



PLANNING A TRIP TO ASIA OR THE WESTERN PACIFIC?

**A simple mosquito bite could ruin
more than just your memories**

Consider vaccination against **Japanese Encephalitis (JE)**. Before you travel, talk to your healthcare professional.

IXIARO® is a vaccine to help prevent JE. IXIARO® is indicated for active immunization against Japanese Encephalitis virus (JEV) for persons 2 months of age and older.

IXIARO® should be considered for use in individuals at risk of exposure through travel or in the course of their occupation.

As with any other vaccine, vaccination with IXIARO® may not result in protection in all cases. IXIARO® will not protect against encephalitis caused by other micro-organisms.

Allergic reaction may occur. In adults, very common side effects include headache, muscle pain, injection-site reactions (pain, tenderness) and tiredness.

The most commonly reported side effects in children and adolescents include fever, diarrhea, influenza-like illness, irritability and injection-site reactions (pain, tenderness, redness).

Visit ixiaro.ca to learn
more about IXIARO®.

IXIARO®

Japanese encephalitis vaccine
(inactivated, adsorbed)

WHAT IS JAPANESE ENCEPHALITIS (JE)?

JE is an unpredictable and potentially devastating disease.

- JE is a serious disease found commonly throughout numerous countries across the **Asia-Pacific region**.
- It is caused by the "JE virus", and is transmitted by **infected mosquitoes**.
- Most individuals infected with JEV will show no signs of symptoms.
 - Less than 1% will develop neurological disease.
- When JE disease develops, the virus can cause inflammation of the brain (encephalitis), with symptoms including flu-like symptoms such as high fever, nausea and vomiting, which may progress to coma, seizures, spastic paralysis and ultimately death.
- The disease has no cure – treatment is focused on supportive care to relieve symptoms and stabilize the patient.

While some patients experience a full recovery, JE can be fatal



Over **70,000** clinical cases are reported worldwide each year.

Majority of infections show no symptoms; clinical disease develops in **1 in every 50–1,000 people** infected.



JE can be fatal in up to **3 in 10** patients.

While some patients experience a full recovery, **50%** of survivors are left with permanent, long-term disabilities (e.g., paralysis, inability to talk) that can be fatal.



Who is at risk?

- If you are travelling to Asia on vacation, visiting family and friends, or on business, you may be at risk.
- Risk of infection can be seasonal, or occur throughout most of the year.
- The risk to most short-term travellers to Asia is very low; however, incidence rates for JE disease in non-vaccinated Western troops have been observed to reach up to 2 per 10,000 individuals per week.

FACT OR MYTH?

You can only catch JE if you stay in a rural area for a long time.

IT'S A MYTH. Cases show that travellers visiting at-risk areas for a short time, even with little or no rural exposure and outside the transmission season, have gotten JE.

- While virus-carrying mosquitoes are usually found in more rural areas, the virus can also be contracted in or near cities.
- The majority of recent cases have occurred after shorter stays in and around urban areas.

Consider vaccination, as well as personal protective measures, to reduce your risk of JE on your next trip to Asia.



JE IS A POTENTIALLY DEVASTATING DISEASE FOUND IN 24 ASIA-PACIFIC COUNTRIES AND PARTS OF AUSTRALIA

FACT OR MYTH?

You are only at risk of JE if you are travelling to Asia.

IT'S A MYTH. Despite its name, there is also a risk of JE in Australia.

- While most travellers to Australia are at low risk of developing JE, cases have recently been reported in rural areas surrounding the Murray River, particularly near the border between New South Wales and Victoria.

JE risk areas



PREVENTION MAY HELP PROTECT YOU AND YOUR MEMORIES WHILE TRAVELLING

Given that JE is spread by the bite of infected mosquitoes, the first step is to take protective measures, before and during your trip:

Once someone develops JE, there is no treatment that can cure the disease. A proven method of protection is vaccination.

- Vaccination can help protect against JEV.

Personal protective measures are also recommended to avoid mosquito bites:

- Insect repellants
- Bed nets
- Clothing – light-coloured, loose clothes (long pants with long-sleeved shirts)

- **JEV is one of the most common causes of viral encephalitis in Asia** and may be underreported due to inadequate surveillance systems in many Asian countries where the virus is endemic.
- Current reports of the number of JE cases may not reflect your actual risk because of gaps in reporting of cases.



