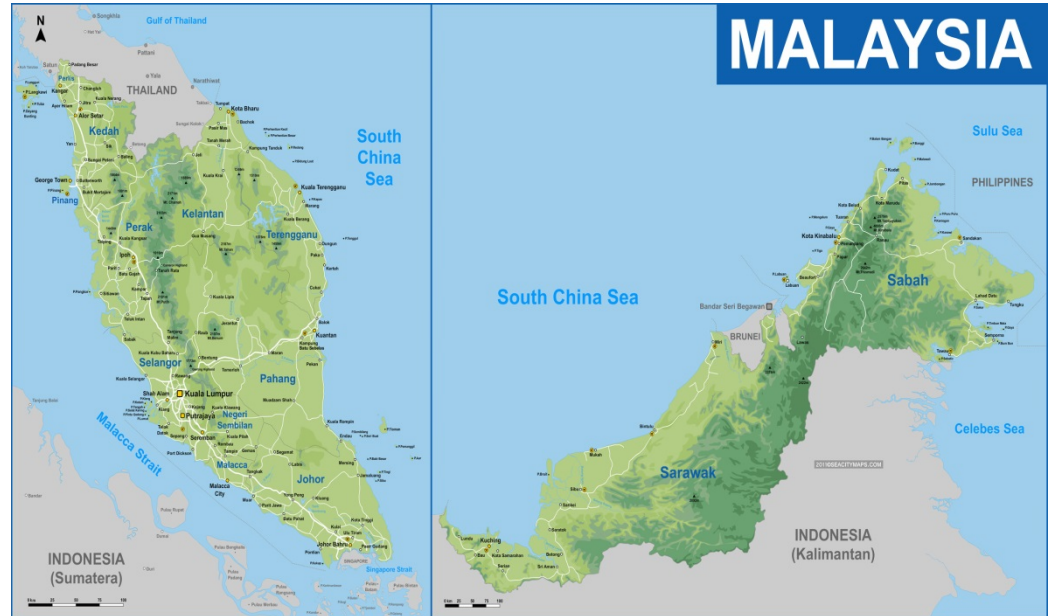
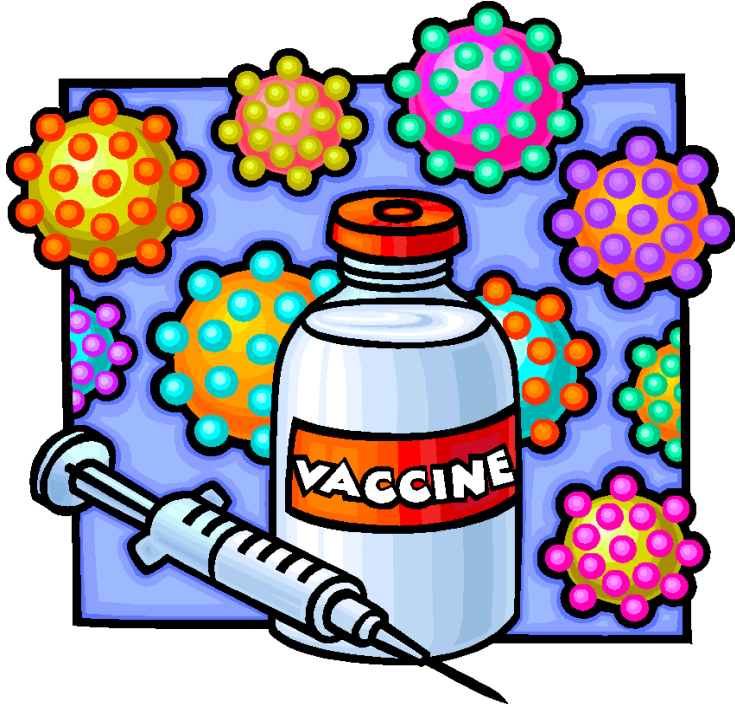


