The Virtual Immunization Communication (VIC) Network is a project of the National Public Health Information Coalition (NPHIC) and the California Immunization Coalition, funded through a cooperative agreement with the Centers for Disease Control and Prevention.
What’s New With the Flu?

CDC's Recommendations and Communication Plans for the 2015-2016 Influenza Season

Webinar Objectives

• Summarize the 2014-2015 flu season
• Summarize the number of deaths and hospitalizations averted in previous flu seasons
• Provide an update on Influenza vaccination recommendations, formulations and supply for the 2015-2016 flu season
• Highlight key communication considerations and planned strategies for the 2015-2016 flu season
A nationwide ‘virtual’ immunization community of health educators, public health communicators and others who promote immunizations.
Polling Questions
Questions for Presenters?

• Ask questions using the Q&A window

• This webinar is being recorded

• Replays will be available
Alicia M. Fry, MD, MPH
Medical Officer and Team Lead, Influenza Prevention and Control Team, Epidemiology and Prevention Branch, Influenza Division, National Center for Immunization and Respiratory Diseases
Review of 2014-15 influenza season; Estimating vaccine averted burden; and Summary of 2015-16 influenza vaccine recommendations

VIC
August 2015

Alicia Fry, MD, MPH
Epidemiology and Prevention Branch
Influenza Division
National Center for Immunization and Respiratory Diseases
CDC
SUMMARY OF 2014-15 INFLUENZA SEASON
Lab-confirmed influenza hospitalization rates by season, FluSURV-Net

http://www.cdc.gov/flu/weekly/fluviewinteractive.htm

**Preliminary unadjusted results**

- H3N2 viruses were predominant
- Highest hospitalization rates, especially among elderly since 2010-11
- Most H3N2 viruses were drifted from vaccine H3N2
  - No vaccine effectiveness against drifted H3N2 virus infection-associated ARI outpatient visits
  - Moderate vaccine effectiveness against less common viruses: vaccine-like H3N2 and B viruses
CDC Influenza Review

ESTIMATING REDUCTIONS IN BURDEN OF DISEASE DUE TO VACCINATION, 2010-11 THROUGH 2013-14
Steps to Estimate Reductions in Burden of Disease due to Vaccination

1. Estimate observed annual burden of influenza-associated outcomes
2. Estimate observed risk of influenza-associated outcomes among susceptible individuals
   - Using data on annual vaccine coverage and vaccine effectiveness
3. Calculate expected burden of influenza-associated outcomes in population with no vaccination
4. Calculate difference in outcomes attributable to vaccination program

Foppa, I et al 2015 Vaccine.33(26):3003-9
Burden of Disease, 2010-11 through 2013-14

- Since 2010-11, influenza has led annually to:
  - 19 – 35 million cases of influenza respiratory disease
  - 3.4 – 15.2 million clinic visits
  - 110,000 – 592,000 hospitalizations
  - 5,300 – 39,000 deaths

Foppa, I et al 2015 Vaccine.33(26):3003-9
Vaccine Coverage

![Graph showing vaccine coverage trends by age group over multiple years.](http://www.cdc.gov/flu/fluvoxview/reports/reporti1314/trends/index.htm)
Vaccine Effectiveness

- Varies by age group and season, 2010 – 2014*:
  - 6 mos – 4 yrs: 47 – 68%
  - 5 – 19 yrs: 46 – 61%
  - 20 – 64 yrs: 50 – 52%
  - 65+ yrs: 32 – 39%

*US Flu VE network, annual estimates
Disease Averted by Vaccination, 2010-11 through 2013-14

• From 2010-11 through 2013-14, influenza vaccination has averted annually:
  ▪ 1.6 – 7.2 million cases of influenza respiratory disease
  ▪ 750,000 – 3.2 million clinic visits
  ▪ 30,000 – 120,000 hospitalizations
  ▪ 2,200 – 16,000 deaths
From 2005-06 through 2013-14

Cases Averted by Vaccination

Deaths Averted by Vaccination: 40,127 (25694,59210)
the benefits of flu vaccination 2013-2014

The estimated number of influenza-associated illnesses prevented by flu vaccination during the 2013-2014 season: 7.2 million

equal to the number of people that could form a line from Maine to Oregon.

The estimated number of flu-associated medical visits prevented by vaccination during the 2013-2014 season: 3.1 million

more than the population of the city of Chicago.

