

Seasonal influenza vaccination guideline

In the Czech Republic, seasonal influenza vaccination is provided on a non-compulsory, voluntary basis. Based on the surveillance data from the Czech Republic and policies applied by other countries, the National Immunisation Committee (NIKO) recommends the following vaccination strategy for the Czech Republic:

Vaccination against seasonal influenza is intended for persons in whom it is desirable to reduce the risk of influenza and possible complications associated with influenza. Influenza vaccine is recommended especially to persons with chronic conditions in whom influenza often worsens their underlying diseases and to persons who are at high risk of complications associated with influenza.

Based on epidemiological analyses and discussion of the situation in Europe, influenza vaccine is recommended to be given every year to the following two population groups:

- 1) persons aged 65 years and over;
- 2) persons at any age (including children) with chronic conditions from any of the categories listed below:
 - chronic diseases of the respiratory tract including bronchial asthma;
 - chronic cardiovascular diseases;
 - chronic kidney and liver diseases;
 - chronic metabolic diseases including diabetes mellitus¹;
 - immune system deficiency (congenital or acquired); and
 - impaired bronchial and pulmonary function (including impaired respiratory function due to brain or spinal cord injury, seizure conditions, and other neurological or muscular disorders).

In these cases, influenza vaccination including vaccine is fully covered by the health insurance pursuant to Act No. 48/997.

In addition, influenza vaccine is recommended to:

- pregnant women at any stage of pregnancy and women planning to become pregnant during the influenza season;
- persons who may increase the risk of infection to the groups listed above, namely:
 - persons providing care to high-risk individuals (health professionals and social workers);
 - persons living with high-risk individuals; and
 - persons in contact with high-risk individuals (employees of posts, shops, services, schools, public transport, etc.).

The list presented definitely does not mean influenza vaccine should not be considered for or given to other high-risk groups or healthy individuals. The point of the list above is to prioritize the groups listed over the others. In some countries, influenza vaccine has been recently recommended for universal use in children because of the severity of influenza at the lowest age.

It is generally recommended that employers should offer influenza vaccination to employees at reduced or no cost, as it is of benefit to all from both the health and economic perspectives. Vaccination of health professionals is also beneficial to patient safety and hospital influenza risk reduction.

As the levels of protective antibodies tend to decrease over time and to match the circulating strains, one booster dose of influenza vaccine is needed every year. Influenza vaccine is given in a two-dose schedule for primary vaccination of influenza-naïve children before starting pre-school and school.

¹ For the purposes of the seasonal influenza vaccination guideline, diabetes is considered as pharmacologically treated diabetes