J Health Inequal 2018; 4 (2): 80–81

Submitted: 10.09.2018, accepted: 24.09.2018

DOI: https://doi.org/10.5114/jhi.2018.83580

JOURNAL
of Health Inequalities

Increasing the influenza vaccination coverage in Poland: It is advisable, but is it possible?

Magdalena Kozela, Andrzej Pająk

Department of Epidemiology and Population Studies, Institute of Public Health, Jagiellonian University Medical College, Krakow, Poland

ADDRESS FOR CORRESPONDENCE: Magdalena Kozela, Ph.D., Institute of Public Health, Jagiellonian University Medical College, 20 Grzegórzecka Str., 31-531 Krakow, Poland, e-mail: m.kozela@uj.edu.pl

In Europe, increases in the incidence of influenza are observed in regular annual epidemics from autumn to spring. Severe illness and complications are more frequent in certain risk groups, including children, persons with chronic medical conditions, and individuals aged 65 years and over. The main public health intervention to prevent influenza is vaccination. In order to protect vulnerable individuals and to reduce transmission vaccination is also recommended for healthcare professionals.

According to the European Centre for Disease Prevention and Control report "Seasonal influenza vaccination in Europe – Vaccination recommendations and coverage rates for eight influenza seasons" [1], seasonal influenza vaccination coverage rates among Polish children and adolescents did not exceed 4%. In the case of older age groups, a consensus was reached on an EU target of 75% vaccination coverage. So far, such coverage has only been reached in the Netherlands and the United Kingdom in some of the influenza seasons between 2008 and 2015. In Poland, seasonal influenza vaccination coverage among the older population is stable but only slightly exceeds 10%.

The latest systematic review of the cost-effectiveness of influenza immunisation found vaccination to be cost-effective for children, pregnant and postpartum women, high-risk groups, and, in some cases, healthy working-age adults [2]. Analysis conducted on data from Poland, including costs of hospitalisations and productivity loss, showed substantial possible economic savings for the Polish health care and social security system provided that the coverage rate was improved [3]. Increase in vaccination coverage would definitely be beneficial not only from a healthcare system perspective, but also on an individual level, by decreasing the probability of severe influenza and its complications in specific persons.

However, a considerable increase in vaccination coverage in Poland is unlikely to occur very quickly. First of all, very limited social trust in influenza vaccination is observed. According to the European Commission's report "State of vaccine confidence in the EU 2018" [4], it is even lower than the trust in MMR (measles, mumps, and rubella) vaccination. This, partially at least, may have resulted from seasonal differentiation in efficacy of the influenza vaccine (dependent on the change in its composition) but also from perceived underestimation of the risks associated with influenza in the general population. Another reason might be that influenza vaccination in Poland is not obligatory, financed by the vaccinee, and not reimbursable (except for some employee programs).

It seems, however, that despite potential difficulties, results of economic analyses, such as the one presented in this issue of the JHI, should be seriously taken into account. They give a strong argument for the intensification of actions aimed at increasing influenza vaccination coverage in Poland. Moreover, current low vaccination coverage and high seasonal influenza incidence rates, although unfavourable, provide a very good opportunity for substantial and noticeable improvement in this area and beneficial effects both on individual and population levels.

DISCLOSURE

The authors report no conflict of interest.

References

1. European Centre for Disease Prevention and Control. Seasonal influenza vaccination in Europe. Vaccination recommendations and coverage rates in the EU Member States for eight influenza sea-

sons: 2007-2008 to 2014-2015. ECDC, Stockholm 2017. Available from: https://ecdc.europa.eu/sites/portal/files/documents/influenza-vaccination-2007%E2%80%932008-to-2014%E2%80%932015.pdf (accessed: 4 September 2018).
2. Ting EE, Sander B, Ungar WJ. Systematic review of the cost-effectiveness of influenza immunization programs. Vaccine 2017; 35: 1828-1843.
3. Seweryn M. Potential savings resulting from avoided hospitalizations and avoided productivity losses due to low influenza vaccination coverage in Poland. J Health Inequal 2018; 4: 75-79.
4. European Comission. State of vaccine confidence in the EU 2018. Publications Office of the European Union, Luxembourg 2018. Available from: https://ec.europa.eu/health/sites/health/files/vaccination/docs/2018_vaccine_confidence_en.pdf (accessed: 4 September 2018).

AUTHORS' CONTRIBUTIONS

MK, AP prepared the research concept, collected data and wrote the article. AP approved the final version of the publication.