

**立法會**  
**Legislative Council**

LC Paper No. CB(2)191/20-21(09)

Ref : CB2/PL/HS

**Panel on Health Services**

**Information note prepared by the Legislative Council Secretariat  
for the meeting on 13 November 2020**

**Supply of seasonal influenza vaccines**

Influenza is a highly infectious disease caused by different strains of influenza virus. Three types of seasonal influenza viruses are recognized to cause human infection, namely A, B and C. In Hong Kong, influenza occurs throughout the year and often displays two seasonal peaks. A smaller summer peak is sometimes observed in July and August. A larger seasonal peak is in winter, usually from January to March. The last winter influenza season of Hong Kong lasted for about five weeks, with the overall seasonal influenza activity increased above the baseline level in the second week of 2020, peaked in the last week of January 2020 and then rapidly returned to the baseline level in mid-February 2020. This winter influenza season was much shorter than the previous two winter seasons which lasted for about 12 weeks and 14 weeks in the 2017-2018 and the 2018-2019 winter seasons respectively.<sup>1</sup>

2. Influenza vaccination is one of the effective means to prevent seasonal influenza and its complications together with reduction in influenza-associated hospitalization and death. Seasonal influenza vaccine requires annual administration. In Hong Kong, registered seasonal influenza vaccine currently includes inactivated influenza vaccines and a live attenuated influenza vaccine.<sup>2</sup>

---

<sup>1</sup> A summary of the 2019-2020 winter influenza season in Hong Kong is provided by the Scientific Committee on Vaccine Preventable Diseases set up by the Centre for Health Protection in the paper entitled "Recommendations on seasonal influenza vaccination for the 2020-2021 season in Hong Kong" (English version only) which can be accessed at [https://www.chp.gov.hk/files/pdf/recommendations\\_on\\_siv\\_for\\_2020-21.pdf](https://www.chp.gov.hk/files/pdf/recommendations_on_siv_for_2020-21.pdf).

<sup>2</sup> Most inactivated influenza vaccines are given via the intramuscular route and are recommended for use in individuals six months of age or above except those with known contraindications (depending on individual brand). Only one type of live attenuated influenza vaccine is available on the local market for use in individuals aged two to 49 years, and it should be given intranasally.

For the 2020-2021 winter season, all available seasonal influenza vaccines in Hong Kong are egg-based quadrivalent vaccine.<sup>3</sup> After receiving vaccination, some people may experience side effects.<sup>4</sup>

3. In September 2020, the World Health Organization's Strategic Advisory Group of Experts on Immunization has provided interim recommendations on seasonal influenza vaccination during the coronavirus disease 2019 ("COVID-19") pandemic. It is recommended that the highest priority risk groups for seasonal influenza vaccination during COVID-19 are health workers and older adults, with pregnant women, individuals with underlying health conditions and children being the additional risk groups.<sup>5</sup> Locally, the Administration has all along been implementing various vaccination schemes to provide free or subsidized seasonal influenza vaccination for eligible groups. The schemes in place for the 2020-2021 winter season include Government Vaccination Programme, Residential Care Home Vaccination Programme, Vaccination Subsidy Scheme ("VSS") and Seasonal Influenza Vaccination School Outreach. Information on the quantities of seasonal influenza vaccines under the various schemes procured by the Department of Health from the financial year of 2017-2018 to 2020-2021 and the number of recipients and coverage rate of specific target groups under the various schemes in the 2018-2019 and 2019-2020 seasons are in **Appendices I and II**.

4. There has been keen local demand for seasonal influenza vaccines by members of the public since mid-October 2020 and the supply of the vaccines is tight in the private market. On 22 October 2020, the Administration announced

---

<sup>3</sup> Following the recommendations of the World Health Organization, the egg-based quadrivalent seasonal influenza vaccine used in the 2020-2021 season comprise an A/Guangdong-Maonan/SWL1536/2019(H1N1)pdm09-like virus, an A/Hong Kong/2671/2019(H3N2)-like virus, a B/Washington/02/2019-like virus (B/Victoria lineage), and a B/Phuket/3073/2013-like virus (B/Yamagata lineage).

