Department of Health

Residential Care Home Vaccination Programme

_____ (Name of the Resident, to be filled by the RCH)

_____ (Date of issue of the Notice, to be filled by the RCH)

Notice of Objection to the Administration of Seasonal Influenza Vaccine or Pneumococcal Vaccine to a Resident of a Residential Care Home (RCH) (Only applicable to residents who are unable to give consent)

The above-named resident, currently living in _____ (name of the RCH, to be filled by the RCH), If he/she is assessed by a doctor as suitable for receiving the 2024/2025 Seasonal Influenza Vaccine and Pneumococcal Vaccine , he/she will be administered the vaccine. As the resident is unable to give consent for vaccination, your view (parent/guardian/relative) is consulted.

The information on Seasonal Influenza Vaccine and Pneumococcal Vaccine is attached for your reference (Annex 1). If you have considered and understood that not receiving vaccination will increase the risk of serious illness or even death should the resident get influenza or pneumococcal infection, but object to the administration of vaccine to the resident nonetheless, please return the completed "Reply Slip – Objection to the Administration of Seasonal Influenza Vaccine or Pneumococcal Vaccine to a Resident of a Residential Care Homes" (Annex 2) to the RCH concerned[1] before _____ (two weeks from the date of issue of this Notice, to be filled by the RCH) to indicate that you clearly object to the administration of influenza vaccine or pneumococcal vaccine to the above-named resident. Otherwise, the visiting medical officers will administer the vaccines to the above-named resident as necessary and appropriate based on the resident's best interest.

For enquiries, please contact the RCH staff concerned.

Department of Health (DH)
2024
(Letter to be issued by RCHs on behalf of DH)

[1] The parent/guardian/relative may return the Reply Slip to the RCH concerned by their normal means of communication (e.g. in person, SMS, mail, fax or e-mail etc.).

Residential Care Home Vaccination Programme 2024/25
Information about Seasonal Influenza Vaccination and Pneumococcal Vaccination

Benefits of Getting Seasonal Influenza Vaccination and Pneumococcal Vaccination

Seasonal influenza vaccination is one of the effective means in preventing influenza and its complications together with reduction in influenza-associated hospitalisation and death. Given that the SIV offers protection against influenza and its complications, all members of the public, except those with known contraindications, should receive SIV annually for personal protection.

Influenza predisposes individuals to community-acquired bacterial pneumonia. Secondary bacterial pneumonia has been an important cause of morbidity and mortality for those infected with influenza. Data from a local study shows that dual vaccination with influenza vaccine and pneumococcal vaccines can lower the risk of hospitalisation and mortality among elderly people.

Seasonal Influenza and Vaccination

Influenza is an acute illness of the respiratory tract caused by influenza viruses. It can be caused by various types of influenza viruses. In Hong Kong, influenza A virus (H1), influenza A (H3) and influenza B virus are most commonly seen. Influenza occurs in Hong Kong throughout the year, but is usually more common in periods from January to March/April and from July to August. The virus mainly spreads by respiratory droplets. The disease is characterised by fever, sore throat, cough, runny nose, headache, muscle aches and general tiredness. It is usually self-limiting with recovery in two to seven days. However, if persons with weakened immunity and elderly persons get infected, it can be a serious illness and may be complicated by bronchitis, pneumonia, encephalopathy, or even death in the most serious cases. Serious infection or complications can also occur in healthy individuals.

■ Seasonal Influenza Vaccine Composition

The egg-based quadrivalent influenza vaccine provided under Residential Care Home Vaccination Programme (RVP) 2024/25 contains the following:

- an A/Victoria/4897/2022 (H1N1)pdm09-like virus
- an A/Thailand/8/2022 (H3N2)-like virus
- a B/Austria/1359417/2021 (B/Victoria lineage) -like virus
- a B/Phuket/3073/2013 (B/Yamagata lineage) -like virus

Inactivated seasonal influenza vaccine is used under RVP 2024/25.

■ Recommended Dose

For persons aged 9 years or above, only one dose of seasonal influenza vaccine is required in each influenza season.
To ensure adequate immunity against seasonal influenza, children aged 6 months to under 9 years who have never received any seasonal influenza vaccination before are recommended to receive 2 doses of seasonal influenza vaccine with a minimum interval of 28 days in the current season. Children below 9 years of age, who have received at least one dose of seasonal influenza vaccine before are recommended to receive one dose of seasonal influenza vaccine in the 2024/2025 season.

■ Who should not receive inactivated influenza vaccination

People who have a history of severe allergic reaction to any vaccine component or a previous dose of any influenza vaccine are not suitable to have inactivated seasonal influenza vaccination. Individuals with mild egg allergy who are considering an influenza vaccination can be given inactivated influenza vaccination in primary care setting. Individuals with a history of anaphylaxis to egg should have seasonal influenza vaccine administered by healthcare professionals in appropriate medical facilities with capacity to recognise and manage severe allergic reactions. Influenza vaccine contains ovalbumin (an egg protein), but the vaccine manufacturing process involves repeated purification and the ovalbumin content is very low. Even people who are allergic to eggs are generally safe to receive vaccination. Those with bleeding disorders or on anticoagulants should consult their doctors for advice. If an individual suffers from fever on the day of vaccination, vaccination should be deferred till recovery.

