

Thinking of getting the flu vaccine this winter?

Then find out the facts, and the lies you are not being told...

Be safe, not sorry.



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2018 flu vaccine article

Apologies for this longer than usual and controversial article, but it is for your benefit...

I am very angry about the medical profession and their lies.

I had someone in my clinic recently who mentioned that her daughter was pregnant (at 30 weeks) who was going to get the flu shot that day.

I suggested that her daughter shouldn't get the flu vaccine, as no vaccines have been tested for safety in pregnant women, and I offered to show her the research studies which showed this.

She texted her daughter immediately, and she called back immediately to say that she has just had the shot... her doctor said it was "*mandatory in pregnancy*"...

My client passed on my information about the vaccine not being tested for safety, as I was concerned. Her daughter, however, said it was ok as she was given a "*special pregnancy vaccine*" and not the normal one...

I am angry as what the doctor said isn't true, with multiple lies being told here. No vaccines are mandatory anywhere, and certainly none in Australia are mandatory in pregnancy. In fact, the vaccine manufacturers' own product information inserts ALL say words to the effect that "this vaccine has not been tested for safety or efficacy in pregnant women", because there is a scientific protocol preventing using pregnant women in medical tests for pharmaceutical drugs and vaccines.

The doctor also lied that there are "special pregnancy vaccines" - there's no such thing. If the vaccine manufacturers say there are no safety tests, how can they produce a "pregnancy-safe" one without testing it for safety?

I am so angry about this and incredibly disappointed that childrens' lives are being put in danger deliberately based on these lies which they know they are telling.

I try not to write articles on any issues of vaccines, because it is such an emotive and controversial topic. But if we can't have some freedom of speech, without the typical abusive and threatening replies which typically occur when someone speaks out against vaccines, then there's something seriously wrong with the issue. But some recent events have made me change my mind about writing on this controversial topic.

Many qualified and well-researched health professionals, including doctors, steer clear of talking about vaccines because of the backlash which comes from those who strongly disagree with anyone who posts anything negative on this topic. I know some who read this article will disagree with it, and that's fine. However I have added published references to back up what I have summarised here, and hence why this isn't just my personal opinion - it is backed up by the vaccine manufacturer's own information on government websites, and peer-reviewed, published scientific evidence! If you disagree with all of the evidence, take it up with the well-credentialled authors and not me!

This is an article **ONLY** about the 2018 flu vaccines. Not on vaccines in general. I am writing this because of the huge media scare campaign this year to get the flu vaccine, and things which you simply aren't being told about it.

I will be mentioning three groups of people who are particularly vulnerable to the flu vaccine - pregnant women, young children and those over 65 years. I am also going to comment on the flu vaccine by pointing out how unnecessary it is for you, and how you can protect yourself and your family from flu much better, and more safely too!

The 2018 flu vaccine will contain 4-5 strains of flu virus, as **guessed** by the World Health Organisation, out of many hundreds or thousands of flu viruses which ***may*** be the most common ones this season. Yes, "guessed" is about as good as it gets...

With the 2017 flu season being one of the worst for infections and deaths on record, there is currently a massive marketing campaign to get **MORE** people to get the flu vaccine this year. Ironically, 2017 had one of the highest uptakes of the flu vaccine, yet also one of the highest incidences and mortality too. There are a lot of lies being told about the flu vaccine, and I would like to share the published evidence, and expose the truth.

The 2017 flu vaccine DIDN'T work!

So here are the FACTS about the flu vaccine, direct from the vaccine manufacturers' own information and other published and peer-reviewed studies, which contradicts the many lies being told by various health departments and doctors, and other published and peer-reviewed scientific research which tells a completely different story to the lies you are being told.

Fact #1 - Here's the greatest lie which I am very angry about - No vaccines are ever tested for safety or effectiveness in pregnant women by the vaccine manufacturers. None. See the attached photos for proof, taken from all the Australian 2018 vaccine product information inserts from their respective manufacturers, on the government TGA website. (*Therapeutic Goods Administration, 2018*).

My comment - when your doctor, politician or health department says vaccines are safe for you when pregnant, they are lying!