The estimated number of flu hospitalizations prevented during the 2013-2014 season: 90,000

enough to fill Madison Square Garden more than 4 times.

get vaccinated


www.cdc.gov/flu
Conclusion

- Substantial annual averted disease burden from the influenza vaccination program
  - Varies by VE and annual disease burden
- Program improvements will be made by
  - Increasing coverage in non-elderly persons
  - Improving effectiveness of vaccines, especially in elderly persons
Recommendations for use of influenza vaccine in the US, 2015-16

Annual influenza vaccination is recommended for all persons aged 6 months and older

Don’t delay to procure a specific vaccine preparation

New and/or revised information:

- Influenza vaccine viruses for 2015-16
- Vaccine products expected to be available
- Minor change in pediatric dosing algorithm
- Recommendations regarding use of LAIV and IIV for young children where either is available and appropriate

http://www.cdc.gov/flu/professionals/acip/index.htm
For 2015-16, recommended a new H3N2 and B component compared to the 2014-15 Northern Hemisphere vaccine:

- an A/California/7/2009 (H1N1)pdm09-like virus
- an A/Switzerland/9715293/2013 (H3N2)-like virus
- a B/Phuket/3073/2013-like virus (Yamagata)
- for quadrivalent vaccines, these viruses and a B/Brisbane/60/2008-like virus (Victoria)
Vaccine products

- ACIP does not express a preference for use of any particular product

- Many vaccine products:
  - Trivalent, quadrivalent, inactivated, live-attenuated, recombinant, high dose, cell-culture based, etc.

- New and updated product approvals:
  - Afluria – IIV3, IM via Stratis needle-free injector, 18-64 yrs
  - Flublok – expanded age ≥18 years for recombinant vaccine (RIV3)
  - Fluzone –intradermal IIV vaccine now quadrivalent (IIV4)
Pediatric algorithm

Has the child received ≥2 total doses of trivalent or quadrivalent influenza vaccine before July 1, 2015*

Yes

1 dose of 2015–16 influenza vaccine

No or don’t know

2 doses† of 2015–16 influenza vaccine

* The two doses need not have been received during the same season or consecutive seasons.
† Doses should be administered ≥4 weeks apart.
Use of LAIV and IIV for Healthy Children aged 2 through 8 Years

- For healthy children aged 2-8 years who have no contraindications or precautions, either LAIV or IIV is an appropriate option
  - Did not renew preferential recommendation for LAIV for healthy children aged 2-8 years

- Don’t delay vaccination to procure specific vaccine preparation
Conclusions

- Annual influenza vaccination is recommended for all persons aged 6 months and older

- Many vaccine options

- ACIP does not express a preference for use of any particular product
  - Don’t delay to procure a specific vaccine preparation
Thank You

Acknowledgements:

• Joe Bresee
• Carrie Reed
• Lisa Grohskopf
• Brendan Flannery
• Jessie Clippard
• Lynette Brammer
• Emily Cramer
Cindy Alvarez
Health Communication Specialist
National Center for Immunization and Respiratory Diseases at the Centers for Disease Control and Prevention (CDC)
CDC’s Communication Campaign Plans & Strategies for the 2015-16 Influenza Season

Cindy Alvarez
Health Communication Specialist
National Center for Immunization and Respiratory Diseases (NCIRD)

VICNetwork Webinar
August 19, 2015
Outline

- Communication goals & objectives
- Target populations
- Campaign strategies
- Campaign elements
Overall Communication Goals

Create and sustain positive social norms that encourage flu vaccination, foster flu vaccination efforts, and achieve continued increases in flu vaccination coverage over time

Communication Objectives

• Maintain and increase awareness of the universal flu vaccination recommendation; everyone 6 months and older should be vaccinated
• Foster knowledge and favorable beliefs regarding influenza vaccine and vaccination recommendations (e.g., flu vaccination is best way to protect yourself and those you love)
• Maintain and extend confidence in flu vaccine safety
• Foster flu vaccination among Hispanics/Latinos, African-Americans, and other minority populations
• Emphasize the importance of a provider flu vaccine recommendation
Take 3 Steps to Fight Flu

1. CDC recommends a yearly flu vaccine as the best way to protect against flu.
2. Everyday preventative actions like covering your cough, staying away from people who are sick and washing your hands often can help prevent the spread of respiratory viruses like the flu.
3. Influenza antiviral medications are an important second line of defense against the flu.
Key Communication Considerations for the 2015-16 Season

- Vaccine Options
- ACIP Recommendations
- Vaccine Effectiveness
- Susceptibility/Threat
- Safety/Concerns
Flu Vaccine Effectiveness

*Last season’s visible messages included.* . . .

