

Seasonal Influenza Vaccination & Pneumococcal Vaccination Arrangement for 2024/25





50th anniversary of WHO's the Expanded Programme on Immunization (EPI)





Since 1974, the **WHO** initiative has used vaccines to do "everything humanly possible to safeguard the health and well-being of all children everywhere"

EPI has evolved to include 13 universally recommended vaccines

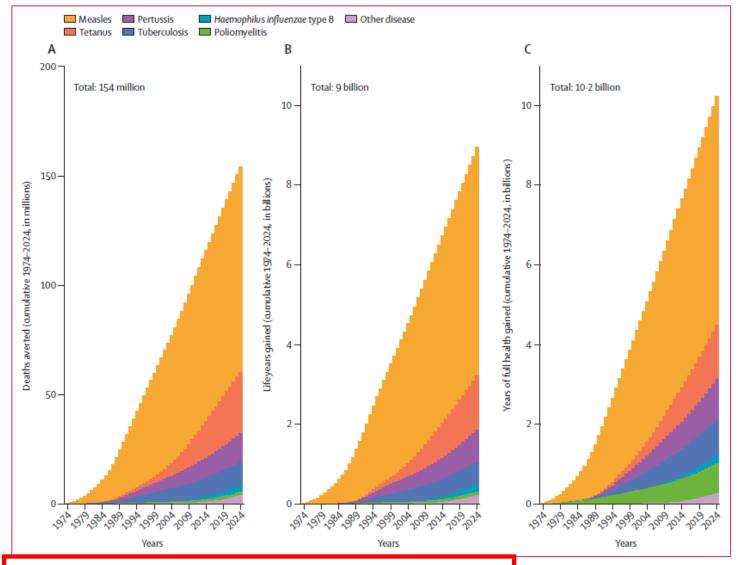
"Humanly possible"

Milestones include **smallpox eradication** in 1980 and a 99% reduction in **polio** cases

Gavi, the Vaccine Alliance, supports the introduction of new vaccines, targeting various diseases

The program collaborates with other public health initiatives to enhance disease control and health outcomes.





 $\textit{Figure 1:} \ Deaths \ averted, years \ of \ life \ saved, \ and \ years \ of \ full \ health \ gained \ due \ to \ vaccination$







13 vaccines recommended by WHO for the EPI

Bacillus Calmette-Guérin (BCG) Diphtheria, Pertussis, Tetanus, Polio Haemophilus influenzae type B (Hib)

Hepatitis B (HepB)

Measles, rubella Pneumococcal disease (PNC)

Rotavirus (Rota)

Human papillomavirus (HPV)

COVID-19 (for adults)







Immunization across the Life Course



Healthcare workers - at higher risk of influenza infection than the general population



The WHO considers healthcare workers to be a priority target group for SIV



SIV vaccination of healthcare workers contributes to influenza pandemic preparedness



History of flu vaccine and its impact on frontline clinical care and public health

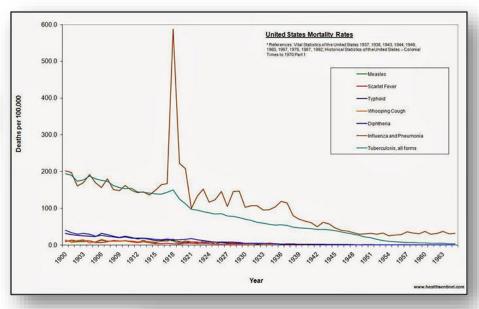






"The mother of all pandemics"





Progress toward a vaccine





Frontline and public health perspective

- Influenza pandemics throughout history:
 - at least 3 pandemics before the 1918–19
 - another 3 pandemics in 1957–58, 1968–69 and 2009–10
- Development of new vaccine technologies
- Monitoring the virus by the World Health Organization (WHO) Global Influenza Surveillance and Response System (GISRS) and make recommendation to strains for development of vaccine
- Despite these efforts, seasonal influenza still kills up to 650,000 people a year globally



Review of Statistics of SIV 2023/24





Total 1 872 800 doses of SIV were given in 2023/24 under the Government vaccination programmes (record high)

(Total doses increased by 20.0% as compared with 2022/23)

