

VSS Operational Briefing

July 2026

Speakers:

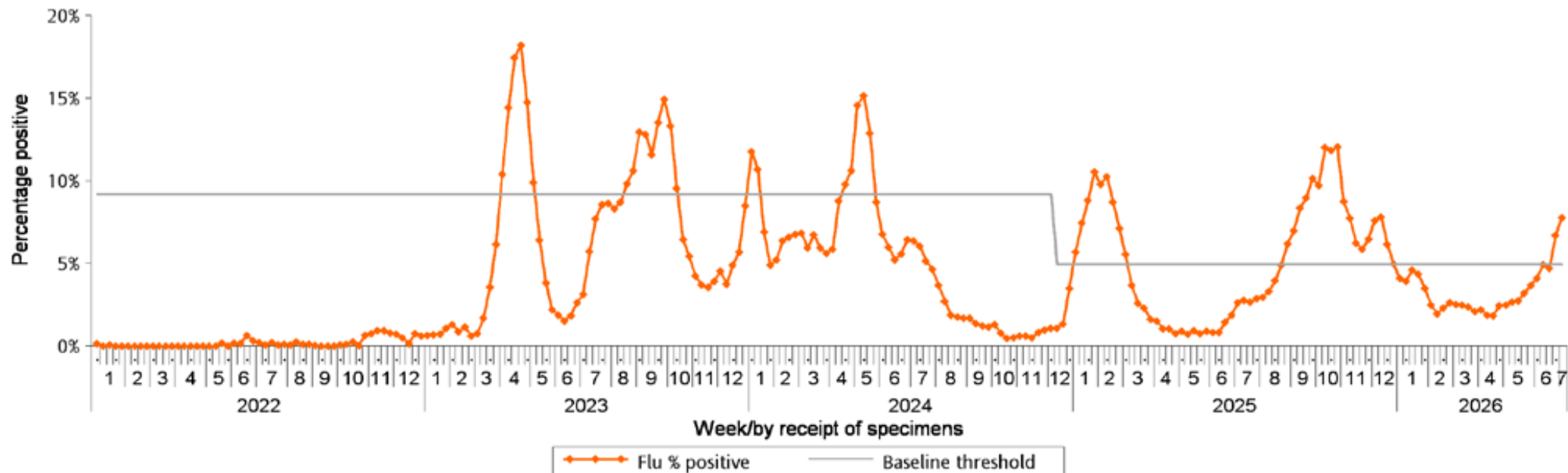
- Strategic Purchasing Office
- Environmental Protection Department
- HAIT
- Centre for Health Protection

If you have any questions:

- Drop your question in the Q&A chatbox!
- We will have Q&A session in the end of today's operational briefing

Influenza Activity in 2025/26

- Flu activity around September 2025
- July 2026 announcement: Local seasonal influenza activity exceeded the baseline levels



Surveillance of severe paediatric influenza-associated complication/death

- In 2026, 10 paediatric cases of influenza-associated complication/death were reported
 - In which none of them were fatal (as of July 9)

Key Achievements for 2025/26

- Over 2,030,000 doses administered under all vaccination programmes
- 64.7% children received flu vaccination

SCVPD recommendations for 2026/27

- Scientific Committee on Vaccine Preventable Diseases (SCVPD) –
Recommendations on Seasonal Influenza Vaccination For the 2026/27 Season in Hong Kong (As of March 2026)



衛生防護中心
Centre for Health Protection

Scientific Committee on Vaccine Preventable Diseases

Recommendations on Seasonal Influenza Vaccination
for the 2026-27 Season in Hong Kong
(As of March 2026)

Introduction

Seasonal influenza causes a significant disease burden in Hong Kong. Since 2004, the Scientific Committee on Vaccine Preventable Diseases (SCVPD) reviews the scientific evidence of influenza vaccination and makes recommendations on influenza vaccination in Hong Kong annually. This document sets out the scientific evidence, local data as well as overseas practices, and provides recommendations in relation to seasonal influenza vaccination in Hong Kong for the 2026-27 season.

