

# Seasonal influenza vaccination programme country profile: Iceland

#### 2012–13 Season

#### **Background information**

Influenza immunisation policy a	nd general facts about Iceland
Volume indices of GDP per capita in 2011 and 2013 (EU- 28=100) Source: Eurostat <sup>a</sup>	115 and 119 respectively
Health costs as % of GDP 2011 Source: Eurostat <sup>b</sup>	7.6%
Total population of the country, 2011 Source: Eurostat $^{\rm c}$	315 556
Population $\geq$ 60, 2011 Source: Eurostat <sup>c</sup>	40 282 (12.8% from the total population)
Population with chronic medical conditions <65 years, 2006 Source: ECDC (based on methodology by Fleming and Eliot, $2006$ ) <sup>d</sup>	NA
Number of live births in 2011 <sup>e</sup>	4 492 (1.4% from the total population)
National seasonal influenza recommendations (e.g. age and target group recommendations and guidelines)	Recommendations available
URL link to Immunisation Guidelines for Iceland	http://www.landlaeknir.is/english/childhood-vaccination- programme/
National Action Plan (NAP) as requested by EC	Plan was developed previously and updated according EC recommendation
URL link to NAP	NA

#### NA: Not available

EUROSTAT links:

<sup>a</sup>GDP per capita 2013 (accessed 15.12.2014): <u>http://ec.europa.eu/eurostat/statistics-</u> <u>explained/index.php/GDP per capita, consumption per capita and price level indices</u>

<sup>b</sup>Health expenditures 2011(accessed 15.12.2014): <u>http://ec.europa.eu/eurostat/statistics-</u> explained/index.php/General government expenditure on social protection and health

<sup>c</sup>Total population and those > 65 years of age 2011(accessed 15.12.2014): <u>https://ec.europa.eu/CensusHub2/intermediate.do?&method=forwardResult</u>

<sup>d</sup> Population with chronic medical conditions 2006:

<u>http://www.ecdc.europa.eu/en/publications/Publications/0808 GUI Priority Risk Groups for Influenza Vaccinati</u> <u>on.pdf</u> (Fleming, D.M. and A.J. Elliot, Estimating the risk population in relation to influenza vaccination policy. 2006 May 15; 24(20):4378-85)

<sup>e</sup> Number of live births in 2011(accessed 15.12.2014): <u>http://ec.europa.eu/eurostat/tgm/table.do?tab=table&init=1&language=en&pcode=tps00111&plugin=1</u>

## Seasonal influenza vaccination recommendations and payment mechanism for vaccination

Vaccination recommendations (population g	
Overall population	No recommendation
Healthy children and adolescents	No recommendation
Older population groups: ≥60 years of age	Recommended
Chronic medical conditions	Recommended:    Pulmonary diseases,  Neurologic diseases,  Cardiovascular diseases,  Renal diseases,  Hepatic diseases,  Haematological disorders,  Haematological disorders,  Metabolic disorders,  HIV/AIDS,  Morbid obesity,  Long-term aspirin use (children <18 years).
Pregnancy-related vaccination (including post-partum women)	Recommended: - For all pregnant women at any stage during pregnancy.
	No recommendation: - Postpartum women if not vaccinated during pregnancy.
Healthcare workers	Recommended: - For all healthcare workers
Other occupational groups	Recommended:       -       Police & Fire Service;         -       Border/Immigration control/ customs;         -       Laboratory workers working in other laboratories (not medical/public health laboratories, but who may work with avian influenza viruses in the environmental/ academic sector);         -       For those working in veterinary services;         -       Poultry and swine industry workers; Families raising swine, poultry or geese.
Population groups in closed communities	Recommended: - For residents of long- term care facilities;
	No recommendation: - For prisoners; - For children in day care centres
Household contacts or carer of:	Recommended: - Immunosuppressed individuals; - Individuals with chronic medical conditions; - ≥60 years of age.
	No recommendation: - Infants <6months of age;

### Payment mechanism for vaccine and its administration for the population groups targeted by seasonal influenza vaccine

For vaccine	For administration			
na	na			
na	na			
National health service	Out of pocket			
National health service	Out of pocket			
National health service	Out of pocket			
National health service	Employer			
National health service	Out of pocket			
National health service	Employer			
National health service	Out of pocket			
	na na National health service National health service National health service National health service National health service National health service			

na: Not applicable

<sup>a</sup> No co-payment for vaccine and vaccine administration.

