GETTING INFECTED IS EASY. SO IS GETTING VACCINATED.



Vaccination – protection for me and my environment

Infectious diseases such as whooping cough or influenza (flu) can have a severe course and in some cases even lead to lifelong impairments.

The STIKO (Standing Committee on Vaccination) recommends a combination vaccine (tetanus, whooping cough, diphtheria, and polio if indicated)

- once for all adults when they are due for their next tetanus vaccination
- for all pregnant women in the 3rd trimester Trimester², as well as household members and caregivers of a newborn child

From the age of 18, a booster vaccination against diphtheria and tetanus is recommended every 10 years.

The STIKO recommends an annual flu vaccination for, among others:

- · all persons aged ≥ 60 years
- People aged 6 months and over with an increased health risk due to an underlying disease
- · all pregnant women from the 2nd trimester²
- People who are at increased risk of infection for professional reasons
- People who care for or live with people at increased risk

1. Robert Koch Institute (RKI), Epid Bull 2024;4:1-72 2. For pertussis: If there is an increased likelihood of premature birth, the vaccination should be beought forward to the 2nd trimester. For influenza: In case of increased health risk due to an underlying disease from 1st trimester.

Why is the annual flu vaccination important?

The flu is unpredictable and spreads quickly. The consequences of an infection are unpredictable for each individual, even for healthy people. The risk of infection is particularly high where many people are together in a confined space, for example on public transport.

The more people are vaccinated against influenza, the greater the community protection.

The risk of severe flu increases from the age of 60

The "real" flu is a particular health risk for people aged 60 and over, because

- their immune system weakens with increasing age and
- they are more likely to have existing underlying chronic conditions such as cardiovascular disease, respiratory disease or diabetes mellitus. These can be worsened by the flu.

The flu can lead to serious complications.



8-times increased risk of stroke



10-times increased risk of heart attack

In the three days after laboratory-confirmed influenza infection compared to the period before influenza infection Warren-Gash C, et al. Eur Respir J. 2018;51(3):1701794



How does a vaccination work?

By administering a vaccine, a person can become immune or resistant to an infectious disease.³ Vaccines stimulate the body's own immune system and thus protect against infections or diseases.³



Introduction of of an attenuated form of the virus/bacteria

into the body



Production of antibodies to defend against the virus/ bacteria



3.

Strengthening the natural defenses by injecting the vaccine



Elimination of the "real" virus/bacteria when it enters the body some day, as it is recognized by the immune system

What are the risks without a booster vaccination?



TETANUS

is transmitted into the body through cuts, scratches or wounds.

- Painful muscle tension, usually all over the body
- Difficulty opening the mouth and swallowing



DIPHTHERIA

is transmitted from person to person through droplets when coughing or sneezing.

- Thick coating in the back of the throat
- Possible heart failure and paralysis



PERTUSSIS

is transmitted from person to person through droplets when coughing or sneezing.

- Severe coughing attacks
- Vomiting
- Sleep disorders
- · Rib fractures
- Pneumonia



POLIO

is mainly transmitted faecally-orally via the stool through smear infections

- · Paralysis of the arms and legs
- Respiratory paralysis
- \cdot Possible death by suffocation

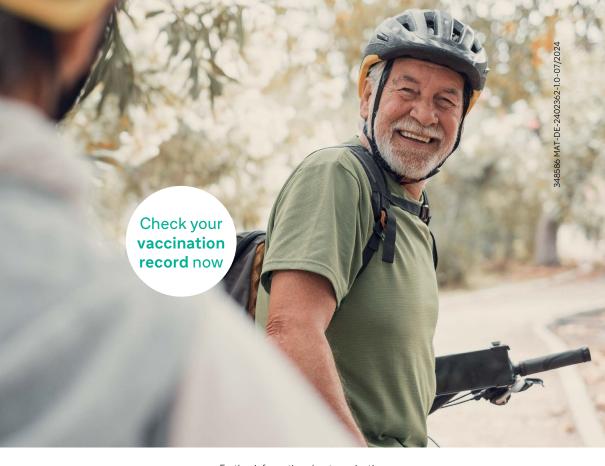
Why are booster vaccinations important?

Even if you have already received basic immunization as a child, protection against some pathogens, such as tetanus, diphtheria and whooping cough (pertussis), diminishes over the course of a lifetime.^{4,5}

Regular booster vaccinations give the immune system a boost and ensure that pathogens can continue to be effectively countered in the event of an infection.



^{4.} Hewlett El, Edwards KM. N Engl J Med. 2005; 352: 1215-1222. **5.** Klein NP et al. N Engl J Med. 2012; 367: 1012-1019.



Further information about vaccination



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