Summary of Global Influenza Activity

2. According to World Health Organization (WHO)'s updates on seasonal influenza activity published in February 2026, influenza activity was reported in all regions from September 2025 through January 2026. The overall activity in the Northern Hemisphere (NH) region was higher compared to the same period in 2024-2025 but peaked earlier in December 2025 for this winter season compared to February 2025 for the 2024-2025 winter season in NH. During this reporting period, influenza A viruses predominated but the proportion of virus detections varied among regions. Globally, among the subtyped A virus detections, A(H3N2) viruses predominated throughout the reporting period in most regions. In Central America and Oceania, A(H1N1) dominated early, shifting to A(H3N2) later in the period. Influenza A(H1N1) increased slightly later in the period in Eastern and South West Europe and parts of the Americas. Influenza B virus detections remained low throughout the



https://www.chp.gov.hk/files/pdf/recommendations_on_seasonal_influenza_vaccination_for_the_2026_27_season_in_hong_kong_mar2026.pdf

SCVPD recommendations for 2026/27

Vaccine types

- Inactivated influenza vaccine (**IIV**), live attenuated influenza vaccine (**LAIV**) and recombinant influenza vaccine (**RIV**) are recommended for use in Hong Kong
- Only **trivalent** vaccines should be used in the 2026/27 season

SCVPD recommendations for 2026/27

Vaccine composition

- Follows the recommendations by the WHO for the 2026/27 Northern Hemisphere influenza season

Egg-based vaccines	- A/Missouri/11/2025 (H1N1)pdm09-like virus - A/Darwin/1454/2025 (H3N2)-like virus - B/Tokyo/EIS13-175/2025 (B/Victoria lineage)-like virus
Cell culture or Recombinant based vaccines	- A/Missouri/11/2025 (H1N1)pdm09-like virus - A/Darwin/1415/2025 (H3N2)-like virus - B/Pennsylvania/14/2025 (B/Victoria lineage)-like virus

Given B/Yamagata lineage viruses are no longer circulating in the population based on WHO surveillance data, only **trivalent** vaccines should be used in the 2026/27 season.

SCVPD recommendations for 2026/27

Other recommendations

- Priority groups - same as 2025/26 season
- Co-administration of SIV and COVID-19 vaccines under informed consent
- Both IIV and RIV are recommended for use in the residential care home setting

Vaccination Subsidy Scheme 2026/27

Eligible groups same as 2025/26

- (i) Elderly of age 65 or above
- (ii) Persons of age 50 to 64
- (iii) Pregnant women
- (iv) Children of age 6 months to less than 18 years (or secondary school students)
- (v) Persons with intellectual disability
- (vi) Persons receiving disability allowance
- (vii) Persons of age 18 to 49 with chronic medical problems

VSS 2026/27

Subsidy level same as 2025/26

1. SIV

- HKD \$260 per dose

2. 23-valent pneumococcal polysaccharide vaccine (23vPPV)

- HKD \$400 per dose

3. 15-valent pneumococcal conjugate vaccine (PCV15)

- HKD \$800 per dose

VSS 2026/27

Medical fridge requirement same as 2025/26

- Doctors enrolled in VSS have to use **purpose-built vaccine refrigerator (PBVR)** for vaccine storage

PCD requirement same as 2025/26

- Be on **PCD** before he/she is eligible to enroll or to continue to participate in VSS

eHealth requirement same as 2025/26

- Starting from 2025/26, all VSS doctors are required to be registered with eHealth (醫健通)

Consent through eHealth App before visiting Private Doctor's clinic

- Allow paperless experience for vaccinating at Private Doctor's clinic
- Serves as a supplementary method for vaccine recipients without a HKID card, especially children

We want your support!

- Active participation in subsidised programmes
- VSS is the prerequisite to other subsidised vaccination programmes
- To better protect the vulnerable individuals of our community:
 - Join RVP as far as possible
 - Join SIVSOP as far as possible

We want your support!

- Highlight to caretakers the importance of timely vaccination for children
- 流感疫苗可以幫你預防流感同併發症。本地數據顯示，未接種本季流感疫苗的兒童，出現嚴重流感併發症或死亡的比率，是已接種疫苗兒童的約五倍。預防勝於治療，今日不如順便同小朋友打埋流感針。
- Highlight to patients the importance of timely vaccination during clinical encounters
- 流感疫苗可以幫你預防流感同併發症，預防勝於治療，今日不如順便打埋流感針。