■ **Why should pregnant women receive seasonal influenza vaccination**

Seasonal influenza vaccination is recommended for all pregnant women for benefits in terms of reduced acute respiratory infection for both mothers and infants, and reduction of cardiopulmonary complications and the associated hospitalisations in pregnant women. The World Health Organization considers inactivated influenza vaccine (IIV) to be safe for use at any gestational age of pregnancy and there is no evidence showing that IIV is teratogenic even when given during the first trimester. Recombinant influenza vaccine is not contraindicated in pregnancy. However, live attenuated influenza vaccine should not be used in pregnant women. Pregnant women should consult a doctor for any queries.

■ **What are the possible side effects following inactivated influenza vaccine administration**

The most common side effects following inactivated influenza vaccine administration include pain, redness or swelling at the injection site. Some recipients may experience fever, chills, muscle pain and tiredness. Side effects are generally mild and temporary. If you experience persistent fever, severe allergic reactions (e.g. difficulty in breathing, swelling of the lip or tongue, hives, etc.) or other adverse events after receiving vaccination, please consult a doctor immediately.

■ **Can COVID-19 vaccine be given together with seasonal influenza vaccine?**

COVID-19 vaccines can be co-administered with seasonal influenza vaccine on the same visit under informed consent for administrative convenience and achieving better coverage.

■ **What to do if I feel discomfort after the co-administration of COVID-19 vaccine and seasonal influenza vaccine?**

In general, common side effects of both vaccines are usually mild and temporary which include soreness, redness and swelling at the injection site. Some people may experience fever, muscle pain, and fatigue a few hours after vaccination. In most cases, these symptoms would subside within a few days. If symptoms persist, or if allergic reactions (such as hives or facial swelling) or serious side effects occur, you should seek medical advice promptly.

■ **Can pneumococcal vaccine be given together with seasonal influenza vaccine?**

Yes. Pneumococcal vaccine can be given with seasonal influenza vaccine at the same clinic visit, but should be administered with a different syringe and at a different injection site if inactivated influenza vaccine is used.

<u>Pneumococcal Infection and Vaccination</u>

Pneumococcal infection represents a wide range of diseases caused by the bacterium Streptococcus pneumoniae (or more commonly referred as pneumococcus). While pneumococcus is a common cause of mild illnesses such as sinus or middle ear infections, it may also cause severe or even life-threatening invasive pneumococcal diseases (IPD) such as bacteremic pneumonia, sepsis, and meningitis. The outcomes for IPD are usually more severe among young children and elderly persons. The treatment of pneumococcal infections usually involves the use of antibiotic(s). But there is a problem of increasing resistance of the bacterium to antibiotics, which makes prevention of pneumococcal infections important. Pneumococcal vaccination is one of the most effective means of preventing pneumococcal diseases. The public should also maintain good personal and environmental hygiene practices, balanced diet, regular exercise, adequate rest, and no smoking.

Under 2024/25 RVP, the Government provides one dose of 15-valent Pneumococcal Conjugate Vaccine (PCV15) and one dose of 23-valent Pneumococcal Polysaccharide Vaccine (23vPPV) vaccination to eligible residents. Residents of Residential Care Homes for the Elderly and residents aged 65 years or above of Residential Care Homes for Persons with Disabilities:

(1) Residents who have never received PCV13 or PCV15 or 23vPPV before are eligible for one dose of free PCV15, and followed by one dose of free 23vPPV <u>1 year (365 days) later</u>.

(2) Residents who have already received 23vPPV are eligible for one dose of free PCV15 <u>1 year (365 days) after</u> previous 23vPPV vaccination.

(3) Residents who have already received PCV13 or PCV15 are eligible for one dose of free 23vPPV <u>1 year (365 days) after</u> previous PCV13 or PCV15 vaccination.

(4) Residents who have already received PCV13 or PCV15 and 23vPPV **do not need to receive pneumococcal vaccination**.

(5) Residents who have already received PCV13, under RVP, **do not need to receive PCV15**.

■ **Who are not suitable to receive pneumococcal vaccines**

Severe allergic reaction following a prior dose of pneumococcal vaccine or to the vaccine component or any diphtheria toxoid-containing vaccine is a contraindication to further doses of vaccine.

■ **Can pneumococcal vaccines be given prior to / after certain medical procedures**

For individuals who will undergo elective splenectomy, pneumococcal vaccines should be given at least 2 weeks before the procedures if possible. Pneumococcal vaccines should ideally be given before or after completion of chemotherapy/radiotherapy but they may still be given as clinically indicated during long term use of chemotherapeutic agents. Please consult doctors for details.

■ **What are the possible adverse reactions following PCV15 administration**

The most common adverse reactions after PCV15 administration observed in children less than 2 years old are fever, irritability, somnolence and injection-site pain, while injection-site pain, fatigue, myalgia and headache are the most common in adults.

Receiving vaccination is safe. If you experience persistent fever, severe allergic reactions (e.g. difficulty in breathing, swelling of the lips or tongue, or hives, etc.) or other adverse events after vaccination, please consult a doctor immediately.

■ **What are the possible adverse events associated with 23vPPV**

Common adverse reactions include slight swelling and tenderness at the injection site shortly following injection but most resolve within two days. Fever, muscle aches or more severe local reactions are uncommon.

Receiving vaccination is safe. If you experience persistent fever, severe allergic reactions (e.g. difficulty in breathing, swelling of the lips or tongue, or hives, etc.) or other adverse events after vaccination, please consult a doctor immediately.

Updated in Sep 2024