Fact #2 - The flu vaccine is not very effective in preventing you getting the flu. The flu vaccine only contains 4 strains of flu virus, out of hundreds or more strains which can cause flu in you. And the efficacy rate of actually enabling antibodies ranges can be as low as 16-26% effective for some age groups (*Therapeutic Goods Administration, 2018*).

Fact #3 - You CAN get the flu as a result of getting the flu vaccine! ALL of the 2018 flu vaccines have side effects which includes fatigue, malaise, fever, cough, sore throat, headache, muscle and joint pains - all are symptoms of flu! The Afluria Quad vaccine even states that a side effect is an "influenza-like illness"! Other studies show that the flu vaccine initially weakens your body's immune system as it deals with the simulated infection of the flu vaccine, which leads you to be susceptible to other infections you are exposed to (*Therapeutic Goods Administration, 2018*).

Fact #4 - None of the vaccine manufacturers used good testing practices, such as a randomised controlled trial against a placebo. They simply compared the results of their new vaccine against their old one, which doesn't give an accurate or honest picture of the vaccine's effectiveness or safety (*Therapeutic Goods Administration, 2018*).

Fact #5 - 6 out of the 7 2018 flu vaccines contain formaldehyde, a known carcinogen even in the smallest amounts. Other toxic and dangerous flu vaccine ingredients include polysorbate 80 (an emulsifier which can enable vaccine ingredients to cross the blood brain barrier). (*Therapeutic Goods Administration, 2018*).

Fact #6 - 6 out of the 7 2018 flu vaccines can cause false positive tests for HIV, Hepatitis C and other viruses if you have these tests a after flu vaccination. Imagine getting a HIV diagnosis, unknowingly from getting a flu shot? (*Therapeutic Goods Administration, 2018*).

Fact #7 - All of the 2018 flu vaccine information inserts say that the vaccines should be postponed if someone currently has an acute (ie, short-term) infection or fever, or both. Yet I know Doctors will either not ask about this, or routinely vaccinate someone who is currently not well or immunocompromised. This is very dangerous practice as it causes worse side effects (*Therapeutic Goods Administration, 2018*).

Fact #8 - There are many severe side effects from the flu vaccine, including Guillain-Barre Syndrome (or paralysis), convulsions, eye disorders, inflammation of the brain and spinal cord (encephalomyelitis), transverse myelitis (inflammation and loss of the nerve sheath, and a sign of multiple sclerosis), and more issues (*Therapeutic Goods Administration, 2018*).

Fact #9 - The 2018 Flud vaccine (for over 65 year olds) reported in their product information insert that their own tests showed "Hospitalisation was required in over 5% of people receiving Flud vaccine, and deaths occurred in almost 1% of those tested. 1% of people getting this vaccine died!" (*Therapeutic Goods Administration, Flud Product Information, 2018*).

Fact #10 - The 2018 Fluzone High-Dose vaccine test results in their product information insert showed that "6.1-8.3% experienced a "serious adverse event", including 23 deaths (about 1% of those tested) in one clinical trial, and 167 deaths (over 1% tested) in another trial." Those who died had various chronic illnesses". To repeat, about 1% of those over 65 years tested with this vaccine DIED! Yet this particular vaccine is specifically marketed to those over 65 years WITH chronic diseases! (*Therapeutic Goods Administration, Fluzone High-Dose Product Information, 2018*).

Fact #11 - A 2014 study showed that people who get the annual flu vaccine had a reduced immune system response (ie, reduced antibodies) after each annual flu vaccine. So the more flu vaccines you get, the less effective they are. Contrast that with the more natural flu illnesses you get, the stronger your immune system gets (*McLean et al., Clinical Infectious Diseases Journal, 2014*).

Fact #12 - A 2018 study on 999 children and adults showed those who had the flu vaccine had a higher rate of respiratory infections in the weeks after the vaccine than those who didn't have the flu vaccine! And when the post-vaccine infection was analysed and confirmed as being flu, the rate of infection of those vaccinated was the same as for those not vaccinated, meaning that the flu vaccine did NOT offer any protection against flu infections, and actually caused MORE infections compared to those who did not get the flu vaccine (*Rikin et al., Vaccine journal, 2018*). Other similar studies reported similar results.

