*Draft Thought Leadership Article, Immunisation for All Ages (IFAA)*

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**Greater focus on uptake of existing adult vaccines to help support health systems under pressure from Covid-19.**

In just a few months, COVID-19 has spread far and wide across the world. As borders close, and countries deploy containment strategies to help slow the spread of the disease, the world unites in the fight against the virus.

Since the World Health Organisation (WHO) declared it a pandemic in early March, COVID-19 has affected all of us, in ways never seen in our lifetimes. Significantly, it has drawn attention to the most vulnerable in our society. Older people and those with underlying medical conditions, such as diabetes, heart and respiratory diseases, and those that are immunocompromised, are at much greater risk than most and are paying the highest price, as are their families.

The immediate focus for the world must be on controlling the disease and creating a vaccine to help provide protection and prevent future outbreaks. The Immunisation for All Ages (IFAA) initiative is acutely aware of the value of immunisation as a frontline public health action. Immunisation has been one of the most successful public health measures of modern times, preventing up to six million deaths worldwide every year[[1]](#endnote-2); the WHO has rated it second only to clean water[[2]](#endnote-3).

Protection of vulnerable groups is critical and has been highlighted by the impact of COVID-19. Equally important is the urgent call for maximising vaccination uptake rates for vaccine-preventable respiratory diseases such as flu and pneumococcal pneumonia, which will help mitigate the annual burden of disease, particularly in populations at highest risk of infection. This is also highlighted by the WHO, which states that although these vaccines are not specifically effective against COVID-19, vaccination against respiratory illnesses is highly recommended to help protect health. Whilst recognising that the provision of immunisation services are aligned with national guidelines on infection prevention and control, as governments exit the current crisis and prepare their health system for the next winter season, we support efforts to increase national flu and pneumococcal vaccination uptake rates.  Increasing adult immunisation rates for vaccine preventable respiratory diseases can also help healthcare systems to maximise the availability of healthcare resources to address the impact of a potential next wave of COVID-19 on local populations, families and individuals.

With a possible reduction in hospitalisations from these seasonal infections, precious healthcare resources can be directed to the continued management of individuals and communities most affected by COVID-19. Ensuring adequate uptake of existing vaccines for respiratory diseases will help enable appropriate implementation of a future COVID-19 vaccine.[[3]](#endnote-4)

Still, significant challenges remain in improving uptake rates of adult immunisation. Uptake rates in Europe, for example, do not reach the WHO and the European Union’s target of 75% influenza vaccination coverage for vulnerable groups[[4]](#endnote-5). Influenza vaccination coverage remains significantly low in many countries, which leads to severe disease, significant burden on healthcare systems and premature deaths. We also must question the disparity in vaccination coverage targets – 75% for older people and 95% for infants.

Healthcare systems, even in the wealthiest nations, are being tested well beyond their capacity, with many healthcare professionals being forced to make decisions about the allocation of finite resources. For example, clinicians worldwide may be pressed to use ‘age’ as the decider between providing treatment to a 50-year-old with underlying conditions ahead of a healthy 80-year-old. What other criteria are clinicians using to make difficult decisions at this very moment?

In a recent media briefing on COVID-19, World Health Organization Director General, Dr Tedros Adhanom Ghebreyesus, said: “Older people carry the collective wisdom of our societies. They are valued and valuable members of our families and communities. But they are at higher risk of the more serious complications of COVID-19.”[[5]](#endnote-6)

While public health has the world’s attention, members of the IFAA believe, now more than ever, that it is vital to value immunisation throughout the lifespan and that no-one is left behind.

This will mean a reorientation of health systems toward prevention, protection and health promotion[[6]](#endnote-7). This is particularly important as an analysis by OECD outlined that only 2.8% of total health expenditure is on prevention with only 9% of the prevention budget allocated to immunisation[[7]](#endnote-8). Priority should be given to providing healthcare professionals with the support and training they need. Parity in vaccination targets throughout life could be viewed as a key pillar and central component of universal health coverage. This is likely to reduce health inequalities, relieve pressure on secondary health services and leave them more able to respond to crises.

The annual return on investment for immunisation is reported to reach up to 18% globally, which not only contributes to economic growth but is also essential for helping to save lives[[8]](#endnote-9). As this trying time has shown us, outbreaks and pandemics are unpredictable but investing in prevention, protection and health promotion, particularly for our vulnerable populations with underlying medical conditions, could mean that our healthcare systems and the most vulnerable in our society are protected in the most effective and prudent way.

Barriers to effective adult vaccination uptake are numerous and include inadequate infrastructure, lack of personal and professional education and complicated pathways to receiving vaccinations. In a post COVID-19 time, governments as well as civil society must be proactive in addressing these barriers in the most positive ways, such as demanding online professional education for healthcare professionals and expanding the role of pharmacists as vaccinators.

During World Immunisation Week, we are urging governments around the world to invest in the lives of all of its citizens by helping to protect them and advancing a comprehensive public health prevention policy that prioritises immunisation at all stages of life with a particular focus on adults and at-risk populations. Now is the time to act to help ensure health systems around the world invest further in prevention, increase all immunisation rates, and invest in infrastructure to help ensure appropriate capacity in order to be ready for immunisation, especially those for adults, and specifically against COVID-19.

***Immunisation for All Ages (IFAA) is funded by Pfizer.***

1. WHO (2008) Vaccination greatly reduces disease, disability, death and inequity worldwide. Available at: <https://www.who.int/bulletin/volumes/86/2/07-040089/en/>. Last accessed: April 2020. [↑](#endnote-ref-2)
2. WHO (2008) Vaccination greatly reduces disease, disability, death and inequity worldwide. Available at: <https://www.who.int/bulletin/volumes/86/2/07-040089/en/>. [↑](#endnote-ref-3)
3. WHO (2020) Do vaccines against pneumonia protect you against the new coronavirus?

 Available at: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/myth-busters> [↑](#endnote-ref-4)
4. ECDC (2018) Seasonal influenza vaccination and antiviral use in EU/EEA Member States. Available at: <https://www.ecdc.europa.eu/sites/default/files/documents/seasonal-influenza-antiviral-use-2018.pdf>. Last accessed: April 2020. [↑](#endnote-ref-5)
5. WHO (2020) COVID-19 media briefing. Available at: <https://www.who.int/dg/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---25-march-2020> [↑](#endnote-ref-6)
6. World Federation of Public Health Associations (2016) *A Global Charter for the Public’s Health* <https://www.wfpha.org/wfpha-projects/14-projects/171-a-global-charter-for-the-public-s-health-3> [↑](#endnote-ref-7)
7. Gmeinder, M., Morgan, D. and Mueller, M. (2017) How much do OECD countries spend on prevention? *OECD Working Papers, No. 101*. Available at: <https://www.snop.it/attachments/article/775/OECD%20%20spese%20prevenzione.pdf> [↑](#endnote-ref-8)
8. WHO (2008) Vaccination greatly reduces disease, disability, death and inequity worldwide. Available at: <https://www.who.int/bulletin/volumes/86/2/07-040089/en/>. [↑](#endnote-ref-9)