunately, just in our vernacular we’ve started talking about the flu like it’s a common cold..

Geoff Hutchinson: 03:39 – 03:40

Yeah..
..we say “I have a touch of the flu” or “I’ve got the stomach flu” and those aren’t really probably influenza infections whatsoever. So we’ve kinda diminished its importance with our own vocabulary but it’s important to remember flu kills thousands, and even healthy children are at risk. You know, half of the children that end up at the ICU during flu season for flu will have no underlying medical conditions, and half of those that die will have no underlying medical issues before they get the flu.

Geoff Hutchinson: 04:08 – 04:15

Our guest this afternoon is Dr Paul Effler, let’s hear from you, and let’s hear from 11-year-old Isabelle, good afternoon to you.

Isabelle (listener): 04:16 – 04:18

Good afternoon to you too.

Geoff Hutchinson: 04:18 – 04:19

What’s your question, Isabelle?

Isabelle (listener): 04:20 – 04:35

Well, I was just wondering when you said around 4,000 Australians die every year in the flu season, I was just wondering why, because Australia is such a developed, modern country and we have good healthcare, why do so many Australians die?

Geoff Hutchinson: 04:35 – 04:46

I’ll ask Paul – that is a fantastic question – why with our sophisticated health system and our generally good community health, why do so many people still succumb?

Dr Paul Effler: 04:47 – 05:16

That’s a very good question, thank you. Essentially flu is, we call it a egalitarian bug it actually infects the wealthy and the poor. And it can infect up to 10% of the population infected every year so we’re talking big numbers of people becoming ill and then there will be a small percentage of them – like I was mentioning – who will have underlying medical conditions that the flu will just push them over the edge in their illness and there will be a cascading sequence of events that will ultimately end up in their demise.

Geoff Hutchinson: 05:17 – 05:40

Jess is a GP and she has written to us – “I’m a GP the most common reasons give as to why people don’t want the flu vaccine 1. Last year I didn’t have the vaccine and I was fine or 2. Last year I had the vaccine and then I got the flu. 3. I don’t want my immune system to be weakened. They are all understandable thoughts that take some time to explain.
Dr Paul Effler: 05:41 – 06:14

Yeah absolutely – so (they) we’ve addressed a little bit “I got the flu shot and then I ultimately got the flu later on”, and the reasons for that. Weakening the immune system uhh the immune system is a marvel, can respond to about 10,000 antigens at any given time so the idea that you wear it out with vaccination is not sound. In fact, it’s been studied where they looked at children who were vaccinated and children who weren’t and tried to determine did they get sick with other illnesses that weren’t in the vaccines more often if they were vaccinated children like it wore out their immune system and there is no evidence to show that.

Geoff Hutchinson: 06:15 – 06:41

Okay – “the conundrum is” says Sandra (listener), “when to get vaccinated? As one with big lung issues and 67 years of age, I had my vaccination last week having heard some concerns already but it won’t last me through our winter months so I’ve left myself wide open in the height of winter”. And again that’s an opinion they’re not sure when is the right time, when is the right time to be jabbed?

Dr Paul Effler: 06:42 – 07:12

Okay, so the smart answer is to say shortly before flu season starts but that’s not very helpful cos it’s hard to predict. More rationally, we look at the data – for years and years-worth of data from Western Australia and we can tell that flu season typically kicks off in earliest the first week of July or the last week of June so you wanna get vaccinated at least several weeks before that. So we think this month, May and early June are probably the best times to be vaccinated.

Geoff Hutchinson: 07:12 – 07:27

Dr Paul Effler is my guest here on the Drive program about 18 minutes after 4, Kylie has a question – “I am 20 weeks pregnant, I have never had the flu before, should I get a flu shot? Am I less likely to get the flu because I have a good immune system?