Fact #13 - If you do get the flu, suppressing symptoms with medications (pain relievers, anti-inflammatories, cough suppressants, antibiotics, anti-pyretics etc) will make the infection duration longer, more severe, and more likely to turn into pneumonia which can be very serious. A 2004 study (and others) show using antibiotics and other medications doesn't prevent pneumonia, but can actually increase the risk, and increase mortality (*Diaz et al., Clinical Infectious Diseases, 2004*).

Fact #14 - A 2013 study found that there was a 4,000% increase in risk of spontaneous abortion and stillbirth from the flu vaccine given to pregnant women in the 2009-10 season, compared to pregnant women who did not get the flu vaccine in the previous year. The difference was the addition of the H1N1 flu virus, which is in the 2018 flu vaccines (*Goldman, Human and Experimental Toxicology, 2013*).

Fact #15 - Annual flu vaccines do not undergo the typical multi-year safety and efficacy studies which are required for other pharmaceutical medications or vaccines. There's obviously no time to do this for each year, which is why the safety and efficacy data for flu vaccines is lacking, and why they are potentially dangerous.

Fact #16 - Influenza isn't as infectious as you have been lead to believe! Only about 20% of people at most will become infected with flu even when deliberately exposed to the virus in published studies! Hence the other 80% who were exposed were protected by their own immune system! (*Cannel et al., Virology Journal, 2008*).

Fact #17 - There are safer, more effective and better ways to prevent flu in the colder months, and to get over them quicker than the flu vaccine.

We already have an immune system which works and protects us from any and all viral and bacterial infections all the time! We are not and should not be dependent on any external method. But your immune system can be compromised by many factors, which can lead to an opportunistic infection like flu to take hold.

Hence the best way (and really, the ONLY safe way) to protect yourself from flu, is to maintain a strong and healthy immune system! There are many things which reduce your immune system, such as poor dietary choices (especially sugary foods and drinks), poor quality or quantity sleep, stress, poor digestive system function, lifestyle factors, nutrient deficiencies, medications, vitamin D deficiency, and others. The most important factors here are 1) your food choices, 2) stress and 3) nutrient deficiencies (especially with vitamin D). Many studies show that the reason we have more flu in winter than other seasons is due to people not getting enough sun exposure (our bodies make vitamin D from direct sunlight on our skin) during the year, and more so in winter. I will post more on this in a follow-up article soon!

These factors are what you really need to improve to work on to prevent flu. These are what I can help you with!

The lies being told to vulnerable people (especially children, pregnant women and those over 65 years) about the flu vaccine and spread across all media networks from those who should be protecting us - doctors, health departments, and government officials - is an abhorrent and deceitful act. If these officials are blatantly lying about the safety of flu vaccines in pregnant women, when there are NO safety studies done ever, then you simply cannot trust them. Please do your own research (from real research studies, not from opinion piece articles) or ask other independent health practitioners before you place your life and that of your family at risk.

There are better and safer ways to stay healthy in winter! I will post more articles on this topic very shortly.

Best of health to you.

Ross Walter

Nutritionist and Naturopath

Screenshots of Qld and NSW health department websites recommending flu vaccines for pregnant women:



[Home](#) > [Clinical practice](#) > [Clinical guidelines and procedures](#) > [Diseases and infection prevention](#) > [Immunisation](#) > [Vaccine service provider information](#) > 2018 influenza vaccination guidelines

Vaccine service provider information

Order, store and manage vaccines
Cold chain breaches
Adverse event following immunisation
Immunisation records

2018 influenza vaccination guidelines

Who should be offered quadrivalent influenza vaccines (QIVs)?

QIVs are recommended for:

- all children from 6 months to less than 5 years of age
- pregnant women at any stage of pregnancy
- all Aboriginal and Torres Strait Islander people ≥15 years of age
- all individuals ≥6 months of age with medical conditions predisposing them to severe influenza
- individuals up to 65 years.

