中華人民共和國香港特別行政區政府總部食物及衞生局
Food and Health Bureau, Government Secretariat
The Government of the Hong Kong Special Administrative Region
The People's Republic of China

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27 December 2018

Ms Maisie LAM
Clerk to Panel on Health Services
Legislative Council Complex
1 Legislative Council Road
Central, Hong Kong

Dear Ms LAM,

Panel on Health Services
Follow-up to the meeting on 19 November 2018
Agenda item IV: Preparation for winter surge

Thank you for your letter dated 20 November 2018. Regarding the requisite information requested by Hon SHIU Ka-chun, our response is set out at **Annex**.

Yours sincerely,

(Ms Belle MOK)
for Secretary for Food and Health

c.c.
Director of Health (Attn.: Dr Liza TO)

Annex

Government's Response to Hon SHIU Ka-chun's Requisite Information

(A) Eligible Groups under Vaccination Subsidy Scheme ("VSS") and Government Vaccination Programme ("GVP")

The Scientific Committee on Vaccine Preventable Diseases (Scientific Committee) under the Centre for Health Protection of the Department of Health regularly examines local epidemiological data, latest scientific evidence and overseas experiences and reviews the recommendations on priority groups for seasonal influenza vaccine. Every year, the Government takes into consideration the expert opinion from the Scientific Committee, practice of overseas health authorities, other public health factors and the affordability of persons receiving vaccinations to determine the eligible groups under the GVP (free vaccination) and VSS (subsidised vaccination). The eligible groups recommended by the Scientific Committee in 2018/19 are listed at **Appendix I**.

2. In 2018/19, all the above priority groups as recommended by the Scientific Committee have already been included in the GVP and the VSS. Besides, in 2018/19, the Government has expanded the scope of the eligible groups of the VSS to cover Hong Kong residents aged 50 to 64. Eligible groups can receive subsidised vaccination from enrolled private doctors in their clinics. Enrolled doctors should display the designated logo near the entrance of their clinics and a poster in the clinics showing their service fees. Some clinics provide vaccination free of charge. The list of enrolled doctors and their service fees after deducting the government subsidy has been uploaded onto the eHealth System (Subsidies) (apps.hcv.gov.hk/SDIR/EN) (Select "Lists of Enrolled Healthcare Service Providers" > Choose "Seasonal influenza vaccine (SIV)" and district > Click "Search" . Items displaying "$0" means that the clinic provides free vaccination to eligible persons).

(B) Live Attenuated Influenza Vaccine ("LAIV")

3. LAIV contains weakened viruses and is a nasal-spray vaccine which can be used among people 2-49 years of age. Compared with inactivated influenza vaccine ("IIV"), more people are found unsuitable to receive LAIV. Individuals who are not

suitable to receive LAIV are listed at **Appendix II**.

4. In 2018/19, injectable IIVs are used under GVP (including Residential Care Home Vaccination Programme), and the School Outreach Vaccination Pilot Programme. Under the VSS and the Enhanced VSS Outreach Vaccination, private doctors can choose to use either IIV or LAIV, at the same level of subsidy.

5. The Scientific Committee has reviewed the scientific evidences on the use of LAIV. Regarding the use of LAIV in 2018/19, the Scientific Committee acknowledged that LAIV was registered in Hong Kong in April 2018. However, it has not been extensively used in Hong Kong before. Although overseas studies and clinical experience[1] had generally indicated that LAIV is safe and can provide comparable protection against influenza, the current evidence does not support the preferential use of LAIV. The Scientific Committee stressed that healthcare providers giving LAIV should consider the contraindications and precautions.

6. The Centre for Health Protection will continue to closely monitor the scientific evidence and development of influenza vaccination, and review the different modes of influenza vaccination with a view to determining the most appropriate one.

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[1] Studies conducted in the United States ("US") revealed that the effectiveness of LAIV against influenza A(H1N1)pdm09 in some previous seasons was lower than IIV among children aged below 18. The Centers for Disease Control and Prevention ("CDC") over the past two influenza seasons recommended that LAIV not be used. The study data presented by the manufacturer regarding the 2017/18 influenza vaccine showed that the new LAIV may produce better immunity among children. The CDC thus recommended that LAIV be used again in 2018/19. However, as the H1N1 strain was not the predominating strain in 2017/18 season in the US, CDC opined that data on effectiveness of the LAIV against influenza A(H1N1)pdm09 in the 2017/18 season in the US was not available. Hence, the American Academy of Pediatrics recommends an IIV, trivalent or quadrivalent, as the primary choice for influenza vaccination in children in 2018/19 because the effectiveness of LAIV against influenza A(H1N1) was inferior over that past influenza seasons and is still unknown for this upcoming season.

Appendix I

Priority Groups for Seasonal Influenza Vaccination Recommended by the Scientific Committee

In 2018/19, the Scientific Committee recommends the following priority groups for seasonal influenza vaccination in Hong Kong -

- Pregnant women;
- Elderly persons living in residential care homes;
- Long-stay residents of institutions for persons with disability;
- Persons aged 50 years or above;
- Persons with chronic medical problems;
- Healthcare workers;
- Children between the age of 6 months to 11 years;
- Poultry workers; and
- Pig farmers and pig-slaughtering industry personnel

Appendix II

Individuals Who Are Not Suitable to Receive LAIV

LAIV contains weakened viruses. It is generally contraindicated in the following conditions, taking reference from recommendations of the United States, United Kingdom and Canada -

- History of severe allergic reaction to any vaccine component or after previous dose of any influenza vaccine;
- Concomitant aspirin or salicylate-containing therapy in children and adolescents;
- Children aged 2 through 4 years who have received a diagnosis of asthma or whose parents or caregivers report that a healthcare provider has told them during the preceding 12 months that their child had wheezing or asthma or whose medical record indicates a wheezing episode has occurred during the preceding 12 months;
- Children and adults who are immunocompromised due to any cause;
- Close contacts and caregivers of severely immunosuppressed persons who require a protected environment;
- Pregnancy; and
- Receipt of influenza antiviral medication within previous 48 hours.

Except the above groups, the Scientific Committee suggested that LAIV can be used among people 2 - 49 years of age.