



2011/12 Seasonal Influenza Vaccination Programs

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Centre for Health Protection
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衛生署
Department of Health

Vaccination Programmes 2011/12

- **Government Vaccination Programme (GVP)**
(including Residential Care home Vaccination Programme)
 - Seasonal influenza vaccine
 - Pneumococcal vaccine
- **Childhood Influenza Vaccination Subsidy Scheme (CIVSS)**
 - Seasonal influenza vaccine
- **Elderly Vaccination Subsidy Scheme (EVSS)**
 - Seasonal influenza vaccine
 - Pneumococcal vaccine

疫苗接種計劃
VACCINATION SCHEMES



In a nutshell ...

- Same coverage as last year (2010/11)
- For 50-64 year-old, only those on CSSA are eligible for GVP
 - i.e., A 50-64 year-old not on CSSA will not be eligible for GVP or subsidized vaccination at GP
- Obesity regarded as a 'chronic medical problem' in GVP
- Vaxigrip will be used for 2011/12, same as 2010/11



Government Vaccination Programme

- Free seasonal influenza or pneumococcal vaccination for specified target groups with reference to SCVPD recommendation
- Covered health care workers of the DH, HA and other government departments, as well as health care workers in elderly homes or institutions for the disabled
- Vaccination for DH and HA staff planned to start in mid October



Specified target groups under GVP

- Free seasonal influenza vaccination at HA or DH clinics for the following target groups:
 - Long-stay residents of RCHEs & RCHDs
 - Elderly persons aged 65 years or above with chronic medical problems attending public clinics
 - Person aged 50 years or above receiving CSSA
 - Persons under 65 years with chronic medical problems (including obesity) who are on CSSA, and some long-stay Hospital Authority (HA) in-patients who have chronic medical problems
 - Health care workers of DH, HA and other Government departments, as well as health care workers in RCHE and RCHD
 - Children between the age of 6 months and less than 6 years from families receiving CSSA
 - All pregnant women receiving CSSA
 - Poultry workers or staff who may be involved in the poultry culling operations
 - Pig farmers/pig-slaughtering industry personnel



Specified target groups under GVP

- One dose of free pneumococcal vaccine for the following target group: (if no previous vaccination)
 - Elderly persons aged 65 or above living in RCH
 - Community living persons aged 65 years or above with chronic medical problems attending public clinics
 - Community living persons aged 65 years or above receiving CSSA



GVP 2011/12 updated eligible groups

Original Recommendations	Updated Recommendations	Newly eligible persons
Persons aged 65 years or above	Persons aged 50 years or above	Persons aged 50-64 on CSSA
Persons with chronic medical problems	Persons with chronic medical problems (include obesity BMI \geq 30)	Persons with chronic medical problems (<u>include obesity</u>) AND either <ul style="list-style-type: none"> - on CSSA; or - 65 years or above; or - In-patient;



Residential Care Home Vaccination Programme

- VMO to deliver seasonal flu and 23vPPV to RCHE/ RCHD residents and staff
 - Individual RCHE/ RCHD informs DH after vaccination date arranged with VMO
 - VMO claims a fee of \$50 per injection via eHealth System after service



CIVSS or EVSS- Eligibility

- HK resident, AND

- CIVSS
 - Either aged 6 months to < 6 years old
(on the day receiving 1st dose of flu vaccine)

OR

 - Age \geq 6 years attending pre-primary institution
(proof by student handbook/student card/certificate by institution)

- EVSS
 - 65 years old or above in the year of injection
 - *i.e.* Birth year = 1946 or earlier are eligible for subsidy in 2011



CIVSS and EVSS 2011/12

- **Level of Government subsidy**
 - CIVSS (vaccine cost)
 - Seasonal influenza vaccine:
HK\$80 in 2010/11 (up to 2 doses)
 - EVSS (vaccine fee + injection cost)
 - Seasonal influenza vaccine:
HK\$80 + \$50 (1 dose in 2011/12)
 - Pneumococcal vaccine:
HK\$140 + \$50 (1 dose)