Pregnancy immunisation campaign

The pregnant women immunisation campaign is an extension of the Vaccination Matters campaign. It encourages women to get immunised during pregnancy, to protect themselves and their babies against life-threatening diseases.


The issue

Vaccinations during pregnancy can help protect mum and bub from serious life-threatening diseases. There are two free vaccinations recommended during pregnancy:

- Whooping cough
- Influenza


The free whooping cough vaccination is recommended during the third trimester of each pregnancy, preferably between 28 and 32 weeks. It is a combined diphtheria, tetanus and whooping cough (pertussis) vaccination. It is safe for mums and bub and will help protect newborns until they are old enough to be vaccinated from 6 weeks of age.

Pregnant women are at higher risk of serious complications from the flu. The free flu vaccine is safe to be given any time during pregnancy but it is recommended women consider the timing of the flu season when booking their vaccination. *Based on what studies?*



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Seasonal Influenza Vaccination 2018




Update on 23 May 2018

There has been unprecedented demand for influenza vaccine in Australia in 2018. NSW Health has distributed almost two million doses of state and national program influenza vaccines, around half a million more than in 2017.

NSW Health is working closely with the Australian Department of Health to manage the influenza vaccine supplies provided under the National Immunisation Program and we expect additional supplies of some vaccines from overseas within a fortnight. All vaccine supplies for adults under the National Immunisation Program are constrained at this point. As a precaution, we're restricting the quantities of vaccines we're distributing to GPs.

Flu shots are available for free under the National Immunisation Program to members of the community who are pregnant, over 65 years of age, are Aboriginal or have medical conditions such as severe asthma, diabetes and heart problems. We are advising anyone who is yet to have the vaccine to call ahead to their GP to ensure the correct formulation for their age is in stock before they attend for vaccination.

Pregnant women and influenza



Important facts for pregnant women

- Flu can be life threatening for pregnant women and their baby.
- Flu shots are free for all pregnant women.
- A flu shot is the best way to protect you and your baby against flu.
- A flu shot will also protect your baby from flu after birth.
- Flu shots are safe for both mother and baby, and can be given at any stage of pregnancy.
- Contact a doctor immediately if you develop flu symptoms.

First of all, congratulations if you're pregnant or planning to have a baby soon.

Naturally, your major focus right now is having a problem-free pregnancy and welcoming a healthy baby into the world. The last thing you want to be dealing with are flu symptoms like fever, headaches, a sore throat, muscle aches and tiredness.


There are simple precautions you can take to protect you and your baby from flu:

Get a flu shot


The flu shot is the best protection and the vaccine is safe for both you and your baby when given during pregnancy. Everyone who cares for your baby should get a flu shot too, including other household members and relatives.


If you're wondering about the safety and benefits of being vaccinated, see the [top things about flu every pregnant woman should know](#).

VACCINATE AGAINST FLU
PROTECT YOUR BABY TOO



The flu is a serious illness, especially when you are pregnant





Additional resources

[Flu vaccination in pregnancy](#)

Screenshots of all the 2018 Flu Vaccine Product Information inserts:

For the 2018 influenza season, the TGA has registered six vaccines which will be available for use in the following age groups:

Sponsor	Tradename	Age group
Quadrivalent vaccines		
Sanofi-Aventis	FluQuadri Junior*	6-35 months (<3 years)
	FluQuadri	3 years and over
GlaxoSmithKline	Fluarix Tetra	3 years and over
Mylan Health	Influvac Tetra	18 years and over
Seqirus	Afluria Quad**	18 years and over
Trivalent vaccines		
Sanofi-Aventis	Fluzone High dose	65 years and over
Seqirus	Fluad	65 years and over

FLUAD®

Use in Pregnancy

Category B2.

Animal reproduction studies have not been conducted with Flud®. There are no adequate and well-controlled studies in pregnant women. Flud® is indicated for persons 65 years and over.

