Get vaccinated!

sanofi

The "*real flu*" – a profile

Sneezing, coughing, fever – a clear case of flu? Not everything that is commonly referred to as the flu is a "real flu" (influenza), but could also be a flu-like infection (cold).[1–4]

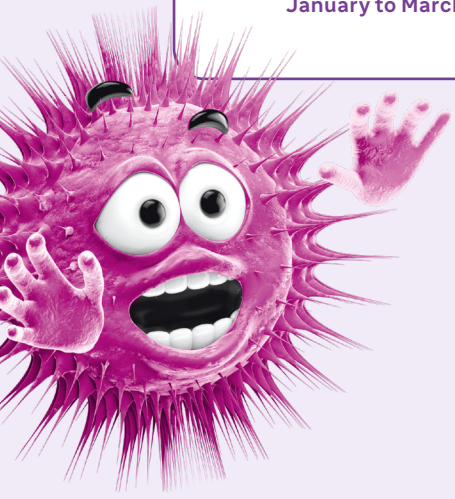
What constitutes a real flu?

Here are some important characteristics: [5,6]

What?
The pathogens are different types of influenza viruses

How?
Transmission mostly through droplet infection (e.g. when speaking, sneezing, coughing), rarely through direct contact (e.g. shaking hands)

When?
Occurs mainly in the flu season (October to May) and especially during the flu epidemic (usually January to March)



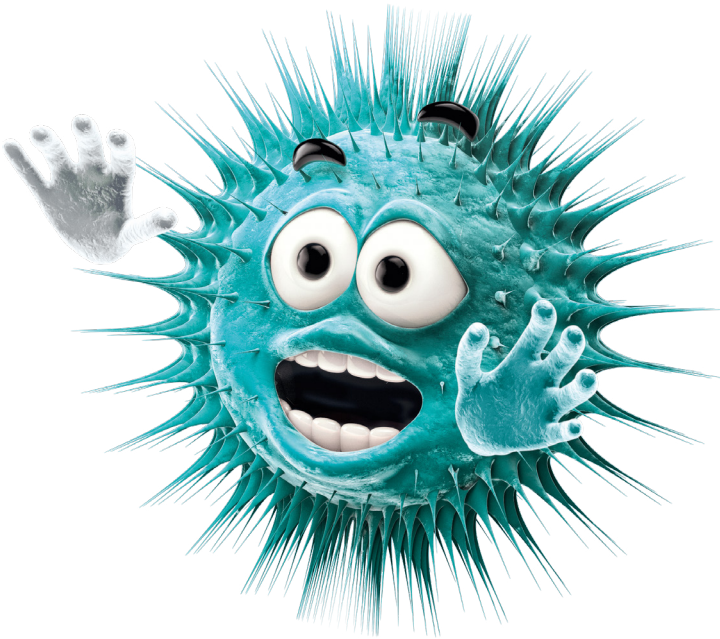
A flu infection is often just the *beginning*

A real flu can lead to serious complications including hospitalization or death. [5,6] An infection with flu viruses, for example, can significantly increase the risk of serious illness and the associated long-term consequences: [7,8]

10x
increased risk of **myocardial infarction**
[7,a,b]

8x
increased risk of **stroke**
[7,a,b]

23%
people lose their independence
[8,c]

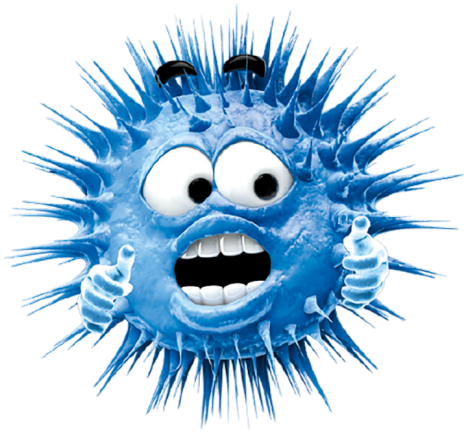


Flu or *flu-like infection* – what is the difference?