•	Government	Vaccination	Programme	(GVP)	653 700
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Vaccination Subsidy Schemes (VSS)
 873 800

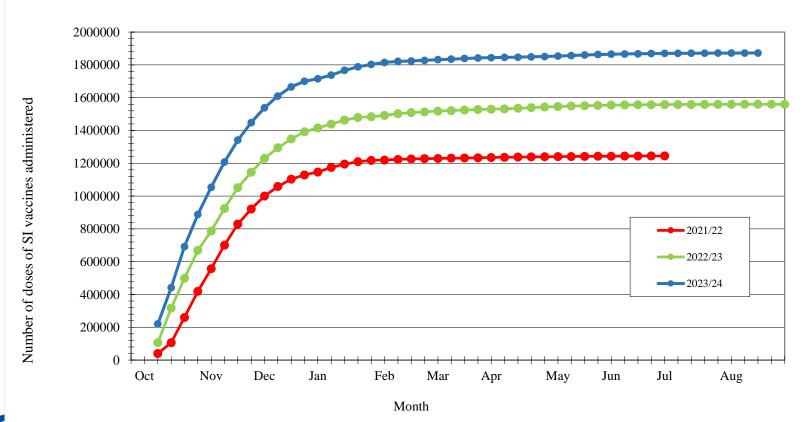
• School Outreach (Free of Charge) 345 300





Statistics of SIV all programmes – 3 years comparison

Cumulative Weekly Statistics on Seasonal Influenza Vaccine administered under the GVP, VSS and School Programme for 2021/22, 2022/23 and 2023/24 (as at 18 Aug 2024 day end)





SIV Coverage of Major Target Groups (2023/24 season)



Total no. of doses administered

842,763 (2023/24)



+108,643 (+15%)

(compared with same period in 2022/23)

Coverage in 2023/24

51.5%

(48.3% in 2022/23)



49,035 (2023/24)



+2,699 **(+6%)**

(compared with same period in 2022/23)

81.9%

(78.4% in 2022/23)



540,430 (2023/24)



+146,780 (+37%)

(compared with same period in 2022/23)

53.0%

(39.8% in 2022/23)



Coverage of HCWs in Government settings and Residential Care Homes in past 3 years

Eligible Group	Coverage in 2021/22	Coverage in 2022/23	Coverage in 2023/24
Healthcare workers (DH/HA/RCH /DI)	34.6%	37.6%	49.7%



Appeal to Healthcare workers and Clients





Scientific Committee of Vaccine Preventable Diseases (SCVPD)

Summary Statement on Vaccination Practice for Health Care Workers in Hong Kong (Sep 2017)

 All HCW should receive seasonal influenza vaccination annually once the vaccine is available



Why is it importance for Healthcare Workers to get SIV?

- WHO stated there is scientific evidence showed a protective effect of vaccinating HCWs against influenza infection and they are one of the priority groups to receive SIV
- Reduce the overall burden of respiratory illnesses in the upcoming season

Maximizing HCWs influenza vaccination uptake:

- Occupational health: Protect HCWs who are exposing to sick patients
- Safeguarding vulnerable populations by reduce spread of influenza to vulnerable patient groups
- Maintain healthcare services during influenza epidemics



SIV of HCWs: systematic review of qualitative evidence (BMC Health Services Research Nov 2017)

Low uptake rate among HCWs on SIV despite a range of promotion on SIV due to a range of beliefs

- Concerns about side-effects
- Skepticism about vaccine effectiveness
- The belief that influenza is not a serious illness





- Side effects are generally mild and temporary
- Most common side effects following inactivated influenza vaccine (IIV) administration include pain, redness or swelling at the injection site. Some recipients may experience fever, chills, muscle pain and tiredness.
- The WHO considers IIV to be safe for use at any gestational age of pregnancy
- SIV is safe for breastfeeding mothers and their infants. Women who receive the influenza vaccination while pregnant or breastfeeding can develop antibodies against influenza that can be passed to their infants through their breast milk and provide some protection against influenza for infants.