<sup>4</sup> According to the Scientific Committee on Vaccine Preventable Diseases, the most common adverse events following inactivated influenza vaccine administration are local reactions including pain, redness and swelling at the site of injection and may occur at more than 10% of recipients. Non-specific systemic symptoms including fever, chills, malaise and myalgia are uncommon and reported in less than 1%. Other rare adverse events may include anaphylaxis (nine per ten million doses distributed) and Guillain-Barre syndrome. For live attenuated influenza vaccine, the most common adverse reactions following administration are nasal congestion or runny nose in all ages, fever in children and sore throat in adults. The safety in pregnant women has not been established. Children aged below five years with recurrent wheezing or persons of any age with asthma may be at increased risk of wheezing following administration. As there is a live vaccine, there is potential for transmission of the vaccine viruses to immunocompromised individuals.

<sup>5</sup> The recommendations can be accessed at [https://www.who.int/docs/default-source/immunization/sage/covid/interim-sage-influenza-vaccination-recommendations-en.pdf?Status=Temp&sfvrsn=784e2740\\_37&ua=1](https://www.who.int/docs/default-source/immunization/sage/covid/interim-sage-influenza-vaccination-recommendations-en.pdf?Status=Temp&sfvrsn=784e2740_37&ua=1).

that it would procure additional seasonal influenza vaccines, as well as provide an additional 100 000 doses of seasonal influenza vaccines (which included quadrivalent inactivated influenza vaccine and live attenuated influenza vaccine) in phases to Public-Private-Partnership Team which provided vaccination for schoolchildren and doctors enrolled in VSS requiring the vaccines. The press release is in **Appendix III**.

5. In late October 2020, there has been wide public concern over the media reports of rising number of death cases in South Korea following administration of seasonal influenza vaccines. According to media reports, the Korea Disease Control and Prevention Agency has advised that investigations so far do not find evidence of a causal association of the reported deaths with the vaccination. The Administration has advised that there is no seasonal influenza vaccines produced by Korean suppliers among the seasonal influenza vaccines registered in Hong Kong. As regards the seasonal influenza vaccines supplied to Hong Kong by the remaining supplier involved in the South Korean cases, the vaccines supplied to Hong Kong are of a different batch.

Council Business Division 2  
Legislative Council Secretariat  
9 November 2020

## Appendix I

### Quantities of seasonal influenza vaccines under the various schemes procured by the Department of Health from the financial years of 2017-2018 to 2020-2021

Year	Quantities of vaccines procured (doses)	Expenditure (\$ million)	Number of unused but expired or damaged doses
2017-2018 (Actual)	527 000	28.0	45 000
2018-2019 (Actual)	654 000	30.1	41 000
2019-2020 (Actual)	815 000*	40.8*	No available information yet (as at April 2020)
2020-2021 (Estimate)	878 000	83.0	N/A

\* Including a total of 1 700 nasal vaccine doses actually procured in 2019-2020, involving an expenditure of \$340,000.

*Source: The Administration's replies to questions on examination of Estimates of Expenditure 2020-2021 and a written question raised at the Council meeting of 21 October 2020*

## Appendix II

### Number of recipients and coverage rate of specific target groups under various vaccination schemes in the 2018-2019 and 2019-2020 seasons

Target groups	Vaccination programme/ scheme	2018/19		2019/20 (as at 1 March 2020)	
		Number of seasonal influenza vaccine recipients	Percentage of population in the age group	Number of seasonal influenza vaccine recipients	Percentage of population in the age group
Elderly aged 65 or above	Government Vaccination Programme ("GVP")	388 300	43.6%	438 300	45.1%
	Vaccination Subsidy Scheme ("VSS")	166 700		163 000	
Persons aged between 50 and 64	GVP	7 100	8.8%	7 400	10.4%
	VSS	149 700		181 100	
Children aged between 6 months and under 12	GVP	1 000	45.8%	400	57.7%
	VSS	206 900		121 800	
	Pilot Programme/ Seasonal Influenza Vaccine School Outreach	100 300		271 700	
Others <sup>^</sup>	GVP / VSS	102 200	#	110 100	#
<b>Total:</b>		<b>1 122 200</b>		<b>1 293 800</b>	

<sup>^</sup> Others include healthcare workers; poultry workers; pig farmers or pig-slaughtering industry personnel; persons with intellectual disabilities, Disability Allowance recipients, and pregnant women, etc.

# No accurate population statistics for this group for meaningful projection to be made for the uptake rate of the population concerned.

*Source: The Administration's replies to questions on examination of Estimates of Expenditure 2020-2021*

## Press Releases 22 October 2020

---

Government allocates seasonal influenza vaccines to facilitate vaccination for high risk groups

\*\*\*\*\*

In view of the keen demand for seasonal influenza vaccines (SIV) by members of the public recently and the tight supply of SIV around the world, the Government announced today (October 22) the latest arrangement to increase the overall supply of SIV and allocation arrangement of SIV, with a view to encouraging eligible high-risk persons to receive SIV as soon as practicable to prevent seasonal influenza.

