## <u>2021/22 seasonal influenza vaccination</u> programmes to launch in October

The Centre for Health Protection (CHP) of the Department of Health (DH) today (September 6) announced that the Vaccination Subsidy Scheme (VSS) and the Government Vaccination Programme (GVP) 2021/22 will be launched on October 6, providing subsidised or free seasonal influenza vaccination (SIV) and pneumococcal vaccination (PV) to eligible persons. As vaccination is one of the most effective ways to prevent seasonal influenza and its complications, members of the public are encouraged to receive vaccination.

Under the Seasonal Influenza Vaccination School Outreach (Free of Charge), a Public-Private-Partnership Team or a Government Outreach Team will provide free vaccination for schoolchildren in participating schools. The service for kindergartens, kindergarten-cum-child care centres and child care centres will begin on October 6, while the outreach service for primary schools will start on October 13. So far, around 760 kindergartens, kindergarten-cum-child care centres and child care centres as well as 480 primary schools have signed up for the programme. At present, around 180 doctors will participate to provide outreach vaccination services to kindergartens, kindergarten-cum-child care centres and child care centres in the new season. The vaccines will be provided by the DH and a subsidy will be provided to the doctors at \$100 per dose.

For those primary schools, kindergartens, kindergarten-cum-child care centres and child care centres not participating in the programme above, they can invite doctors providing outreach vaccination under the VSS from the list published on the CHP's website to arrange outreach SIV service at their campus under the Vaccination Subsidy Scheme School Outreach (Extra Charge Allowed). The subsidy for the Vaccination Subsidy Scheme School Outreach (Extra Charge Allowed) will remain at \$240 per dose in the new season.

For eligible children who will not receive SIV in school outreach vaccination, parents can still arrange subsidised vaccination for their children in clinics of private doctors enrolled in the VSS.

Under the GVP (free vaccination) and the VSS (subsidised vaccination) in the new season, eligible groups for SIV will remain the same as those in the last season (see Annexes I and II).

The DH has already informed participating doctors about the arrangements for the VSS in the new season and also reminded them to make early preparations and place vaccine orders in a timely manner.

Regarding the VSS, the Government's subsidy for participating doctors will be \$240 per dose. In addition, under the Residential Care Home Vaccination Programme, the subsidy for visiting medical officers will be \$100 per dose. The DH is now procuring a total of 636 000 doses of inactivated influenza vaccines (IIV) for the GVP, and 309 000 doses of IIV and 31 000 doses of live attenuated influenza vaccine (LAIV) for school outreach programmes (free of charge) in the new season. Meanwhile, as of July 31, in the previous season (the 2020/21 season), about 547 000 doses, 527 000 doses and 251 000 doses of seasonal influenza vaccines had been administered via the GVP, the VSS and school outreach programmes (free of charge) respectively. The total number of doses administered by the above programmes in 2020/21 was about 1 325 000 doses, representing a decrease of about 5.3 per cent from the figures for the same period in the 2019/20 season. According to the figures, the main decrease was noted in the student groups, which showed a 24.9 per cent decrease in doses as compared with the amount in the 2019/20 season. The drop is believed to be caused by social distancing measures and school suspensions during the COVID-19 pandemic. On the contrary, health care workers marked an increase of 20.1 per cent.

Separately, the Scientific Committee on Vaccine Preventable Diseases (SCVPD) under the CHP has advised that the composition of the recommended vaccines for the 2021/22 influenza season should be in line with the World Health Organization's latest recommendations. The egg-based quadrivalent influenza vaccines to be used in the 2021-22 northern hemisphere influenza season contain:

- \* an A/Victoria/2570/2019 (H1N1)pdm09-like virus
- \* an A/Cambodia/e0826360/2020 (H3N2)-like virus
- \* a B/Washington/02/2019-like virus
- \* a B/Phuket/3073/2013-like virus

The recombinant-based quadrivalent influenza vaccines to be used in the 2021-22 northern hemisphere influenza season contain:

- \* an A/Wisconsin/588/2019 (H1N1)pdm09-like virus,
- \* an A/Cambodia/e0826360/2020 (H3N2)-like virus,
- \* a B/Washington/02/2019-like virus
- \* a B/Phuket/3073/2013-like virus

IIV, LAIV (i.e. nasal vaccine) and recombinant influenza vaccine (RIV) are recommended for use in Hong Kong by the SCVPD. Depending on individual brands, most IIVs are recommended for use among people aged 6 months or older, including those who are healthy, pregnant women and those with chronic medical problems. LAIV can be used for people aged 2 to 49 except those who are pregnant, are immunocompromised or have other contraindications. RIV can be used in individuals aged 18 years or above. Details can be found in the <u>SCVPD recommendations</u>.

"Seasonal influenza vaccination is one of the effective means to prevent seasonal influenza and its complications, as well as reduce influenza-related hospitalisation and death. Persons getting influenza and COVID-19 at the same time may be more seriously ill and have a higher death rate. Influenza vaccination may reduce hospitalisation and the length of stay. It is important to receive both SIV and COVID-19 vaccination. Given that influenza vaccines are safe and effective, all persons aged 6 months or above, except those with known contraindications, are recommended to receive SIV for personal protection. Based on past epidemiological patterns, the winter influenza season usually starts in early January. However, the exact time of arrival cannot be predicted. As it takes about two weeks to develop antibodies, members of the public are advised to receive SIV early for protection against seasonal influenza. It is recommended to have an interval of at least 14 days between administration of SIV and COVID-19 vaccines (Comirnaty or CoronaVac)," a CHP spokesman stressed.

Meanwhile, free/subsidised PV for eligible persons will continue to be provided under the GVP and the VSS to prevent pneumococcal infections (see Annex III). Those aged 65 or above who do not have high-risk conditions will be eligible for one dose of 23-valent polysaccharide pneumococcal vaccination (23vPPV). Elderly persons with high-risk conditions who have not received PV before will be eligible for one dose of 13-valent pneumococcal conjugate vaccine (PCV13) and one dose of 23vPPV one year later. Under the VSS, the subsidy will be \$300 per dose for 23vPPV and \$760 per dose for PCV13. It is recommended to have an interval of at least 14 days between administration of PV and COVID-19 vaccines (Comirnaty or CoronaVac).

The CHP has been organising meetings and briefings with relevant stakeholders including health care providers, community partners and the education sector to inform them of the vaccination arrangements for the new season and encourage their active participation in the vaccination programmes.

The public may call the CHP's telephone number (2125 2125) or visit the CHP's <u>Vaccination Schemes page</u> for more details of the vaccination programmes.