

RECOMMENDATIONS ON INFLUENZA VACCINATION DURING THE 2019–2020 WINTER SEASON

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WHO Regional Office for Europe recommendations on influenza vaccination during the 2019–2020 season

Influenza is an infectious disease that spreads mainly from person to person by droplets through coughing, sneezing or talking when people are in close contact. Influenza symptoms begin suddenly and can last from a few days to up to 2 weeks. Common symptoms include fever, cough, body aches and headache. While influenza infection is usually mild and uncomplicated, it may occasionally cause severe disease, particularly among the elderly, pregnant women, young children, and persons with underlying medical conditions. Seasonal influenza vaccination is safe and the most effective means of preventing infection and severe outcomes caused by influenza viruses.

RECOMMENDED TARGET GROUPS FOR INFLUENZA VACCINATION

Vaccination can benefit persons of all ages but is especially important for people at higher risk of serious influenza complications. Specific population groups may be targeted for vaccination depending on the objectives of the national vaccination programme, documented vaccine effectiveness, access to vaccine, and the ability to implement vaccination campaigns in the target groups. Because the composition of the vaccine is updated regularly to produce the best protection, vaccination against influenza is recommended every year before the season begins.

The priority groups for influenza immunization are drawn from the 2012 WHO position paper on influenza vaccines¹ and include:

- pregnant women;
- individuals with chronic heart or lung diseases, metabolic or renal disease, chronic liver disease, chronic neurological conditions or immunodeficiencies;
- elderly persons over a nationally defined age limit, irrespective of other risk factors;
- residents of long-term care facilities for older persons and the disabled;
- children aged 6–59 months;
- health care workers including those who work in facilities that care for the elderly or persons with disabilities.

Additional information

Information sheets on reaction rates of seasonal influenza vaccines:

- English: http://www.who.int/vaccine_safety/initiative/tools/vaccinfosheets/en/
- Russian: https://www.who.int/vaccine_safety/initiative/tools/vaccinfosheets/ru/

¹ Seasonal influenza vaccine, Weekly Epidemiological Record: 2012 (21); 87, 201–16 (www.who.int/wer/2012/wer8721.pdf)

COMPOSITION OF INFLUENZA VACCINES FOR 2019–2020

Due to the influenza virus' continuous genetic and antigenic changes, WHO updates its recommendations for the composition of the vaccine twice a year for the northern and southern hemisphere, respectively. The viruses included in the vaccine are those predicted to best match the circulating viruses in the forthcoming season. As it takes approximately 6–8 months to produce influenza vaccines, recommendations for the vaccine composition for the northern hemisphere are usually published by WHO in February every year. In 2019, however, it was decided that it was necessary to further analyse recently circulating A(H3N2) viruses, which have shown great antigenically and genetically diversity, in order to identify an optimal candidate vaccine virus^{2,3}.

During the upcoming 2019–2020 influenza season, WHO recommends that *trivalent* seasonal influenza vaccines for use in the northern hemisphere contain⁴:

- an A/Brisbane/02/2018 (H1N1)pdm09-like virus;
- an A/Kansas/14/2017 (H3N2)-like virus; and
- a B/Colorado/06/2017-like virus (B/Victoria/2/87 lineage).

Furthermore, it is recommended that *quadrivalent* vaccines include a B/Phuket/3073/2013-like virus (B/Yamagata/16/88 lineage) in addition to the three viruses above.

This year's northern hemisphere vaccine composition represents two changes compared with the vaccine used in the 2018–2019 season with the two influenza A virus components being updated, while the influenza B components remains the same. The update is as follows:

- Replacement of the A/Michigan/45/2015 (H1N1)pdm09-like virus with an A/Brisbane/02/2018 (H1N1)pdm09-like virus;
- Replacement of the A/Singapore/INFIMH-16-0019/2016 (H3N2)-like virus with an A/Kansas/14/2017 (H3N2)-like virus.

WHO will continue to monitor influenza virus circulation globally and provide updated recommendations as needed.

²Addendum to the recommended composition of influenza virus vaccines for use in the 2019–2020 northern hemisphere influenza season: https://www.who.int/influenza/vaccines/virus/recommendations/201902_recommendation_addendum.pdf?ua=1

³Frequently Asked Questions to the A(H3N2) component of the recommendation: https://www.who.int/influenza/vaccines/virus/recommendations/201902_qanda_recommendation_ah3n2.pdf?ua=1

⁴Recommended composition of influenza virus vaccines for use in the 2019–2020 northern hemisphere influenza season: https://www.who.int/influenza/vaccines/virus/recommendations/2019_20_north/en/

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