

Flu Shot FAQ for People who Live with Inflammatory Arthritis

What is the flu vaccine (flu shot)?

The flu vaccine (flu shot) is a vaccine that varies each year which is protective against Influenza A and B strains (it will not give you the flu as it is not a live vaccine). Because the flu viruses mutate frequently, the flu shot is a bit different each year. It is not 100% protective but does decrease the risk of influenza (fever, myalgias, head ache, shortness of breath) and also seems to decrease certain other infections. It is recommended for all Canadians over the age of 6 months, to be given annually unless if contra-indicated. Contra-indications are uncommon: anaphylaxis to a previous flu shot. There are flu shots that do not contain egg (albumin) and can be used if there is a severe egg allergy. A person has had Guillian Barre Syndrome should likely not get vaccinated.

When in flu season that I should get the flu shot?

You should get the flu shot as soon as it is available, but flu season usually lasts for months so it is not too late to get the vaccine at some point while it is still offered. It usually is available in the fall and vaccinations continue in the winter and even spring if the flu shot is still available. It may take up to 6 weeks to develop your immunity.

What are the common side effects of the flu shot? Which side effects rare?

Side effects such as sore arm at or near injection site are common and usually don't last long (a few days or less). There is rarely a fever or muscle aches. Rarely the flu shot can cause demyelination of nerves (Guillain Barre syndrome) and if you have had that disease you should not get vaccinated until there is a discussion with your healthcare provider.

Why is the flu shot recommended for me?

The flu shot is recommended for everyone and people who have a compromised immune system are prioritized as are elderly, those in nursing homes, those with chronic obstructive lung disease, asthma, diabetes, heart disease, 6 months to 4 year olds, pregnant moms and post-partum mothers, very obese, healthcare workers, and those with chronic medical conditions. People with inflammatory arthritis or other systemic autoimmune diseases may be at higher risk due to their disease, the treatment of the disease, age and/or other comorbidities.

If I'm on a biologic or methotrexate, how should I 'time' getting my flu shot with taking my usual DMARD?

There is no fully agreed upon recommendation but if you are on methotrexate, you can stop your dose for 1 to 2 weeks AFTER your flu shot and then restart. For TNF biologics there is no need to hold the treatment. For JAK inhibitors, hold the treatment for 1 week after the flu shot. Your rheumatologist's opinion should over-ride these examples. The point is to withhold to help with the effectiveness of the flu shot rather than for safety reasons. If you are having difficulty accessing the flu shot due to vaccine shortage, appointment availability, etc., it is recommended that you get the flu shot even if you are unable to have the week off methotrexate, etc. The most important take home is JUST GET YOUR FLU SHOT EACH YEAR!

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Are there therapies I should consider or that are safe after getting the flu shot?

It is safe to take acetaminophen or if you don't have any contraindications you can also use Advil, cold remedies, etc.

With arthritis medication suppressing my immune system, should I be getting the higher dose flu shot?

Currently the high dose trivalent flu shot is only recommended for those over the age of 65 years as they have a higher risk of influenza A and it is more protective. However, if not available, the usual flu shot for people less than 65 years of age can be given (quadrivalent).

How do I balance the benefits of a flu shot with the COVID-19 risks?

Get your flu shot. If you then have symptoms of COVID-19, it may be diagnosed more quickly (instead of wondering if it is influenza). However, the flu shot does decrease the risk of some other infections so it is a great idea to get it each year. When the COVID-19 vaccine is available, many rheumatologists will recommend it to all their patients (and take it themselves). The flu shot will not give you influenza (it is not a live vaccine) and will not cause COVID-19.

This information has been compiled and reviewed by CAPA's Medical Advisory Committee. This is not intended to be medical advice for your specific situation – please discuss your specific concerns with your own healthcare provider.