**November:** No measurable effectiveness for LAIV against influenza A (H1N1) among children during 2013-2014 influenza season

**December:** Influenza A (H3N2) viruses have been most common and most circulating H3N2 viruses are different from the H3N2 vaccine virus

**January:** Early estimates of VE indicate protection from flu vaccination reduced this season

**March:** Updated VE estimates indicate flu vaccine offered little protection against drifted H3N2 viruses
**Campaign Strategy: Vaccine Effectiveness**

- Address vaccine effectiveness directly, early, and as needed, during season
- Communicate the variability and unpredictability of flu
- Acknowledge that flu vaccination is not a perfect tool, but it is the best way to protect against flu infection
- Communicate the benefits of flu vaccination
  - Flu vaccination can reduce flu illnesses, doctors’ visits, missed work and school due to flu, as well as prevent flu-related hospitalizations and deaths.
  - Prevented more than 40,000 flu-associated deaths in the U.S. during a 9-year period (2005-06 through 2013-14)
  - Prevented an est. 7.2 million flu-associated illnesses and 90,000 flu hospitalizations during the 2013-14 flu season
  
- Flu vaccination may make your illness milder if you do get sick.
Influenza Vaccine Effectiveness
Key Message Concepts

- Two of the vaccine components for this season’s flu vaccines were updated to match with the viruses experts expect to be most common during the upcoming season.
  - Compared to the 2014-15 flu vaccines, the 2015-16 vaccines have different influenza A (H3) and influenza B (Yamagata lineage) components.

- Last season was very unusual – two things happened that usually don’t happen.
  - One strain of influenza caused almost all the cases of flu.
  - The strain that caused most of the cases was very different from the strain in the vaccine – and that’s because that flu virus changed and quickly became predominant.

- Based on the information we have now, we’re optimistic that this season’s flu vaccines will provide good protection against circulating viruses.
  - Laboratory data to date indicates that most circulating viruses are still like the vaccine viruses selected for this season’s vaccine.
Campaign Strategy: Address Susceptibility/Threat

• Continue to increase awareness of CDC’s universal recommendation
• Communicate that anyone can get the flu and that influenza can be serious
  • Make vaccination personally relevant
  • Severe illness can happen even for those who are “healthy and young”
• Highlight other potential “costs” of influenza
• Emphasize that flu vaccine can help protect you and those around you from getting flu
Campaign Strategy: Address Safety/Concerns

- A very safe vaccine – millions of doses given every year
- Emphasize that flu vaccine cannot cause influenza
- Recognize that people may experience “side effects” (e.g., slight fever) after influenza vaccination and explain why
- Put side effects of vaccination into context with the potential risks and outcomes of influenza
- Utilize partnerships with healthcare providers and trusted messengers to re-affirm and reiterate messages above
Campaign Target Populations

Everyone 6 months and older

Tailoring efforts to:
- People at high risk for developing flu-related complications
  - Adults 65 years and older
  - Pregnant women
  - (Parents of) young children
  - People with chronic medical conditions
- People who live with or care for those at high risk
  - Health care professionals
- Healthy young/middle-age adults
- Hispanic, African American, AI/AN

1. Who needs a flu vaccine?
   a) You
   b) You
   c) You
   d) All of the above

Even healthy people can get the flu, and it can be serious.

Everyone 6 months and older should get a flu vaccine. This means you.

This season, protect yourself—and those around you—by getting a flu vaccine.

For more information, visit www.cdc.gov/flu
Core Campaign Elements

- Research and evaluation
- Traditional media
  - Television and radio
  - Earned and paid media
- Multi-sector partnerships
  - National
  - Grassroots
- Digital media
  - Earned and paid
- Education and outreach to healthcare professionals
- Resources
Campaign Element: Research

- **In-depth interviews with physicians**
  - KABs regarding vaccine effectiveness
  - Preferential recommendations
  - Treatment for flu illness

- **Surveys with Hispanic/ Latino physician’s**
  - KABs regarding influenza and flu vaccination
  - How they discuss and recommend flu vaccination to their adult Hispanic patients
Campaign Element: Traditional Media Events

National Immunization Awareness Month (August)

NFID Influenza Vaccination Kick-Off (September 17)
  Radio Media Tour (September 17-18)
  Twitter chat (September 29)

