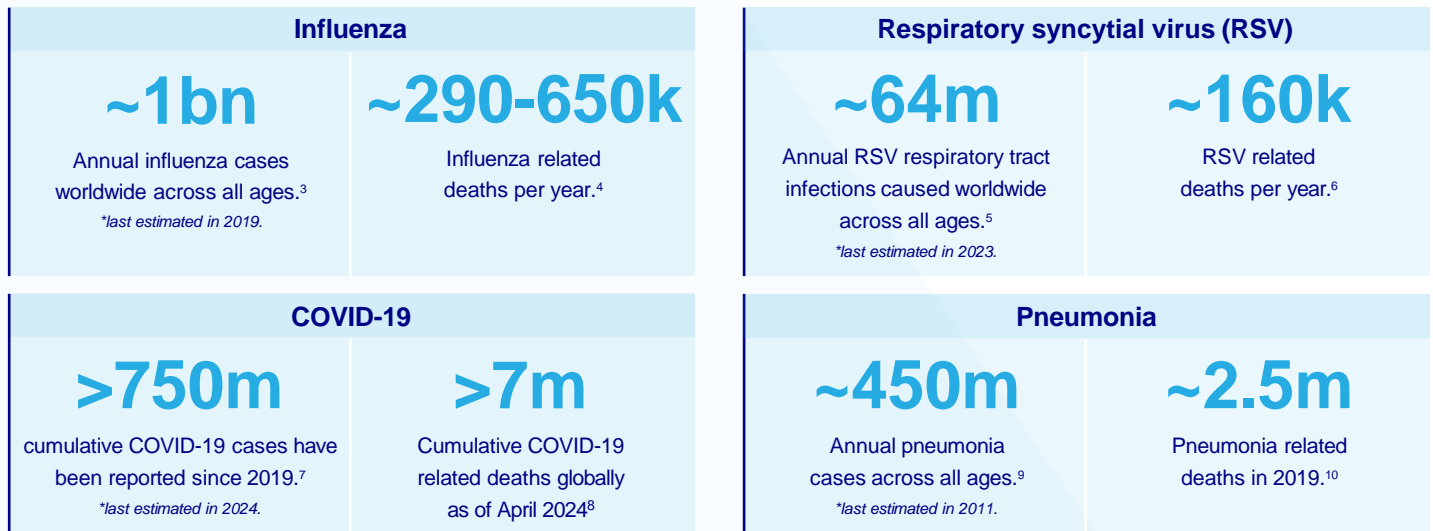


One of the core ambitions for the *WHO Immunization Agenda 2030 (IA2030)* is to expand immunisation services beyond infancy to include the whole of the life course and ensure **“a world where everyone, everywhere, at every age, fully benefits from vaccines for good health and well-being”**.<sup>1</sup>

The Immunisation for All Ages (IFAA) initiative calls for action in support of a life course approach to immunisation, and for national and international health and advocacy organisations and governments to:<sup>2</sup>

- 1** Prioritise immunisation throughout life as a key pillar of expanded prevention strategies and a central component of universal health coverage.
- 2** Remove barriers to access for appropriate immunisation throughout life to ensure all people are protected and no one is left behind.
- 3** Reduce inequities in timely, appropriate, and affordable access to immunisation throughout life.

## Vaccine preventable respiratory diseases are a public health burden<sup>11</sup>



Health systems are managing the co-circulation of multiple infectious respiratory diseases, particularly in the winter.<sup>11</sup> These contribute to severe illness and high levels of hospitalisations in vulnerable populations every year putting additional pressure on already strained healthcare systems.<sup>12,13,14,15</sup>

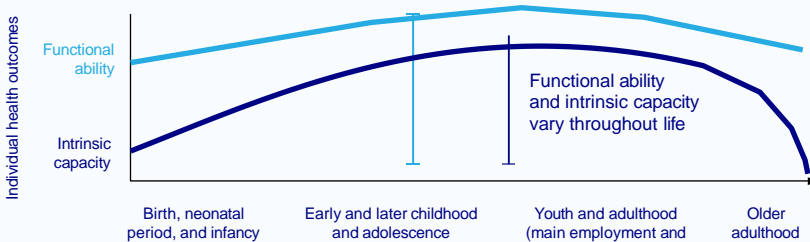
## Older adults and those with underlying medical conditions may be at an even greater risk of serious and life threatening consequences of vaccine-preventable deaths (VPD).



With increasing age the likelihood of an adult having two or more chronic medical conditions increases.<sup>16</sup>



During the 2021/2022 winter season, **94%** of US adults who were hospitalised with flu-related complications had at least one underlying medical condition, such as diabetes, asthma, chronic obstructive pulmonary disease (COPD) and chronic heart disease.<sup>17</sup>



Conceptual framework for a life course approach to health<sup>20</sup>

**Maintaining functional capacity is central to healthy ageing. Preventive medicine, including vaccination, can play a major role in preserving this.<sup>18</sup>**

Vaccine-preventable diseases are a significant cause of morbidity and mortality in older people, and severe infections are associated with the loss of independence, function, and quality of life.<sup>19</sup>





Vaccination is recognised as a cost-effective way of saving lives and promoting good health and wellbeing leading to significant societal and economic value.<sup>21</sup>