Malaysia: The Influenza Vaccination Programme



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24 October 2016 @ Kuala Lumpur*

WHO Position Paper (November 2012): Vaccines Against Influenza

Although influenza vaccination aims primarily at protecting **vulnerable high risk groups** against severe influenza-associated disease and death, influenza causes considerable morbidity worldwide even **beyond these groups** and therefore represents a public health problem with significant socioeconomic implications

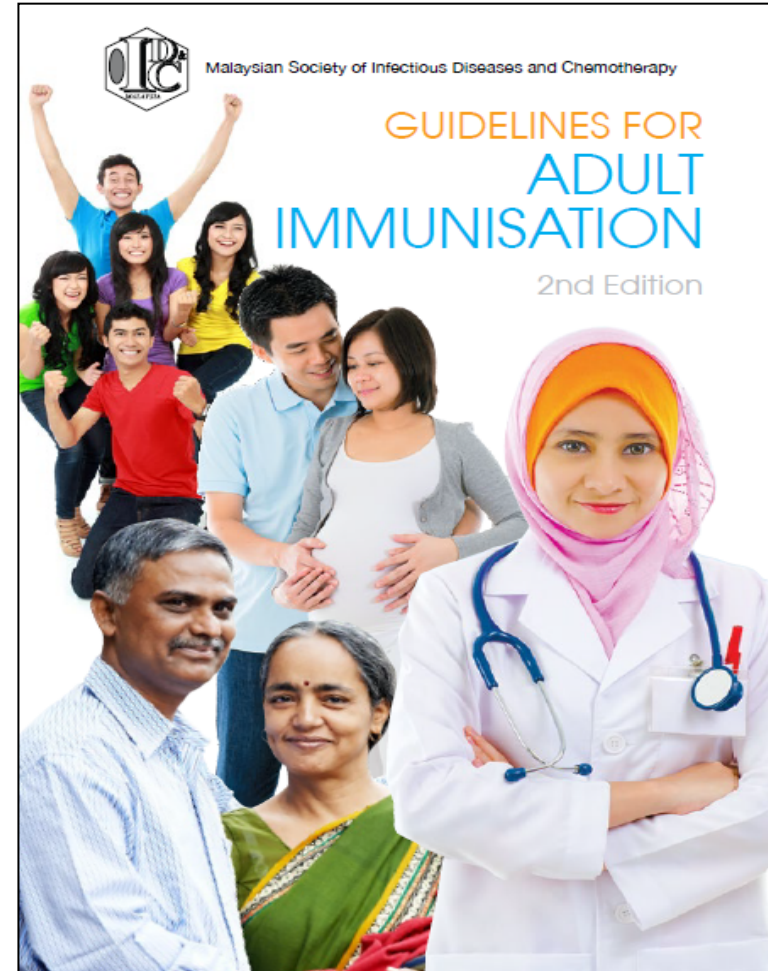
Vaccines Against Influenza: WHO Position & Recommendations

- **Highest priority:** Pregnant women should be vaccinated with inactivated influenza vaccine at any stage of pregnancy
- **In no particular order of priority:** Additional risk groups to be considered for vaccination are individuals aged 6–59 months, the elderly, individuals with specific chronic medical conditions and health care workers