Dr Paul Effler: 07:27 – 08:29

Well, two questions here, umm like I said, flue’s an egalitarian bug and it affects a lot of people and even people with good immune systems, can come down with the flu. But you’re in a particularly important group to consider vaccination, as a pregnant woman, because we have now good data from randomised control trials, so I’n saying that because it’s a higher standard of evidence and medicine that the flu vaccine will reduce the child’s chance of getting flu in the first 6 months of her (their) life before they can get a vaccine themselves by 60% and keep the woman from getting flu herself by about 70%. So, pregnant women – the World Health Organisation has looked at all of this data from around the world and decided pregnant women are the most important category for getting influenza vaccinations if a country’s just starting a program. So I’d really like to say to all the women out there who are pregnant and their partners, make sure you get vaccinated so that when your child is born, and can’t be protected directly through vaccination, they have the antibodies from you to see them through.

Geoff Hutchinson: 08:30 – 08:44

Okay – there’s some really good questions coming in. Steve (listener) from Singleton says, “I have free flu jabs from my doctor every year can you ask Paul if there would be any difference between
a free one my work is offering me tomorrow or the one my doctor is giving me? Should I stick with my appointment next Wednesday?

Dr Paul Effler: 08:45 – 09:08

Okay – as far as the vaccine itself, there won’t be a difference in the components of the vaccine from either place you get it because they’re nationally registered products no matter where you’re receiving them. There may be benefits to receiving the vaccine at your doctors if you have other medical illnesses that can be addressed and other consultation that will occur but as far as the flu vaccination, just make sure you get it, no matter where.

Geoff Hutchinson: 09:08 – 09:27

Earlier on you mentioned that it might take a couple of weeks to become effective, again, one listener said a doctor has told him the vaccine is then effective for the next six weeks and not long after that, what can you tell us about the efficacy of the vaccine over time?

Dr Paul Effler: 09:28 – 10:00

Yeah – so, six weeks would not be at all accurate in my opinion, the emerging data would say that the optimal protection lasts about three to four months and that’s why we’re really trying to time people close to when flu season’s gonna kick in in earnest. That date has only been able to be available to us because of the new testing that’s available so it’s changed from the past where we used to say early is best, now we’re saying no closer to flu season is probably going to get you the best protection. Now, the protection doesn’t go off like a light switch,

Geoff Hutchinson: 10:00 – 10:01

Yep..

Dr Paul Effler: 10:02 – 10:17

…everything in biology kind of winds down, so responding to the comment earlier “that I’ve left myself wide open” I don’t believe that’s true, there will be some protection even if the protection – isn’t - doesn’t keep you from getting the flu, it should help prevent you from getting serious consequences of the flu and that’s what we really want to stop.

Geoff Hutchinson: 10:18 – 10:24

Yeah – now Julia’s (listener) off to the UK in June, “will the flu jab protect me from northern hemisphere strains?”

Dr Paul Effler: 10:24 – 10:45

So, if she’s going to –the flu jab she has now – probably – but it won’t be the vaccine that – it won’t necessarily be the vaccine they’ll use for their upcoming flu season but it’s the best that’s available now so I would get it now and usually the strains are similar, it just depends on the season, how well they match and I can’t really predict with accuracy.

Geoff Hutchinson: 10:45 – 11:09

My last observation on this is that people hear this discussion year in, year out, we don’t think too
much about flu strains becoming more virulent or unknown to you or they arrive later or where they’ve arrived from, was it from last season or this season. It would seem to me that the best advice we can give people is just listen to what is being said now, don’t you reckon?

**Dr Paul Effler: 11:09 – 12:02**

Yeah – yeah absolutely, and I think people struggle to understand why flu vaccine doesn’t work from one year to the next like other vaccines that are a lot longer and that’s because that virus is changing and I sort of liken it to a burglar that’s come to your house and it has proteins on its surface, one year it’s brown haired and green eyed, the next year it shows up red hair and blue eyed, well you’re immune system doesn’t recognise that burglar so that’s why we try and prime it with a vaccine and to respond to a question that was said earlier that patients say that they get the flu from the vaccine, well that’s impossible because there’s no live virus in the vaccine whatsoever. What can happen is when your immune system turns on right after you get the flu vaccine you can feel fluey and those cytokines respond to the antigens in the vaccine, it gives you the same feeling that you might be coming down with something but usually that’s really short-lived and goes away within a day.

**Geoff Hutchinson: 12:03 – 12:08**

The advice from Paul Effler and the Department of Health is get that flu jab.

**ENDS (12:08)**

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