**National insurance scheme**: health contributions are paid to the insurance fund and then for this contribution there is a package of services received. It is not by default that you receive the services if you do not pay the insurance contributions.

**National health service**: taxes are paid by a citizen or resident of the country and this person is covered by the health service.

Out of pocket: not reimbursed, paid by receiver of vaccine.

#### Vaccination coverage rates

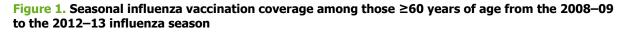
Vaccination coverage (%) in population groups targeted by seasonal influenza vaccination the from 2008–09 to the 2012–13 influenza season by method of data collection (administrative and /or survey)										
Population group					Influenz	a seasor	า			
	2008	3–09	2009	9—10	2010	0–11	201	L—12	2012	2–13
	Admin.	Surv.	Admin.	Surv.	Admin.	Surv.	Admin.	Surv.	Admin.	Surv.
Overall population	na	na	na	na	na	na	na	na	na	na
Children/adolescents	na	na	na	na	na	na	na	na	na	na
Older population groups: ≥60 years of age	21.2	na	42	na	NA	na	NA	na	44.7	na
Chronic medical conditions groups	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Pregnant women <sup>a</sup>	-	-	-	-	NA	NA	NA	NA	NA	NA
Healthcare workers	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Staff in long-stay care facilities <sup>b</sup>	-	-	-	-	-	-	NA	NA	NA	NA
Residents in long stay care facilities <sup>b</sup>	-	-	-	-	-	-	NA	NA	NA	NA

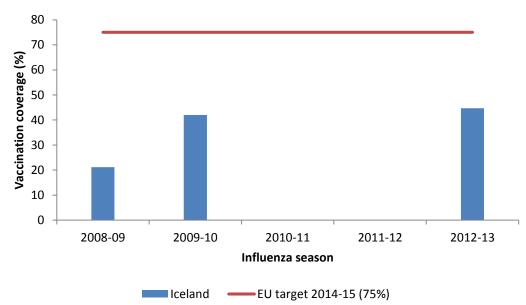
na: Not applicable

NA: Not available

<sup>a</sup> VENICE started to collect vaccination coverage data for pregnant women after the A(H1N1)pdm09 (2010-11 influenza season).

<sup>b</sup> VENICE started to collect vaccination coverage data for staff and residents in long-stay care facilities for the influenza season 2011-12.





## Methods to monitor vaccination coverage, safety and effectiveness

Monitoring of vaccination coverage during the 2012–13 influenza season						
Method used to monitor influenza vaccination coverage						
Administrative m	nethod only					

Method used (administrative, survey) to monitor vaccination coverage by population group				
Administrative	Survey			
Adults aged ≥60 years old na				

na: Not applicable

Details on administrative method used (medical records vs. immunisation registry; manual vs. electronic) by population group					
Medical records Immunisation registry					
Manual	Electronic	Manual	Electronic		
No	No	No	Yes		

Numerator assessment				
Pharmaceutical data	Administrative data	Frequency of numerator assessment		
Vaccine distribution data from national purchaser-entire population	Aggregate collection of number of vaccines administered; Aggregate collection of number of vaccines distributed (national purchaser)	Annually: May each year		

Denominator assessment by population groups and data source				
Population group	Data source for population group			
Entire population	Used. From the National Consensus			
Children and adolescents	na			
Adults >60 years	Used			
Individuals with medical/risk conditions (clinical risk groups)	Not used			
Pregnant women	Not used			
Health care workers	Not used			
Essential public sector workers	Not used			
Prisoners	Not used			
Residents of long term care institutions	Not used			
Educational institutions	Not used			
Other, please specify	Not used			

na: Not applicable

Details for survey method used for the 2012–13 influenza season				
Type of the survey         Survey mode         Sampling strategy         Sample size				
na	na	na	na	

na: Not applicable

Vaccine safety monitoring (adverse events following immunisation AEFV)					
Data collected at the national and at the regional level	Data linkage with immunisation registry	Details collected	Status of reporting	AEFV reported to	
Yes	Possible	Yes, case based data including age, sex and suspected symptoms should be reported		Medical Agency	

Monitoring of influenza vaccine break-through <sup>a</sup> infections in vaccinated individuals				
Data collected	Data linkage with immunisation registry	Details collected		
There is such a system	Possible	Case based data should be reported to the national level		

<sup>a</sup> Break-through infection is defined as laboratory-confirmed influenza infection >14 days after seasonal influenza vaccination in the current season (i.e. vaccine failure).