Scientific evidence of flu vaccine efficacy

- In US, Sept 2022 Jan 2023, children who were vaccinated against flu were **68% less likely to be hospitalized** because of flu illness or related complications (i.e. VE=68%), and **42% less likely to visit an emergency department** because of flu-related illness. Benefit from vaccination was observed across all age groups. [US CDC 2023]
- VE decrease over time: Reductions in VE during the 9 months after vaccination in children, declined by 2-5 percentage points per month. Receive vaccination through vaccination programmes <u>every year</u>. [HKU 2018]
- Vaccine efficacy varies each year



Awareness on the seriousness of influenza

Hong Kong / Health & Environment

Hong Kong records 21 deaths among 37 serious flu cases in single week, with more than half of group unvaccinated

- Respiratory expert David Hui from CUHK warns influenza season to peak between January and March, potentially overlapping with Covid outbreak
- He says flu shots at this point are more important than Covid boosters as most of the population has been infected or inoculated against coronavirus

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Published: 11:47am, Hong Kong / Health & Environment

Child deaths spark urgent push for flu jabs by experts

Local | Wallis Wang 6 May 2024





The medical sector is urging children, the elderly, the pregnant and chronically ill patients to get vaccinated against seasonal flu as soon as possible to prevent serious complications such as brain inflammation

Death of third Hong Kong child from flu sparks urgent appeal for public to receive influenza shots

- Unvaccinated four-year-old girl infected with influenza A died at Pamela Youde Nethersole Eastern Hospital in Chai Wan on Monday
- Centre for Health Protection warns that dominating flu virus strain might change for second time, possibly extending flu season already longer than usual

☐ Listen to this article ▶





Edith Lin and Elizabeth Cheung
Published: 4:11pm, 30 Apr 2024

(References: https://www.scmp.com/news/hong-kong/health-environment/article/3237942/hong-kong-records-21-deaths-among-37-serious-flu-cases-past-week-more-half-group-unvaccinated

https://www.scmp.com/news/hong-kong/health-environment/article/3260913/death-third-hong-kong-child-flu-sparks-urgent-appeal-public-receive-influenza-shots

https://www.thestandard.com.hk/section-news/section/4/262511/Child-deaths-spark-urgent-push-for-flu-jabs-by-experts)

Countering Vaccine Hesitancy

Expert promulgation





Scientific Committee on Vaccine Preventable Diseases

Recommendations on Seasonal Influenza Vaccination For the 2024-25 Season in Hong Kong (As of 21 March 2024)

Infographics







Leadership Engagement









Significant others influence





Seasonal influenza vaccination coverage survey for the 2015/16 season (general public)

Reported on Communicable Disease Watch Dec 18 - Dec 31, 2016

Reasons for receiving

- 32.8% believed that vaccination is effective in reducing the risk of flu/ease flu-like symptoms
- 21.3% worry of getting flu/peak flu season
- 17.5% recommended by health care workers
- 16.6% have a habit to receive the vaccination every year
- 13.5% know there is free / subsidised vaccination

Reasons for not receiving

- 45.9% perceive themselves as being healthy and will not easily get the flu
- 14.1% are concerned about effectiveness of SIV
- 10.4% are concerned about the safety of SIV
- 9.7% consider vaccine is expensive
- 8.5% have no time



Role of Health Care Workers in promoting SIV

(1) Get your flu jab timely

- Reduce morbidity related to respiratory infections
- Reduce risk of transmitting influenza to patients who are at high-risk of complications and mortality
- Strengthen workforce capacity during peak season

(2) Promote SIV to patients and coworkers

- Be proactive in promoting, especially to persons in the priority groups
- Clarify main concerns about effectiveness and safety of the vaccination





Strategies examples of SIV promotion to HCW from HA

(1) Corporate level

- Souvenir pin after vaccination
- poster, Powerpoint slideshow, informational kit
- promotion in HA internal newsletter

(2) Local level

- a great diversity of local initiatives
- Service heads/Seniors roadshow
- mobile vaccine stations in clinical setting (vaccination at workplace)



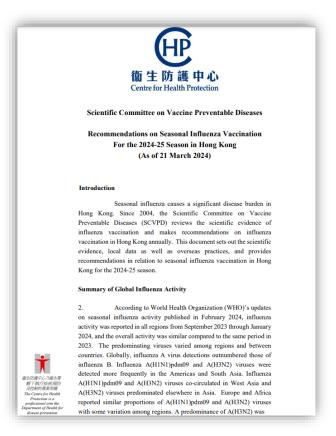


Arrangement of SIV 2024/25



Scientific Committee on Vaccine Preventable Diseases (SCVPD) -

Recommendations on Seasonal Influenza Vaccination for the 2024-25 Season (As of 21 March 2024)



https://www.chp.gov.hk/en/static/24008.html



Vaccine types

Inactivated influenza vaccine (IIV), live attenuated influenza vaccine (LAIV) and recombinant influenza vaccine (RIV) are recommended for use in Hong Kong

Both trivalent and quadrivalent vaccines could be used in the 2024-25 season.