CIVSS and EVSS 2011/12

- No restriction on doctors' fees on top of subsidy
 - Encourage no extra charge
- Require transparency in doctor's pricing
 - Display at clinic
 - Publish in CHP website (www.chp.gov.hk)

● 搜尋結果 - 西醫 每頁顯示 5個結果 [往上](#)

⚠ 注意事項

- 所列每次接種收費已扣除政府資助
- 建議求診前致電有關診所確定最新收費及提供有關疫苗注射


 兒童流感疫苗資助計劃  長者疫苗資助計劃
 醫療券計劃

服務提供者	執業地點名稱、地址和電話號碼 參與計劃	地區	收費			
			兒童流感疫苗資助計劃		長者疫苗資助計劃	
			季節性 流感疫苗	肺炎球菌 疫苗	季節性 流感疫苗	同時接種肺炎球菌 和季節性流感疫苗
1 蕭敬人	西醫蕭敬人 北角書局街999號地下 21259999	東區	HK\$100	HK\$10	HK\$0	HK\$10
2 薛國棟	薛氏醫務所 北角七姊妹道500號地下 21259797	東區	HK\$70	HK\$0	HK\$0	HK\$0
3 顧嘉熙	顧醫生醫務中心 西灣河太古街399號地下 21259898	東區	HK\$100	HK\$110	HK\$20	HK\$120
4 林德興	德興健康中心 筲箕灣金華街700號地下 21259696	東區	HK\$70	HK\$100	HK\$50	HK\$150

第 1 頁, 共 1 頁 (共 4 項記錄)

最後更新日期 2009年10月03日 [往上](#)



Influenza Vaccine

- Inactivated influenza vaccine has been used for more than 60 years and has an excellent safety profile
- >300 million doses of vaccines with HSI given → same side effect profile as previous seasonal vaccine
- Well tolerated apart from occasional soreness, redness or swelling at the injection site
- Some recipients may experience fever, muscle pain and tiredness beginning 6 to 12 hours after vaccination and lasting up to two days

Severe Adverse Events Following Immunisation (AEFI)


- Rarely followed by (temporal relation only)
 - Guillain-Barre syndrome (1 to 2 case per million vaccinees)
 - Meningitis or encephalopathy (1 in 3 million doses distributed)
 - Severe allergic reaction (anaphylaxis) (9 in 10 million doses distributed)
- Influenza vaccination **may not** necessarily have **causal relations** with these adverse events



Reporting AEFI in seasonal flu vaccination programme

- Report AEFI to **Pharmaceutical Service** of the Department of Health
- Reporting form available at: www.psdh.gov.hk

Report can be returned by fax to 2572 4570.
For follow-up report (see Guidance Notes), please provide ADRMU Ref. No.: _____



Department of Health
Adverse Drug Reactions (ADR) Report Form

Please read the following instructions:

1. Please read the Guidance Notes for ADR Reporting before completing the ADR report form.
2. This report form is used for voluntary report of all suspected ADR. There is no need to put down the full name of the patient.
3. ADR can be briefly described as a noxious and unintended response to a drug or vaccine when the normal dose is used.
4. Please provide information to every section. Information of individual reporter will be treated in strict confidence.
5. For further enquires, please contact the ADR Monitoring Unit of Pharmaceutical Service of the DH at 2319 8482.

*** Section (A): Patient Information.**
 Patient initials or ref. no.: _____ Weight (if known): _____ kg.
 Sex: M/F* Date of birth: (dd/mm/yyyy) / / or age (at last birthday): _____
 For female: Is she pregnant? Yes/No* _____

Section (B): About the Adverse Drug Reaction.
 Date of onset of ADR: (dd/mm/yyyy) / /
 Description: _____

ADR category (for vaccine related ADR only): _____
 Allergic reaction Local reaction Systemic reaction Neurological disorders
 Severity: _____
 Life threatening Hospitalised on: (dd/mm/yyyy) / / Hospitalisation NOT required.

