Findings Published in Two International Peer-reviewed Publications Provide New Global Data on Influenza Vaccine Provision and the Level of support for Immunization Policies.

Vaccine supply data from 157 countries shows that global vaccination levels remain low; while policy measures that directly impact patients are linked to higher levels of Influenza Vaccination.

Geneva, 28 November 2011 – Two studies being published this week in peer-reviewed journals look at global vaccination policies and use global vaccination provision data that had not been previously available. The first study published in Vaccine\(^1\) shows that despite influenza vaccine provision increasing, levels globally remain low and the rate of growth is slowing. Only 20% countries achieved the study’s conservative threshold which is based on WHO immunization recommendations\(^2\). Official vaccination recommendations alone do not drive higher coverage; instead public health policies with a direct impact on patients, such as effective communication and reimbursement policies, are associated with higher levels of seasonal influenza vaccination. These factors appeared substantially more important than United Nations (UN) development status, which does not appear to correlate directly to coverage levels. The second study being published in the International Nursing Review\(^3\) shows that there is wide-spread health authority support for healthcare worker immunization around the world.

The new data for the two publications was provided by the International Federation of Pharmaceutical Manufacturers and Associations (IFPMA)\(^4\). Although seasonal influenza places a major burden on public health, with over 40% of national governments recommending vaccination of at-risk groups, no systematic global data has been available to assess vaccine provision nor the effect of immunization policies. For this reason, the IFPMA compiled global vaccine supply data for 157 countries from 2004 and 2009.

The IFPMA study published in Vaccine measured seasonal influenza vaccine provision worldwide and found coverage needs to continue to grow strongly to meet vaccination recommendations issued by public health Authorities and Organizations, such as the World Health Organization (WHO). The results show that global vaccine supply increased by more than 70% to 449 million doses during the study period (2004 to 2009), but only 20% of the 157 study countries reached the study’s low threshold level, which was based on WHO seasonal influenza immunization recommendations for the elderly only, and did not include other at-risk groups.

“Protecting communities around the world against the ongoing threat posed by seasonal influenza is an important public health goal,” commented Dr. Lance C. Jennings, Clinical Associate Professor, Canterbury Health Laboratories & Pathology Department, University of Otago, Christchurch, New Zealand. “The growth seen in vaccination levels in recent years is

---

1 Palache A. Seasonal influenza vaccine provision in 157 countries (2004 to 2009) and the potential influence of national public health policies. Vaccine Volume 29, issue 51, pp. 9459-9466 (Cover date 28 November 2011) © 2011 Elsevier Ltd.

2 The threshold was based on a single target group included in WHO recommendations: the elderly. No other risk groups were included. Consequently, the threshold, set at 15.9% of the population, was considered conservative.


4 Supplied by IFPMA IVS member companies: Abbott Biologicals, Baxter, Biken, Crucell, CSL, Denka Seiken, GlaxoSmithKline Biologicals, Green Cross, Hualan Biologicals, Kaketsuken, Kitasato Institute, MedImmune, Novartis Vaccines, Sanofi Pasteur, Sanofi Pasteur MSD and Sinovac.
encouraging, but coverage rates do not meet local official immunization targets in many countries. Therefore, the results of this new IFPMA study, showing that effective communication and reimbursement policies help improve uptake irrespective of national development status, are particularly welcome.”

The study showed vaccine provision was uneven around the world, and several less developed nations, notably in Latin America, achieved higher coverage levels than a number of more developed countries, particularly in Eastern and Southern Europe. Sub-group analysis of 26 countries showed countries’ development status and the inclusion of influenza vaccine in official recommendations did not appear to correlate well with vaccine provision. In contrast, vaccine uptake showed higher correlations with large-scale communication activities and reimbursement.

Many countries recommend seasonal influenza vaccine for key risk groups, and undertake annual immunization campaigns. Although vaccine use is increasing around the world, the rate of growth is slowing, and few countries achieve high levels of vaccine coverage. Continuing and accelerating the growth in vaccine uptake is essential to protect populations against the threat of influenza. The IFPMA indicates that the opportunity exists to achieve this goal. Robust measures that connect directly with patients, such as the use of effective communications and financial support for vaccination, can improve the effectiveness of local immunization policies, irrespective of countries’ UN development status.

The second IFPMA study published in the International Nursing Review shows public health authorities around the world officially recommend and financially support seasonal influenza vaccination for healthcare workers. The proportion of countries supporting healthcare worker immunization was similar to that targeting ‘traditional’ risk groups. Notably, health authorities’ support for vaccination did not correlate with national UN development status.

“Public health experts around the world are increasingly calling for routine influenza vaccination of healthcare professionals, to protect the workers themselves, their families and colleagues, and most importantly their patients,” said Dr Kristin L. Nichol, Associate Chief of Staff for Research, Minneapolis VA Medical Center Professor of Medicine, University of Minnesota. “Seasonal influenza poses a serious threat, causing potentially life-threatening infections in seriously ill patients, and staff absences that can disrupt healthcare services and increase costs. In contrast, healthcare worker vaccination can enhance patient safety, reduce workplace absence and provide savings for healthcare organizations.”

Dr Nichol also stated that “Increasing immunization rates is an important priority, and robust policy measures, such as education, providing easy access to vaccines and formally documenting workers’ vaccination status can help achieve this. The results of this new IFPMA research are therefore particularly encouraging, because they show official support for healthcare worker immunization is wide-spread, including in less developed countries, and is not simply determined by national wealth.”

The IFPMA data surveyed 26 countries taken from each region of the world. The research found 88% of the countries recommended healthcare worker vaccination against seasonal influenza. This compared with 92% that recommended immunization for those with chronic pulmonary, cardiovascular or metabolic diseases, and 96% that recommended vaccination of the elderly. In these countries, there was no clear correlation with development status, as defined by the UN classification, with 83% of less developed countries and 92% of more developed nations recommending healthcare worker immunization.

(Ends)
About the IFPMA:

IFPMA represents the research-based pharmaceutical companies and associations across the globe. The research-based pharmaceutical industry’s 1.3 million employees research, develop and provide medicines and vaccines that improve the life of patients worldwide. Based in Geneva, IFPMA has official relations with the United Nations and contributes industry expertise to help the global health community find solutions that improve global health.

IFPMA manages global initiatives including: IFPMA Developing World Health Partnerships studies and identifies trends for the research-based pharmaceutical industry’s long-term partnership programs to improve health in developing countries, IFPMA Code of Pharmaceutical Marketing Practices sets standards for ethical promotion of medicines, IFPMA Clinical Trials Portal helps patients and health professionals find out about on-going clinical trials and trial results.

For further information, please contact:
Abigail Jones
E-mail: Abigail@acumen-publicaffairs.com
Tel: +32 475 41 09 76
Web: www.ifpma.org