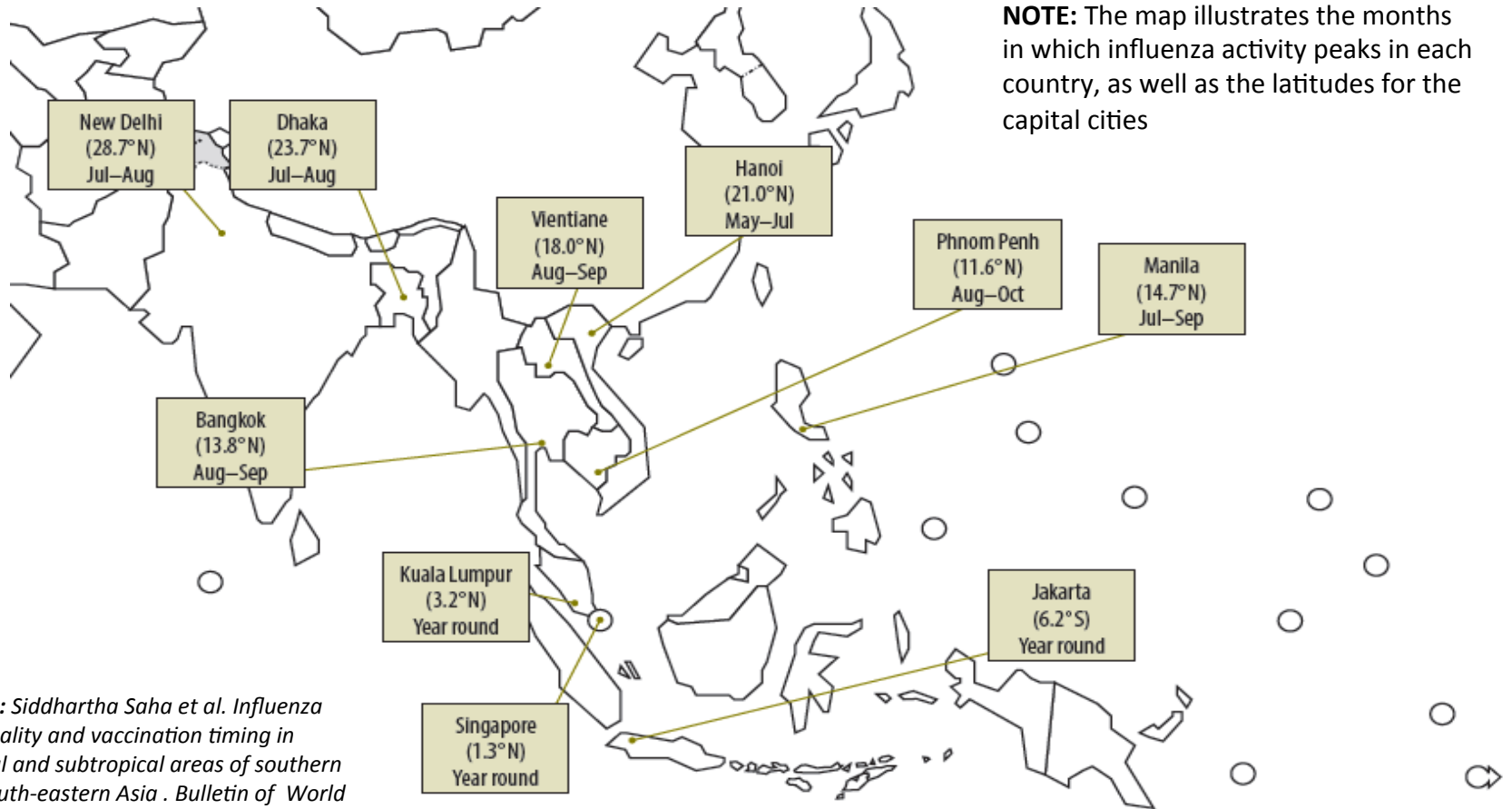


Background: Malaysian Scenario

- Immunization programme in Malaysia primarily focus on infants, children and adolescents
- In Malaysia, adult immunization is not commonly practised
 - Uptake mainly driven on the basis of medical, occupational, lifestyle needs etc.
- Nevertheless, the **Guidelines for Adult Immunisation** was established, to provide useful resources for all health care providers in Malaysia



Months of Peak Influenza Activity in 10 Countries of Southern and South-Eastern Asia, 2006-2011