The symptoms of real flu and a cold are very similar. However, there are some typical differences:[1–6,9–11]

	Real Flu (Influenza)	Cold (flu-like infection)
Onset of Symptoms	Suddenly	Gradually
Fever	Up to 41°C, shivering, sweating	Usually increase by only 0.5°C
Runny nose, sneezing	Rare	Frequent (blocked, runny nose)
Cough	Frequent, dry	Mild to moderate
Recovery time	Long recovery time after the end of the illness	Usually quick recovery after illness
How you feel	Fatigue, tiredness (from the beginning)	Normal
Complica-tions	Possible, especially in risk groups	Rare
Pathogens	Influenza viruses types A and B	More than 200 different cold viruses, e.g. rhinoviruses

In order to identify the pathogen with certainty, a laboratory test is required for both diseases.[1–4]



Flu vaccination is important for *everyone*

The STIKO examines for whom a particular vaccination makes sense and recommends that these groups get vaccinated against influenza every fall:[12]

People aged 60 and over

Medical Staff
(and people in facilities with extensive public traffic)

People with pre-existing conditions
(chronic respiratory, cardiovascular, liver and kidney diseases)

People with diabetes mellitus
(and other metabolic disorders)

Contact persons
(people who could be a potential source of infection for high-risk people living in the same household or being cared for by them)

Pregnant Women
(in the 2nd trimester of pregnancy, in the case of chronic underlying diseases from the 1st trimester of pregnancy)

Vaccination is also recommended for the following groups of people:

- People aged 6 months and over with an increased health risk due to an underlying illness, e.g.:
  - chronic neurological diseases such as multiple sclerosis
  - congenital or acquired immune deficiency
  - HIV infection
- Residents of retirement or nursing homes

Read the full STIKO recommendation (available in English):

Who is particularly at risk from the *flu*?

Some populations have an increased risk of complications if they contract the flu.[5,6,13]

People aged 60 and over

Adults aged **60 and over** are particularly at risk of infection **influenza viruses.**[14–16]
They account for

in connection with the real flu.[14]

There are 2 main reasons for these complications.
As we age
- **the immune system weakens.**[15,16]
- **chronic illnesses become more frequent.**[15,16]

Pregnant Women

The Permanent Vaccination Commission (STIKO) at the Robert Koch Institute recommends that all pregnant women get vaccinated against the flu.[12,13,17]

- Due to their altered immune system, pregnant women with the flu can develop complications. They have an increased risk of hospitalization and even death.
- Maternal antibodies against influenza viruses are transferred to the unborn baby via the placenta, which can later protect the unvaccinated newborn from influenza.

People with *cardiovascular diseases*

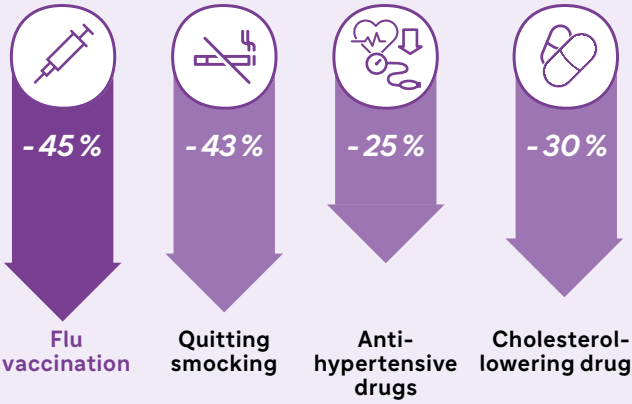
Flu can have serious consequences for people with cardiovascular disease.
This is because flu viruses can attack both the heart and the blood vessels.[18]
People with heart disease **aged 65 and over are particularly affected**. They have a **5x higher risk** of dying from the flu than people of the same age without heart disease.[19]

When it comes to *heart health* a *prick* can also help.

The flu vaccination is the **most important protective measure** against the high health risks of the real flu.[5] This is especially true for people who have already had a serious cardiovascular disease such as a myocardial infarction.