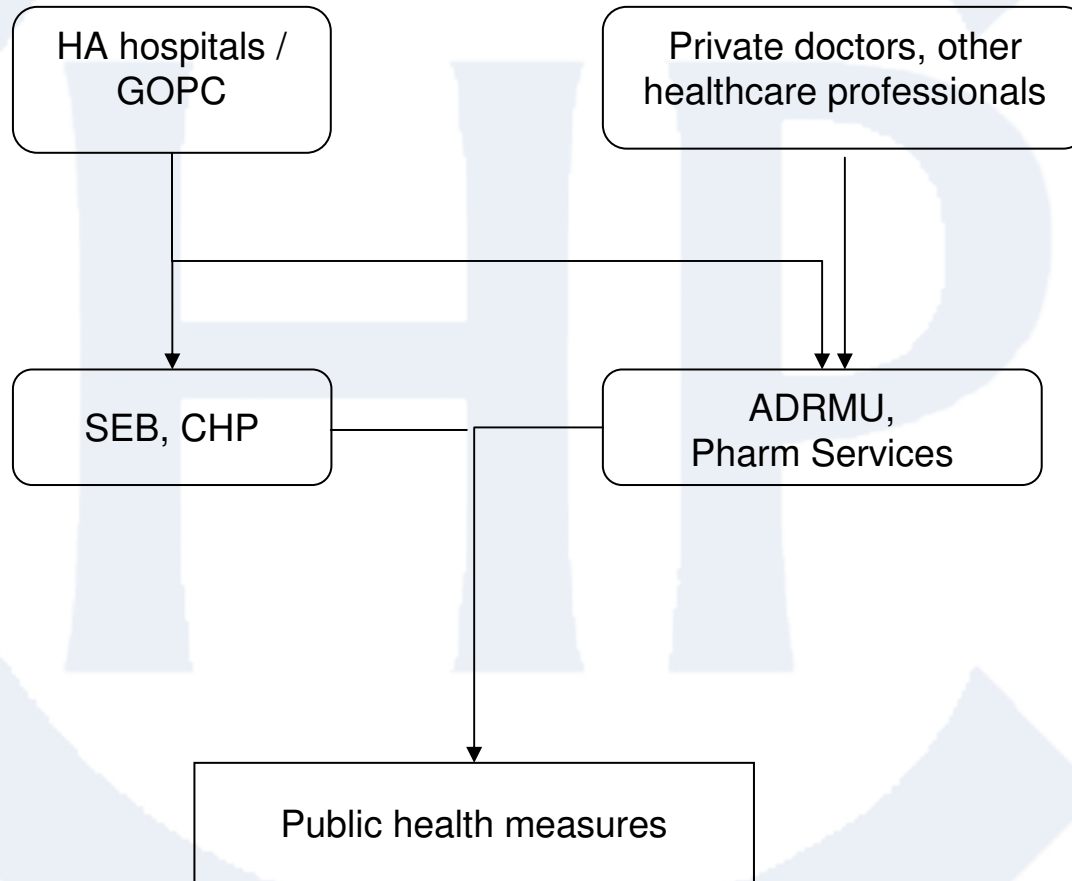
All Drug Therapies/Vaccines Prior to ADR. (Please use trade names and, for vaccine, indicate batch number. Please circle the suspected drug.)	Daily Dosage. (dose number for vaccines e.g. 1 st DTP)	Route	Date Begun	Date Stopped	Reason for Use

*** Section (C): Treatment & Outcome.**
 Treatment of ADR: No Yes. Details: _____
 Outcome: Recovered Not yet recovered Unknown Died on: (dd/mm/yyyy) / /
 Sequelae: No Yes: Persistent disability Birth defect Medically significant events
 Details: _____
 Remarks (allergies or other relevant history): _____

Section (D): Reporter Details.
 Name of Doctor/Chinese medicine practitioner/Dentist/Pharmacist*: _____
 in private/public* service. _____
 Correspondence Address: _____
 Date: _____ Tel. no.: _____ Fax. no.: _____ Email: _____

DH 2380 (Revised 7/2008) * delete whichever is inappropriate.