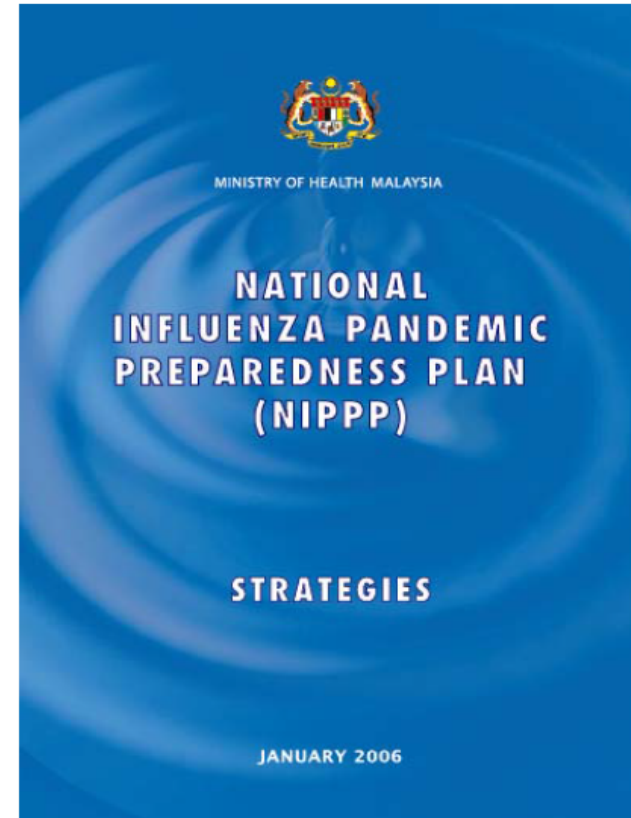
Source: Siddhartha Saha et al. Influenza seasonality and vaccination timing in tropical and subtropical areas of southern and south-eastern Asia. *Bulletin of World Health Organization* 2014; 92: 318 - 330

Influenza Vaccination: Malaysian Scenario

- Malaysia did not practice population-wide routine influenza vaccination; i.e. both for children and adult population
- The policy of Ministry of Health (MOH) Malaysia:
 - MOH Malaysia advises all medical practitioners (i.e. government & private) to use the most recent vaccine formulation recommended by WHO in that year
 - **For MOH Malaysia personnel:** Provision of annual influenza vaccination to health care workers, mainly for the direct care staff within critical high-risk areas
 - Otherwise, MOH Malaysia strongly recommends influenza vaccination for:
 - Individuals with chronic illness requiring regular follow-up e.g. diabetes mellitus, hypertension, CHD, CRF etc.
 - Personnel of various essential services sectors e.g. police, immigration etc.
 - Individuals performing pilgrimage (i.e. hajj and umrah) or mass congregations

Influenza Vaccination Program For Health Care Workers

- It was highlighted within the National Influenza Pandemic Preparedness Plan
- Priorities for influenza vaccination was established during the inter-pandemic period, in order to facilitate planning for an efficient and consistent pandemic vaccination strategy
- Pandemic (H1N1) 2009 monovalent vaccine
 - Total procurement: 400,000 doses
 - Arriving in batches, the first delivery in Nov. 2009
 - November 2009: targeted towards the front liners
 - February 2010: mass vaccination of the public (i.e. targeted high priority groups) provided through 104 government health clinics nationwide



Conclusion

- Influenza is a **vaccine preventable disease** – vaccination is the most effective way to prevent infection and severe outcomes caused by influenza viruses.
- Understanding of the evolution of the virus (for more than 80 years since the isolation of the first influenza virus) has contributed to the **evolution of influenza vaccine** from a monovalent live attenuated vaccine to the latest quadrivalent inactivated vaccine.
- The current influenza vaccination strategy is based on annual intervention. Hence, to be more acceptable in limited-resource settings, influenza vaccines that induce **broad spectrum and long-lasting immune responses** is very much needed.

THANK YOU