If the universal 75% influenza vaccination coverage target rate is achieved, vaccines could potentially reduce the public health and economic burden in Europe by an estimated:<sup>22</sup>



**31,400**  
hospitalisations<sup>22</sup>



**14,300**  
deaths<sup>22</sup>



**767,800**  
physician visits<sup>22</sup>



**1,015,100**  
working days  
lost annually<sup>22</sup>

Targeting specific adult populations, such as older adults, those with chronic medical conditions, healthcare workers, and pregnant women, can help protect at-risk populations.<sup>1,7,23</sup>

Adult immunisation rates are lagging behind child immunisation rates worldwide.<sup>24</sup>

	Adult Pneumococcal Vaccination Rates	Paediatric PCV-13 Pneumococcal Vaccination Rates
	44%	92%
	62%	88%
	18%	81%
	37%	81%
	60%	82%

<sup>24</sup>as of 2021

Closing the immunisation gaps amongst healthcare workers can help to:<sup>25</sup>



1  
Protect their safety



2  
Prevent the spread of disease



3  
Ensure continuity of care and maintain an adequate workforce



4  
Improve the overall effectiveness of healthcare systems



Strengthening maternal immunisation pathways has been recognised as a means of helping to protect new-born infants, from the day of birth, when they are most vulnerable from respiratory diseases, such as RSV, pertussis and influenza.<sup>26,27</sup>

Community pharmacies help build health system capacity to support increased immunisation uptake across the life course.<sup>29,30,31</sup>



Over  
**320 million**

COVID-19 vaccines had been administered by pharmacists around the world by November 2022.<sup>28,29,30,31,32</sup>

Pharmacists not only provide an accessible pathway for vaccination,<sup>33</sup> but are a feasible solution to building vaccination awareness and confidence.<sup>34</sup> As trusted healthcare professionals at the heart of communities, pharmacists are ideally placed to identify those who require vaccination and engage in conversations that encourage vaccine uptake and improve health literacy.<sup>35,36</sup>

To achieve the goals of IA2030, it is crucial to have strategies and plans of action to build and sustain comprehensive national immunisation programmes that are equitable across the lifecourse and all ages and strengthen health systems.



## The Burden of Influenza across the life course

Seasonal influenza is an acute respiratory infection that contributes to significant morbidity and mortality worldwide. Around a **billion cases** of seasonal influenza occur annually across all ages, including **3–5 million cases of severe illness** which place pressure on already strained healthcare systems and have a significant societal and economic burden.<sup>37,38,39,10,41</sup>

## Vaccination is recommended as a critical step to protect high-risk groups from influenza<sup>41,42,43</sup>



### Pregnancy and Infancy

Maternal vaccination against influenza is recommended by World Health Organization (WHO) as an **effective and safe** means of protecting pregnant women, their foetuses, and infants during periods of increased vulnerability to infection.<sup>43,44</sup>



### Children

Influenza vaccination offers the best **defence against severe influenza in children under 5** and **those with chronic conditions** while also helping to **reduce the spread** of infection from children to higher risk family members.<sup>45</sup>



### Healthcare Workers

Increasing influenza vaccination in healthcare workers by 10% may help **decrease sickness absence rates by 10%**.<sup>46</sup>



### At-risk Individuals of All Ages

Adults aged **18-64 years with underlying co-morbidities** are at **higher risk of influenza-related mortality** compared to healthy individuals.<sup>47</sup>



### Older Adults

Vaccination can help **reduce the risk of adult hospitalisation** due to influenza by 23%, and as much as **41% in those aged over 65**.<sup>48</sup>

## The value of broad recommendations and a platform for access and uptake of influenza vaccinations<sup>37,54</sup>



**Reducing economic losses as a result of employee absenteeism:** Adults 16-84 years of age encompass majority of the working population. A 2018 study in the US found that the total annual indirect cost of influenza was \$8 billion, with 67% of these costs caused by this group as result of reduced productivity or the need to care for dependents.<sup>41,47</sup>



**Minimising the burden on health systems:** Influenza results in significant hospital resource use, hospital stays and re-hospitalisation.<sup>49</sup> In the UK, influenza hospitalisations result in direct costs to the healthcare system of over £128 million across the winter season.<sup>49</sup>



**Vaccination is also an important measure in the fight against anti-microbial resistance:**<sup>50</sup> Vaccination can help prevent infections that may be inappropriately treated with antibiotics, as well as the use of antimicrobials to treat related secondary bacterial infections that occur in up to 35% of influenza cases.<sup>50,51</sup>



**Offsetting influenza related conditions:** Influenza can exacerbate other health conditions. In those aged over 65 years, influenza can increase the risk of a heart attack by 3-5 times and stroke by 2-3 times in the first two weeks of infection.<sup>52,53</sup>

To protect individuals, health systems and economies broad, simple and actionable recommendations for vaccine-preventable respiratory diseases are necessary for all eligible populations.

## Despite evidence for vaccination as an effective way to prevent influenza disease, barriers to vaccine access remain.<sup>37,54</sup>

Pharmacists are making a significant impact as vaccinators, helping to increase **acceptance** and uptake of influenza vaccines, and should be available in every market to offer complementary capacity.<sup>54</sup>



In Portugal, when pharmacists were permitted to administer NIP-funded influenza vaccines without a prescription, a **32% increase in uptake rates** was observed.<sup>55</sup>

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