Did you know that the flu vaccination is as effective as stopping to smoke in reducing the risk of a myocardial infarction?[20–22]

Risk reduction for a serious cardiovascular event[21,22,d]



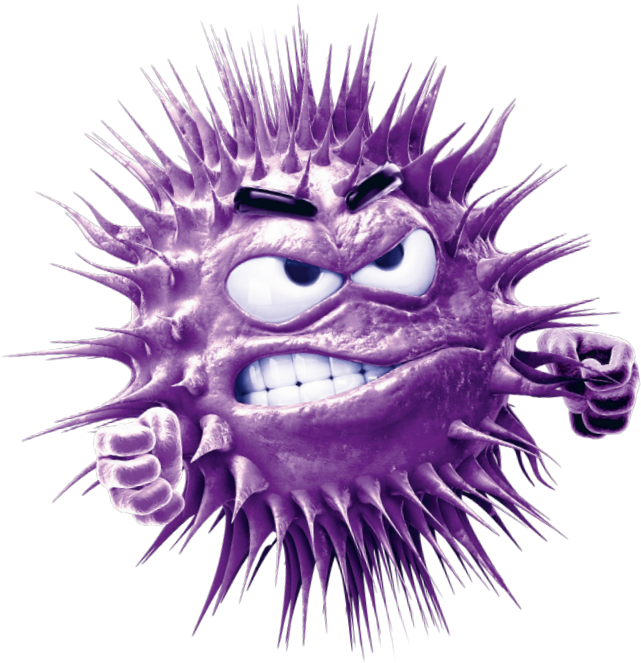
People with *Diabetes* (sugar-disease)

People with diabetes have a double flu risk:

- Due to their weakened immune system, they are more easily infected with flu viruses.[23]
- Complications can occur more frequently with them – for example:[24,25]

74%
increased risk of blood sugar imbalances[24,e]

30%
of adults hospitalized for influenza have diabetes[25]



Flu vaccination: when, where and why every year?

When *is the best time to get the flu vaccine?*

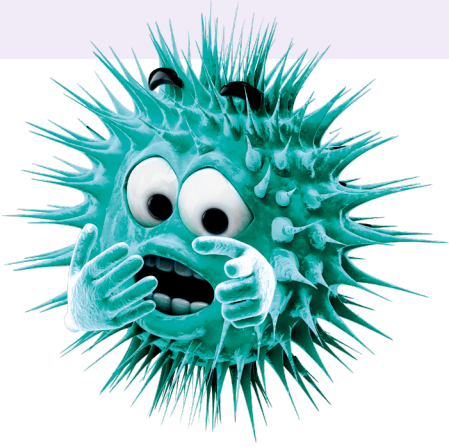
From October, but it can also be useful during the flu epidemic (January - March).[13]

Where *can I get vaccinated against the flu?*

In general practitioners' and medical specialists' offices, as well as in many pharmacies. The best thing to do is to ask.[26]

Why *do should we get vaccinated every year?*

The flu is caused by different virus variants. The composition of these variants is constantly changing. Flu vaccines are therefore adapted to the circulating flu viruses every year.[27]



Footnotes:

a In a self-controlled case-control study of adults aged 40 years and older, approx. 90% of whom were 50 years and older, and without a history of myocardial infarction or stroke.[7]

b In the three days after a laboratory-confirmed influenza infection compared to the period before an influenza infection.[7]

c In a protective cohort study of 925 patients aged 65 years and older who were hospitalized with laboratory-confirmed influenza and other acute respiratory diseases.[8]

d The comparison is based on a systematic review of studies on primary and secondary prevention of myocardial infarction.

e In a retrospective cohort analysis with 54,656 patients with type 2 diabetes mellitus and a control group of 113,016 people without diabetes mellitus; aged 18 and over. The data was collected during the 2016/17 influenza season.[24]

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Catching the flu is *easy*

Flu protection is too

Speak with your doctor now and get vaccinated.

Check your vaccination record and make an appointment to get vaccinated.

More info. at
impfen.sanofi.de/grippe

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MAT-DE-2401965-2.1-01/2025