Surveillance of AEFI on SI Vaccine



Reporting

Investigating

Responding



Guillain-Barre Syndrome

- About 40-60 GBS cases are seen in public hospitals each year, higher among elderly persons and during winter season.
- 2 cases of serious AEFI (GBS and transverse transverse myelitis) occurred in vaccinated persons within 5 days to 6 weeks after vaccination during the vaccination programme in 2010/11
- Within normal expectation of baseline incidence, no excess risk observed



AEFI information on CHP web



Centre for Health Protection
 Department of Health
 The Government of the Hong Kong Special Administrative Region

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 25 July 2011
 Vaccination Schemes

疫苗接種計劃
 VACCINATION SCHEMES

Public

List of Participating Doctors

- Children aged less than 6 years
- Persons aged 6 - 64 years
- Elderly persons aged 65 years or above
- Pregnant women
- Health care workers
- Slaughtering industry

Vaccination schemes at a glance
 Vaccination statistics and background information on adverse events following seasonal influenza vaccination

Department of Health
 The Centre for Health Protection is a professional arm of the Department of Health for disease prevention and control.

<http://www.chp.gov.hk>

表二 衛生署錄得的死產數字

Table 2 The number of stillbirth recorded by the Department of Health

年份/月份 Year/Month	死產總數 (>24 妊娠周) Total number of stillbirth (>24 gestation week)
2003	189
2004	164
2005	218
2006	152
2007	176
2008	169
2009	158

自 2010 年 11 月 1 日起，在接種者中錄得的「吉·巴氏綜合症」(於接種疫苗後 5 日至 6 個星期內)、胎兒宮內死亡和其他嚴重不良情況個案(截至 2011 年 6 月 27 日中午 12 時)：

Number of GBS (within the period of 5 days and 6 weeks after vaccination) and intrauterine death and other serious adverse events reported among vaccinated person since 1 November 2010 (as of 12 noon, 27 June 2011):

吉·巴氏綜合症 Guillain-Barre Syndrome	胎兒宮內死亡 Intrauterine Death	其他 Others
1	0	1

Basis of recommendation on influenza vaccination for health care workers

- Prevent health care workers to transmit influenza virus to high risk groups
- Associated with a substantial decrease in mortality among elderly patients with ILI in long-term care settings (OR =0.56, 95% CI 0.4-0.8)¹
- Associated with reductions in total mortality and ILI among elderly patients (reduction in total mortality: OR = 0.58, 95% CI = 0.4-0.84; reduction of ILI: OR = 0.57, 95% CI 0.34-0.94)²
- Significantly reduced absenteeism among HCW related to respiratory infections by 28% (p=0.02)³
- Significant reduction of resident mortality (rate difference -5.0 per 100 residents, 95%CI -7.0 to -2.0) and morbidity in terms of ILI, medical consultations and hospital admissions (p<0.01 for morbidity parameters) by actively promoting HCWs to vaccinate⁴

[1] Potter J, Stott DJ, Roberts MA, Elder AG, O'Donnell B, Knight PV et al. Influenza vaccination of health care workers in long-term-care hospitals reduces the mortality of elderly patients. J Infect Dis. 1997 Jan;175(1);1-6.