### Vaccine procurement and delivery

Influenza vaccine procurement and delivery, 2012–13 influenza season				
Number of doses				
Purchased	Distributed	Used		
60 000	58 649	NK		

NK: Not known

Type of vaccine/Product Name	Target groups		
Trivalent inactivated non-adjuvanted vaccines (TIV)			
Used			
Sanofi Pasteur	Older adults (e.g. ≥60years); Those with medical condition/s; Pregnant women; Residents of long stay care facilities; Health Care Workers; Other occupational groups		
Trivalent inact	tivated adjuvanted vaccines (aTIV)		
Not used			
Trivalent live	e attenuated nasal vaccine (LAIV)		
Not used			
Quadrivalent	t attenuated nasal vaccine (LAIV)		
Not used			
Quadrivalent inac	tivated non-adjuvanted vaccine (QIV)		
Not used			

### Promoting seasonal influenza vaccination

Promoting seasonal influenza vaccination during the 2012–13 influenza season				
Promotion activities with the general public and healthcare workers	Source of information (if yes)			
General public				
Yes	Radio; TV; Newspapers; Website			
Population over 60				
Yes	Radio; TV; Newspapers; Website			
Pregnar	nt women			
Yes	Radio; TV; Newspapers; Website			
.Chronic medical conditions				
Yes	Radio; TV; Newspapers; Website			
Healthca	re workers			
Yes	Radio; TV; Newspapers; Website; Professional medical societies; National medical publications			

### Use of antiviral agents for treatment and chemoprophylaxis of influenza

#### Recommendations and/or guidelines (policy document) on antiviral use

There are no such recommendations. Individual medical decision

Use of antiviral agents for treatment and chemoprophylaxis of influen season	za during the 2012–13 influenza			
Use of antivirals for <u>treatment</u> for in-patients and out-patients who a influenza complications	are at higher risk of developing			
For in-patients who:				
<ul> <li>have severe, complicated influenza-like illness (ILI);</li> <li>have progressive influenza-like illness;</li> <li>require hospitalisation due to influenza-like illness.</li> </ul>	na			
For out-patients who are at higher risk of developing influenza complications or medical conditions:	n the basis of their age or underlying			
<ul> <li>Children &lt; 2 years;</li> <li>Children &lt; 5 years;</li> <li>Adults aged ≥60 years;</li> <li>Individuals belonging to risk groups.</li> <li>Women who are pregnant or postpartum (within 6 weeks after delivery).</li> <li>Residents of nursing homes and other chronic-care facilities.</li> </ul>	na			
Use of antivirals for <u>post-exposure</u> prophy	laxis			
For family or other close contacts of a person at higher risk for influenza complications who have not been vaccinated with influenza vaccine at the time of exposure;	na			
For unvaccinated healthcare workers with occupational exposure and who did not use personal protective equipment at the time of exposure	na			
Use of antivirals for pre-exposure prophyl	axis			
For individuals who are at high risk (e.g. severely immunosuppressed patients) for influenza-related complications who cannot otherwise be protected during times when a high risk for exposure exists	na			
Use of antivirals for <u>control of</u> influenza <u>out</u> l	<u>preaks</u>			
For individuals in long-term care facilities/care for immunocompromised individuals if not vaccinated or if the circulating influenza strain does not match the vaccine strains	na			
For unvaccinated healthcare staff who provide care to individuals at high risk of developing complications in long-term care facilities/ care for mmunocompromised patients if not vaccinated or if the circulating influenza strain does not match the vaccine strains	na			
For all health care staff regardless of whether they received an influenza vaccination if the circulating influenza strain does not match the vaccine strains	na			
Prisoners	na			
Educational institutions	na			
Existence of antiviral resistance surveillance system				
Antiviral resistance surveillance system	There is no antiviral resistance surveillance system in place			

Country profiles are based on the <u>Seasonal Influenza Vaccination in Europe</u> report produced by the European Centre for Disease Prevention and Control (ECDC) and the Vaccine European New Integrated Collaboration Effort III (VENICE III). The data are from the seasonal influenza vaccination survey for 2012–13 season in EU/EEA countries. During the validation process in June 2015, minor changes were introduced in some country profiles. Therefore, data may be different to those available in the report.