Summary from the Manufacturer's Product Information insert:

- Contains formaldehyde (a carcinogen), MF59C.1 (squalene, linked to autoimmune conditions), polysorbate-80 (allows chemicals to cross the blood-brain barrier), and more
- Tests used a previous vaccine as a comparison, and not an inert placebo control as required in quality testing
- The vaccine can cause false positive test results for HIV, HepC, and other infections
- The vaccine should be postponed in those with acute febrile illness
- The vaccine can impair the metabolism of many medications such as Warfarin and others
- Side effects include: all symptoms of flu, tachycardia, digestive system pains, inflammation, vertigo, brain inflammation, convulsions, asthma, cellulitis, and more
- Hospitalisation required in over 5% of those given this vaccine
- **About 1% of those given this vaccine in testing subsequently died**

Reference: Therapeutic Goods Administration. (2018). Flud Product Information. Retrieved 14th May 2018, from <https://www.ebs.tga.gov.au/ebs/picmi/picmirepository.nsf/pdf?OpenAgent&id=CP-2018-PI-01073-1>

Fluzone High-Dose

Effects on Fertility

Fluzone High-Dose has not been evaluated for possible effects on human fertility.

Use in Pregnancy (Category C)

Animal reproduction studies have not been conducted with Fluzone High-Dose. It is also not known whether Fluzone High-Dose can cause foetal harm when administered to a pregnant woman or can affect reproduction capacity.

Fluzone High-Dose should not be given to a pregnant woman unless the potential benefits outweigh the risks.

Use in Lactation

It is not known whether Fluzone High-Dose is excreted in human milk hence, caution should be used when administering the vaccine to breastfeeding women.

Summary from the Manufacturer's Product Information insert:

- Contains formaldehyde (a carcinogen), octoxinol-9 (known toxic allergen and hormone disruptor)
- Testing used previous vaccine as the comparison, and not an inert placebo control as required in quality testing
- The vaccine can cause false positive test results for HIV, HepC and other infections!
- Seroconversion effectiveness (to produce antibodies) is very low at 11-27%, making it next to useless
- Should not be given to those with a bleeding disorder, on coagulant therapy, or other medications
- Within 6 months after vaccination, up to 8% had a "serious adverse event"
- **Over 1% of those given this vaccine in testing subsequently died**
- Most who died after this vaccine had various chronic illnesses, yet this vaccine is marketed for those with chronic illness
- Side effects include: paralysis, all symptoms of flu, brain inflammation and more

Reference: Therapeutic Goods Administration. (2018). Fluzone High-Dose Product Information. Retrieved 14th May 2018, from <https://www.ebs.tga.gov.au/ebs/picmi/picmirepository.nsf/pdf?OpenAgent&id=CP-2018-PI-01038-1>

INFLUVAC® TETRA

Use in pregnancy

Category B2

Note: No mention of actual studies!

Inactivated influenza vaccines can be used in all stages of pregnancy. Larger datasets on safety are available for the second and third trimester, compared with the first trimester; however, data from worldwide use of influenza vaccine do not indicate any adverse fetal or maternal outcomes attributable to the vaccine.

Health authorities recommend vaccination for all pregnant women at any stage of pregnancy, particularly those who will be in the second or third trimester during the influenza season.

Yes, health authorities do, but all other flu vaccine product information says they have NOT been tested for safety in pregnant women!

Summary from the Manufacturer's Product Information insert:

- Contains formaldehyde (a carcinogen), polysorbate 80 (enables vaccine chemicals to cross the blood-brain barrier)
- Testing used a previous vaccine as the comparison, and not an inert placebo control as required in quality testing
- The vaccine can cause false positive test results for HIV, HepC and other infections!
- NO data given for effectiveness in producing antibodies
- No drug interaction studies done on this vaccine
- Vaccination should be postponed in those with an acute OR febrile disease
- Side effects include paralysis, all symptoms of flu, brain inflammation, and more

Reference: Therapeutic Goods Administration. (2018). Influvac Tetra Product Information. Retrieved 14th May 2018, from <https://www.ebs.tga.gov.au/ebs/picmi/picmirepository.nsf/pdf?OpenAgent&id=CP-2017-PI-02671-1>

FLUARIX TETRA

Use in Pregnancy (Category B1)

The safety of Fluarix Tetra when administered to pregnant women has not been evaluated.