[2] Carman WF, Elder AG, Wallace LA, McAulay K, Walker A, Murray GD et al. Effects of influenza vaccination of health-care workers on mortality of elderly people in long-term care: A randomised controlled trial. Lancet. 2000 Jan;9198(355);93-97

[3] Saxen H, Virtanen M. Randomized, placebo-controlled double blind study on the efficacy on influenza immunization on absenteeism of health care workers. Pediatr Infect Dis J. 1999 Sep;18(9):779-83

[4] Hayward AC, Harling R, Wetten S, Johnson AM, Munro S, Smedley J et al. Effectiveness of an influenza vaccine programme for care home staff to prevent death, morbidity, and health service use among residents: cluster randomised controlled trial. BMJ 2006 Dec 16;333(7581):1241.



Overseas Experience about Health Care Workers

- WHO recommends annual vaccination for health care workers
- Annual seasonal influenza vaccination for health care workers recommended by
 - US CDC
 - UK DH
 - Australia DH
 - Canada MOH



Examples of influenza outbreaks possibly triggered by hospital staff (2011)

- **Hospital A (Feb)**
 - Long stay residents
 - 2 staff, 7 residents

- **Hospital B (Feb)**
 - Mentally handicapped patients
 - 6 staff, 16 residents

- **Hospital C (Jan)**
 - Intensive/coronary care unit
 - 5 staff



Impact of influenza outbreak on hospital ward operations

- Staff sick leave → reduced manpower
- Admission to acute hospital if complications → increase hospital workload
- Cohorting of sick patients
- Freeze patient/staff movement
- Stop mixing activity
- Daily medical surveillance
- Disinfection, mask wearing
- Tamiflu prophylaxis for residents/staff
- HOCT meetings
- Press release



Your support...

疫苗接種計劃 VACCINATION SCHEMES



院舍防疫注射計劃
Residential Care Home
Vaccination Programme 2011/12

季節性流感疫苗 Seasonal Influenza Vaccine
肺炎球菌疫苗 Pneumococcal Vaccine

開始日期：
2011年11月1日
Commencement Date:
1st November 2011

殘疾人士院舍
安老院舍

查詢熱線
Enquiry Hotline
2125 2125

計劃對象：
安老院或殘疾人士院舍的院友、宿生和員工
Target:
Residents, boarders and workers in residential care homes for the elderly or disabled.

Subsidy starts from 26-9-2011
2011/12

兒童流感疫苗資助計劃
Childhood Influenza Vaccination Subsidy Scheme

接種當日年齡介乎六個月至未滿六歲的兒童
Children between the age of 6 months and less than 6 years on the vaccination day

2011/12

長者疫苗資助計劃
Elderly Vaccination Subsidy Scheme

今年65歲或以上香港居民
Hong Kong residents aged 65 or above this year



For more information

<http://www.chp.gov.hk>

Vaccination Office

Tel : 2125 2125

Fax : 2713 9576

Email : vacs@dh.gov.hk

Address :

Block A, 2/F,
147c Argyle Street,
Kowloon



香港特別行政區政府
衛生署 衛生防護中心

GovHK 香港政府一站通 繁體純文字 简体版 ENGLISH 搜尋 網頁指南

主頁 關於我們 科學顧問架構 風險傳達顧問小組 健康資訊 健康統計數字 指引及給院舍的信 報告及刊物 感染控制須知 傳媒天地 培訓及活動 網上資源 其他語言 相關連結 聯絡我們

衛生署
衛生防護中心/衛生署
除了推行疫苗預防
及控制外專員裝備

香港

2011年7月25日
疫苗接種計劃

疫苗接種計劃
VACCINATION SCHEMES

市民

參與計劃醫生名單

- ◆ 未滿6歲的兒童
- ◆ 6 - 64 歲人士
- ◆ 65歲或以上的長者
- ◆ 孕婦
- ◆ 醫護人員
- ◆ 從事家禽業、養豬或屠宰豬隻行業的人士

疫苗接種計劃一覽
疫苗接種數字和有關接種季節性流感疫苗
後不良情況的背景資料

醫生

登入醫健通

- ◆ 登記參與計劃
- ◆ 兒童流感疫苗資助計劃
- ◆ 長者疫苗資助計劃

◆ 返回頁頂

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THANK YOU