PROTECT YOURSELF WITH IXIARO®

IXIARO® is a vaccine to help prevent JE.

IXIARO® Dosage and Administration

STANDARD SCHEDULE* for adults, adolescents and children aged 2 months of age and older



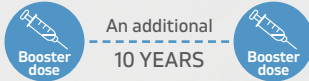
RAPID SCHEDULE† for adults aged 18–65 years



The second injection should be given at least 1 week before you and/or your child will be at risk of exposure to JEV. If not, you and/or your child may not be fully protected against the disease.

BOOSTER DOSE before potential re-exposure to JEV

12–24 months after the first dose of primary immunization



In adults, a second booster can be given 10 years after the first booster. Your travel health specialist will decide on the requirement and timing for booster doses.

Graphic not made to scale.

Please consult the Consumer Information leaflet for the recommended dose and dosage adjustments in children and adolescents 2 months to <18 years of age.

IXIARO® was shown to offer effective protection against JEV in clinical trials conducted in adult (18 years old and older) and paediatric populations (2 months to 18 years old).

IXIARO® is generally well tolerated; very common side effects are:

- In adults (18 to 86 years old):
 - Headache
 - Muscle pain
 - Injection-site pain/tenderness
 - Tiredness
- In children and adolescents (2 months to 18 years old):
 - Fever
 - Diarrhea
 - Influenza-like illness
 - Irritability
 - Injection-site reactions

Side effects are usually mild and disappear within a few days.

* The recommended dosage for adults, adolescents and children aged 3 years of age and older is a total of 2 injections of 0.5 mL each. The recommended dosage for babies and children aged 2 months to <3 years is a total of 2 injections of 0.25 mL each.

† In the event the primary series (Day 0 and Day 28) cannot be completed due to time constraints, a rapid immunization schedule (i.e., first dose at Day 0 and second dose at Day 7) in **persons aged 18–65 years** may be used.

RESOURCES WHEN CONSIDERING VACCINATION

When to use IXIARO®

The **Committee to Advise on Tropical Medicine and Travel (CATMAT)** suggests that JE vaccine not be routinely used for travel to endemic areas.



Factors to consider when deciding whether to get vaccinated include **destination, duration of travel, season, activities, and use of personal protective measures.**

For complete information, please refer to the **2023 CATMAT guidelines.**

Finding a travel clinic **411 vaccines**

Vaccines411® is an online vaccination clinic locator which also includes reliable immunization resources for Canadians to easily find the vaccination resources they need.



Tracking vaccinations **CANImmunize**



CANImmunize has a useful app to help Canadians keep track of their vaccinations. Scan below to download it today!

Are you at risk? Help reduce the risk of JE ruining your travel experience.

Learn more by speaking to your healthcare professional, such as a doctor, nurse or pharmacist, or visiting a travel clinic, before your next trip to see if IXIARO® is right for you.

Are you covered?

You may be covered for the IXIARO® vaccine with your private insurance.

Contact your insurance provider and give the DIN (drug identification number) below to find out.

IXIARO® DIN: 02333279

IXIARO® is not used to treat JE or its complications once they develop.

Individuals with the following conditions should discuss vaccination with their physician: pregnant or breastfeeding women; persons with a bleeding disorder, or abnormal bruising; persons with fever (temp. >37.8°C); immunosuppressed persons or individuals on cancer treatment.

As with all injectable vaccines, appropriate medical treatment and supervision should always be available to treat rare cases of anaphylactic reactions following the administration of the vaccine. IXIARO® must never be injected into a vein or any blood vessel. Like other intramuscular injections, this vaccine should not be administered intramuscularly to persons with thrombocytopenia, hemophilia or other bleeding disorders.

If your immune system does not work properly (immunodeficiency) or you are taking medicines affecting your immune system (such as a medicine called cortisone or cancer medicine), protection may not be as expected.

Uncommon side effects include vomiting, skin rash, changes in lymph nodes, migraine and dizziness.

Visit Valneva.ca to view the Consumer Information leaflet for IXIARO®.



For more
information,
visit Ixiaro.ca

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