Fluarix Tetra should be used during pregnancy only when clearly needed, and when the possible advantages outweigh the potential risks for the mother or foetus.

Use in Lactation

The safety of Fluarix Tetra when administered to breastfeeding women has not been evaluated. It is unknown whether Fluarix Tetra is excreted in human breast milk.

Summary from the Manufacturer's Product Information insert:

- Contains formaldehyde (a carcinogen), polysorbate 80 (carries vaccine ingredients across the blood-brain barrier), and other chemicals
- Testing used the previous vaccine as the comparison, and not an inert placebo control as good quality testing required. Hence safety results are not valid
- The vaccine can cause false positive test results for HIV-1, Hepatitis C and other infections!
- Not to be given to those suffering from an acute illness with fever
- Can impair the metabolism of Warfarin and other medications
- Side effects include all flu symptoms (!), paralysis, brain inflammation, and "an influenza-like illness"

Reference: Therapeutic Goods Administration. (2018). Fluarix Tetra Product Information. Retrieved 14th May 2018, from: <https://www.ebs.tga.gov.au/ebs/picmi/picmirepository.nsf/pdf?OpenAgent&id=CP-2013-PI-02216-1>

Afluria® Quad

Use in Pregnancy: Category B2

The safety and effectiveness of Afluria® Quad vaccine has not been established in pregnant women.

Therefore, careful consideration should be made regarding the benefits and risks prior to administration of Afluria® Quad vaccine to women who are pregnant, or plan to become pregnant.

No embryofetal development study has been conducted with Afluria® Quad vaccine.

Use in Lactation

The safety and effectiveness of Afluria® Quad vaccine has not been established in nursing mothers.

Summary from the Product Information:

- Tests used the previous vaccine as the comparison, and not an inert placebo control, so safety results are not valid
- The vaccine can cause false positive test results for HIV-1, Hepatitis C and other infections!
- Seroconversion (antibody production) in as little as 45% of adults (18-65years), or just 16% of those over 65 years
- Vaccination should be postponed in or febrile illness or acute infection
- No studies done on administering this vaccine with any other medications
- Side effects include all typical flu symptoms, neurological symptoms (nerve pain, convulsions, paralysis, brain inflammation), and "influenza-like illness!"

Reference: Therapeutic Goods Administration. (2018). Afluria Quad Product Information. Retrieved 14th May 2018, from <https://www.ebs.tga.gov.au/ebs/picmi/picmirepository.nsf/pdf?OpenAgent&id=CP-2017-PI-01557-1&d=2018051416114622483>

FluQuadri™

FluQuadri™ Junior

Use in Pregnancy (Category B1)

There are, however, no adequate and well-controlled studies in pregnant women.

FluQuadri should be given to a pregnant woman following an assessment of the risks and benefits.
Health authorities recommend vaccination of pregnant women.

Use in Lactation

It is not known whether FluQuadri is excreted in human milk hence, caution should be used when administering vaccine to breastfeeding women.

Paediatric Use

Safety and effectiveness of FluQuadri/FluQuadri Junior in children below the age of 6 months have not been established.

Summary from the Product Information:

- This vaccine contains formaldehyde (a carcinogen), Oxoctinol-9 (antibacterial and spermicide!)
- Safety testing actually used a smaller amount of haemagglutinin than is actually in the final product
- Tests used the previous vaccine as the comparison, and not an inert placebo control, so results are not valid
- The vaccine can cause false positive test results for HIV-1, Hepatitis C and other infections!
- Seroconversion (antibody production) in as little as 32-58% of children
- Vaccination should be postponed in acute or febrile disease with or without fever
- No studies done on administering this vaccine with any others
- Side effects include all typical flu symptoms, convulsions, eye disorders, paralysis, brain inflammation, and more
- The number of reported adverse effects is up to 54% of all children receiving this vaccine.

