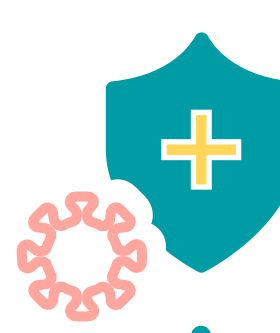


Why is flu vaccination so important during the COVID-19 pandemic?

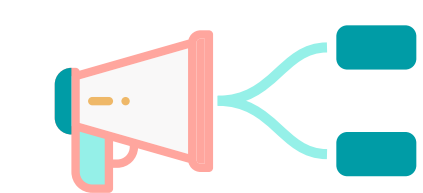


Seasonal flu kills up to **650,000 people** globally every year.¹



This year, because of COVID-19, this figure could be much higher.

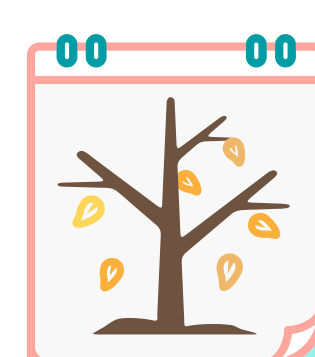
COVID-19-related restrictions resulted in a historically mild flu season in 2020/2021. Experts are uncertain how lifting the COVID-19 restrictions will affect the upcoming season.² Natural immunity to flu is expected to be lower than usual, potentially putting more vulnerable people at risk of serious illness or death.²



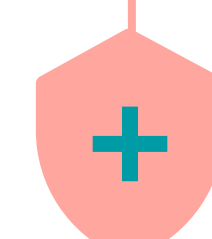
Policymakers and health service planners must plan and promote flu vaccination programs in a way that will maximize uptake of vaccines for both flu and COVID-19.

COVID-19 has created logistical challenges to effective delivery of the flu vaccine, which should be given in the autumn and winter months to maximize protection of the most vulnerable.^{3, 4}

This year, the flu vaccine will be delivered alongside vaccines for COVID-19. This could prove challenging, given that many countries recommend a gap between the two vaccines,^{5,7} and will deliver them through separate programs and often in separate locations.



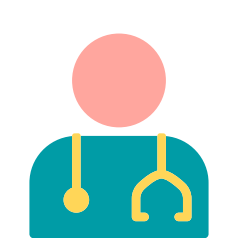
What can an effective flu vaccination campaign achieve this year?



- Protect against the risks of an unpredictable flu season
- Address possible complacency about the seriousness of flu
- Ease the double burden of flu and COVID-19 on health systems
- Maximize protection for those most vulnerable to flu and COVID-19



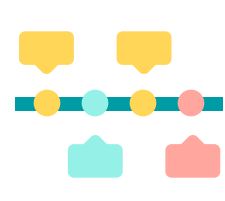
To protect the most vulnerable this flu season, policymakers and health service planners must...



Enable convenient and safe access to vaccines by supporting flu vaccination in community settings, with appropriate COVID-19 protection measures in place



Use the latest evidence to ensure all priority groups, including those at risk of spreading flu to vulnerable people, are eligible for reimbursed vaccination



Plan flu vaccination programs to coordinate with COVID-19 vaccine schedules, ensuring flu vaccines are not given too early



Work with community and patient groups to develop targeted campaigns for priority groups, highlighting the unique challenges associated with flu in light of COVID-19



Priority groups for flu vaccination



Older people

account for the highest proportion of deaths from flu and COVID-19.^{8,9}

Babies and young children

are particularly susceptible to flu if they have never been exposed to it. They are also at risk of severe complications from flu (e.g. pneumonia).^{15,16}

Health and care workers

can easily catch and spread flu.¹² If too many are absent from work due to illness, vital services will be restricted.¹³

Pregnant women

are more likely to become seriously ill, or even die, from flu than non-pregnant women.¹⁴

People with underlying conditions

are at increased risk of hospitalization owing to the consequences of both flu and COVID-19.^{10,11}

► These include asthma, lung disease, heart disease, neurological conditions, diabetes, obesity, chronic kidney disease, chronic liver disease, history of stroke, and a weakened immune system (either from disease such as HIV/AIDS or from treatment such as chemotherapy).



The Health Policy Partnership

For more information, please see the accompanying report at

<https://www.ifpma.org/resource-centre/influenza-vaccination-during-the-covid-19-pandemic/>

References

1. Iuliano AD, Roguski KM, Chang HH, et al. 2018. *Lancet* 391(10127): 1285-300
2. Collins K. 2021. <https://www.nytimes.com/interactive/2021/04/22/science/flu-season-coronavirus-pandemic.html>
3. Centers for Disease Control and Prevention. <https://www.cdc.gov/flu/prevent/keyfacts.htm>
4. Belongia EA, Sundaram ME, McClure DL, et al. 2015. *Vaccine* 33(1): 246-51
5. Australian Technical Advisory Group on Immunisation. 2021. *Clinical guidance on use of COVID-19 vaccine in Australia in 2021* (v3.0). Australian Government, Department of Health
6. The Immunisation Advisory Centre. <https://www.influenza.org.nz/administration-and-answers-some-frequently-asked-questions-about-influenza-vaccination>
7. Haute Autorité de Santé. https://www.has-sante.fr/jcms/p_3230294/fr/vaccination-contre-la-covid-19-la-has-inclut-le-vaccin-de-moderna-dans-la-strategie-vaccinale
8. Yanez ND, Weiss NS, Romand J-A, et al. 2020. *BMC Public Health* 20(1): 1742
9. Whitaker JA, von Itzstein MS, Poland GA. 2018. *Vaccine* 36(40): 5940-48
10. Xu S, Blanton L, Elal AIA, et al. 2019. *Morbidity and Mortality Weekly Report* 68(24): 544-51
11. Liu H, Chen S, Liu M, et al. 2020. *Aging and Disease* 11(3): 668-78
12. Public Health England. 2018. *Healthcare worker vaccination: clinical evidence*. PHE
13. National Health Service. <https://www.england.nhs.uk/increasing-health-and-social-care-worker-flu-vaccinations/social-care/>
14. Rasmussen SA, Jamieson DJ, Uyeki TM. 2012. *American Journal of Obstetrics and Gynecology* 207(3, Supplement): S3-S8
15. Dunn L. <https://www.nbcnews.com/health/health-news/after-year-virtually-no-flu-scientists-worry-next-season-could-n1266534>
16. Centers for Disease Control and Prevention. <https://www.cdc.gov/flu/highrisk/children.htm>