Vaccine composition

Follows the recommendations by the WHO for the 2024-25 Northern Hemisphere influenza season

	Quadrivalent vaccine	Trivalent vaccine	
Egg-based	 A/Victoria/4897/2022 	A/Victoria/4897/2022	
vaccines	(H1N1)pdm09-like virus	(H1N1)pdm09-like virus	
	• A/Thailand/8/2022 (H3N2)-	• A/Thailand/8/2022 (H3N2)-	
	like virus	like virus	
	• B/Austria/1359417/2021	• B/Austria/1359417/2021	
	(B/Victoria lineage)-like	(B/Victoria lineage)-like	
	virus	virus	
	• B/Phuket/3073/2013		
	(B/Yamagata lineage)-like		
	virus		
Cell culture	A/Wisconsin/67/2022	• A/Wisconsin/67/2022	
or	(H1N1)pdm09-like virus	(H1N1)pdm09-like virus	
Recombinant	• A/Massachusetts/18/2022	A/Massachusetts/18/2022	
based	(H3N2)-like virus	(H3N2)-like virus	
vaccines	• B/Austria/1359417/2021	• B/Austria/1359417/2021	
	(B/Victoria lineage)-like	(B/Victoria lineage)-like	
	virus	virus	
	• B/Phuket/3073/2013		
	(B/Yamagata lineage)-like		
	virus		
		1	

Given B/Yamagata lineage viruses are no longer circulating in the population, both **trivalent** and **quadrivalent** vaccines could be used in 2024-25 season





Other recommendations

Priority groups - same as 2023-24 season

- Health care workers
- Persons aged 50 years or above
- Pregnant women
- Residents of Residential Care Homes
- Persons with chronic medical problems
- Children and adolescents aged six months to under 18 years (or aged 18 years or above studying in secondary schools in Hong Kong)
- Poultry workers
- Pig farmers and pig-slaughtering industry personnel

Co-administration of SIV and COVID-19 vaccines under informed consent

More information: https://www.chp.gov.hk/en/static/24008.html



Pneumococcal Vaccination (PV)



Government vaccination programmes replace PCV 13 with PCV15 (from 5 Aug 2024)

- The SCVPD has earlier published an updated recommendation on the use of pneumococcal vaccines
- Recommended to replace PCV13 with PCV15 under both the Hong Kong Childhood Immunisation Programme (HKCIP) and the Government Pneumococcal Vaccination Programme (GVP)
- Relevant immunisation schedules for children and high-risk individuals will remain unchanged
- with the aim of strengthening the immunity of children and the elderly against invasive pneumococcal disease (IPD)





PV arrangement for the elderly (all year round)

Elderly aged 65 years or above	Have not received any pneumococcal vaccination	Have received 23vPPV	Have received PCV13/15
With high-risk conditions	One dose of subsidized or free PCV 15 followed by one dose of 23vPPV one year after	One dose of subsidized or free PCV 15 one year after the previous dose of 23vPPV	One dose of free or subsidised 23vPPV one year after the previous dose of PCV13/15
Without high-risk conditions	one dose of free or subsidized 23vPPV	No need to re-vaccinate	No need to re-vaccinate



Take Actions

(1) Get your flu jab timely

- Reduce morbidity related to respiratory infections
- Reduce risk of transmitting influenza to patients who are at high-risk of complications and mortality
- Strengthen workforce capacity during peak season

(2) Promote SIV to colleagues and clients

- Be proactive in promoting, especially to persons in the priority groups
- Clarify main concerns about effectiveness and safety of the vaccination





Thank You

Please visit CHP website for more details: https://www.chp.gov.hk/en/features/17980.html

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