Reference: Therapeutic Goods Administration. (2018). FluQuadri Junior Product Information. Retrieved 14th May 2018, from <https://www.ebs.tga.gov.au/ebs/picmi/picmirepository.nsf/pdf?OpenAgent&id=CP-2014-PI-03353-1>

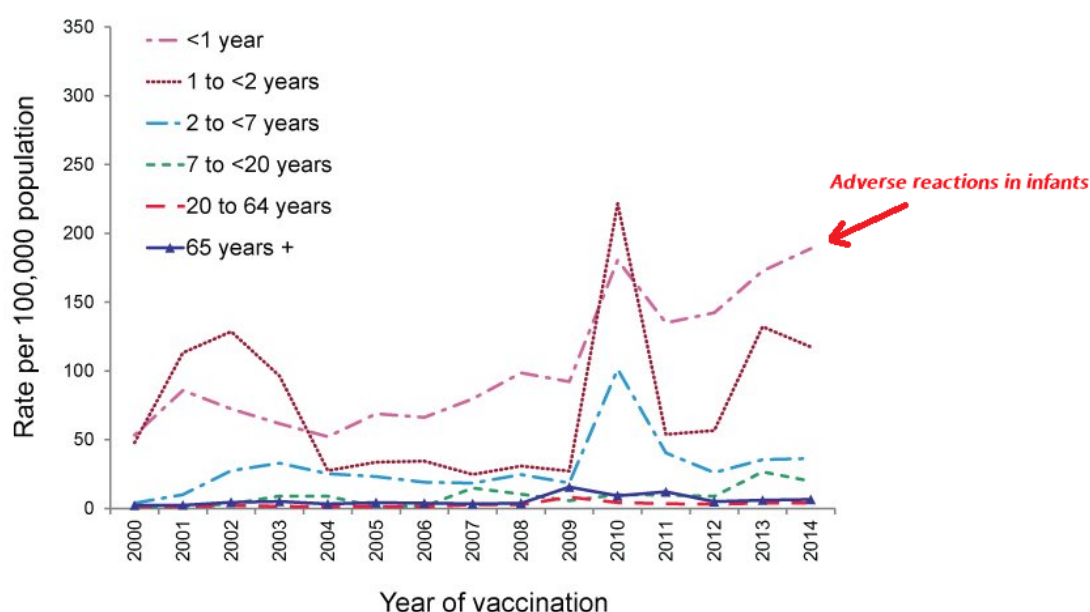
Government report showing the annual flu vaccine causes 19.1% of all adverse reactions which are reported. But only about 10% of adverse reactions are actually reported, and the true results would be a lot higher.

Table 4: Vaccine types listed as 'suspected' in records of adverse events following immunisation, ADRS database, 2014

Suspected vaccine type	AEFI records		One suspected vaccine only†		'Serious'§		<7 years		≥7 years	
	n	%	n	%†	n	%†	n	%†	n	%†
Influenza	589	19.1	495	84.0	32	5.4	49	8.3	541	91.7
HPV	571	18.5	334	58.5	31	5.4	2	0.4	569	99.6
MMR	523	16.9	103	19.7	35	6.7	480	91.8	38	7.3
DTPa-IPV-HepB-Hib	467	15.1	36	7.7	49	10.5	461	98.7	3	0.6

From the same source, data showing infants having the highest number of adverse reactions, and increasing at a very high rate each year since 2004:

Figure 3: Reporting rates of adverse events following immunisation per 100,000 population, ADRS database, 2000 to 2014, by age group and year of vaccination



Source: Australian Government, Department of Health. (2018). Surveillance of adverse events following immunisation in Australia annual report 2014. Retrieved 14th May 2018 from <http://www.health.gov.au/internet/main/publishing.nsf/content/cda-cdi4003l.htm>

References:

- Fluquadri/Fluquadri Jnr Product Information (6-35months) - [Click here for product information insert](#)
- Fluarix Tetra Product Information (3+years) - [Click here for product information insert](#)
- Influvac Tetra Product Information (18+ years) - [Click here for product information insert](#)
- Afluria Quad Product Information (18+ years) - [Click here for product information insert](#)

Fluzone High-Dose Product Information (65+ years) - [Click here for product information insert](#)

Fluad Product Information (65+ years) - [Click here for product information insert](#)