A spokesperson for the Food and Health Bureau said, "Priority will be given to meet the demand for SIV from high-risk groups such that they are able to receive SIV as soon as possible through various Government vaccination programmes. In addition to the 878 000 doses of inactivated influenza vaccine earlier procured for eligible high-risk groups to receive SIV free-of-charge under the Government Vaccination Programme and 2020/21 SIV School Outreach (Free of Charge) in primary schools, we will procure additional SIV, as well as provide an additional 100 000 doses of SIV in phases to Public-Private-Partnership Team which provides vaccination for schoolchildren and doctors enrolled in the Vaccination Subsidy Scheme (VSS), which require the SIV. This facilitates high risk groups to receive vaccination early and helps relieve the tight supply in the private healthcare sectors.

The 100 000 doses of additional SIV to be provided from the Government to private healthcare sector include quadrivalent inactivated influenza vaccine and live attenuated influenza vaccine. The priority groups for allocation (not in specific orders) and relevant conditions are listed below:

1. Doctors who have enrolled in the 2020/21 SIV School Outreach (Free of Charge) and are not able to procure sufficient vaccines for students;
2. Doctors who have enrolled in the VSS, with priority given to those who have yet to be able to procure any quadrivalent influenza vaccines in the 2020/21 season; and
3. Non-governmental organisations/private doctors/clinics enrolled in the VSS coordinated by the Home Affairs Department.

Private doctors receiving SIV under the allocation arrangement must undertake not to charge extra fees when providing vaccinations to eligible persons. Moreover, private doctors or clinics with allocated SIV must sign undertakings and submit documentations to prove that the SIV allocated had been utilised according to relevant conditions. The subsidy for provision of vaccination services under the current allocation exercise is \$100 per dose, which is the same as the subsidy per dose under other Government vaccination programmes.

The Department of Health (DH) will in due course contact the doctors who have enrolled in the 2020/21 SIV School Outreach (Free of Charge) and the VSS to explain the details of the arrangement and arrange allocation exercise. The Home Affairs

Department will also separately announce relevant details later. The number of SIV to be received by the priority groups mentioned above will depend on the demand and supply. The allocation exercise is expected to be completed within December 2020. Unallocated SIV will be used in other Government vaccination programmes.

The eligible high-risk groups under the VSS are Hong Kong residents aged 50 years or above, children aged 6 months to under 12 years (or primary school students), pregnant women, persons with intellectual disabilities, persons receiving Disability Allowance and persons who are recipients of the standard rate of "100% disabled" or "requiring constant attendance" under Comprehensive Social Security Assistance Scheme. The public in particular persons of eligible groups may call the Centre for Health Protection's telephone number (2125 2125) during office hours or visit the Vaccination Schemes page for more details.

Separately, DH has been closely in touch with the vaccine suppliers and noted that a new batch of influenza vaccines of around 85 000 doses would arrive in Hong Kong in mid to late November 2020 for supply to local private healthcare sector.

The spokesperson appealed to eligible persons to receive free SIV in the public health system as far as possible. Doctors who have enrolled in the 2020/21 SIV School Outreach (Free of Charge) and VSS should reserve procured SIV for eligible high-risk persons as far as possible.

Influenza can cause serious illnesses in high-risk individuals and even healthy persons. Given that influenza vaccines are safe and effective, all persons aged six months or above, except those with known contraindications, are recommended to receive SIV for personal protection. Based on past epidemiological patterns, the winter influenza season usually starts in January. However, the exact time of arrival cannot be predicted. As it takes about two weeks to develop antibodies, members of the public are advised to receive SIV timely for protection against seasonal influenza.

In addition, according to media reports, Korea had recently reported death cases after receiving SIV, and it was reported that the vaccination programme in Korea had adopted vaccines produced by Korean suppliers. There is no SIV produced by Korean suppliers among the SIV registered in Hong Kong but DH will continue to closely monitor the situation.

Apart from vaccination, effective ways to prevent infection from seasonal influenza include maintaining good personal and environmental hygiene, in particular the proper use of surgical masks, performing hand hygiene at all times, maintaining a balanced diet, regular exercise, not smoking and avoiding alcohol consumption ([www.chp.gov.hk/en/resources/464/29.html](http://www.chp.gov.hk/en/resources/464/29.html)).

Ends/Thursday, October 22, 2020  
Issued at HKT 22:59

NNNN