National Influenza Vaccination Week (NIVW) (December 6-12)

CDC Director Dr. Thomas Frieden at the 2014 NFID flu vaccination press event
Campaign Element: Diverse Partnerships

- Multi-sector **national** partnerships to reach **general** audiences
  - Represents business, health, retail, national organizations, sports organizations, universities, traditional & digital media, and more

- Grassroots & community partnerships to reach **minority** populations
  - National Influenza Vaccination Disparities Partnership (NIVDP) formed in 2011
  - Represents state/local health departments, community- & faith-based organizations, pharmacies and other vaccinators, consulates/embassies, ethnic media outlets, insurance providers, and more
Campaign Element: Partnership Engagement

- Share CDC key points, weekly updates
- Periodic calls & presentations
- Conduct stakeholder workshops, listening sessions
- Provide access to a suite of both print and digital offerings that partners can use
- Increase visibility of partners’ influenza vaccine promotion activities
- Engage partner participation during NIVW
- Provide CDC influenza subject matter experts
- Web page tailored for partners
- Build capacity and sustainability
Campaign Element: Digital Media

- Publisher outreach, e.g., The Motherhood
- Interactive digital timeline #VaxWithMe
- Social gaming
- Smart phone/iPad applications
- Twitter chats
- CDC Flu Twitter (@CDCFlu)
- Facebook Forums
- Animated GIF images
- CDC Digital Ambassadors
Campaign Element: Education and Outreach to Healthcare Professionals

- Medscape commentaries
  www.cdc.gov/flu/freeresources/media-medscape.htm

- Healthcare professionals landing page:
  www.cdc.gov/flu/professionals

  Includes:
  - Toolkit for LTC Employers
  - Vaccination Information
  - Clinical Information
  - Patient Education
Campaign Element: Partner Resources

- Features success stories
- Photos from promotional activities
- Campaign Highlights
- New & Popular Tools
- Staying Connected
- Media
- NIVW
- What’s New/Updated
- How to Become a Partner

http://www.cdc.gov/flu/partners/index.htm
Campaign Element: Free Resources

Seasonal Influenza Vaccination Campaign Resources

For the General Public

These materials can help audiences understand the facts about seasonal influenza, the importance of vaccination, and how they can help prevent it. Whether you have purchased a store-bought flu kit or a vaccine for your child, these materials will help you and your family stay healthy.

For community health professionals, the following resources are available:

- Visit the CDC's website at www.cdc.gov/flu/freeresources/secflu.html
- Order free materials at www.cdc.gov/flu/freeresources/fluinfo.htm
- Order free materials at www.cdc.gov/flu/freeresources/fluinfo.htm
- Order free materials at www.cdc.gov/flu/freeresources/fluinfo.htm

These materials can be used to educate local and state health officials about influenza, the importance of vaccination, and how to prevent the spread of influenza in your community.

- Visit the CDC's website at www.cdc.gov/flu/freeresources/secflu.html
- Order free materials at www.cdc.gov/flu/freeresources/fluinfo.htm
- Order free materials at www.cdc.gov/flu/freeresources/fluinfo.htm
- Order free materials at www.cdc.gov/flu/freeresources/fluinfo.htm

Multicultural Materials

For multicultural audiences, the following materials are available:

- Visit the CDC's website at www.cdc.gov/flu/freeresources/secflu.html
- Order free materials at www.cdc.gov/flu/freeresources/fluinfo.htm
- Order free materials at www.cdc.gov/flu/freeresources/fluinfo.htm
- Order free materials at www.cdc.gov/flu/freeresources/fluinfo.htm

Flyers, Handouts, and Brochures

Make it easy for audiences to understand the facts about flu and vaccination with flyers, handouts, and brochures. Materials are designed to explain the steps needed to get vaccinated, and they are available in English and Spanish.

- Visit the CDC's website at www.cdc.gov/flu/freeresources/secflu.html
- Order free materials at www.cdc.gov/flu/freeresources/fluinfo.htm
- Order free materials at www.cdc.gov/flu/freeresources/fluinfo.htm
- Order free materials at www.cdc.gov/flu/freeresources/fluinfo.htm

Videos, PSAs, and Podcasts

Bring the flu and vaccination with you on-the-go with videos, podcasts, and other digital media. These materials can be shared on social media, websites, and other platforms to get the message out.

- Visit the CDC's website at www.cdc.gov/flu/freeresources/secflu.html
- Order free materials at www.cdc.gov/flu/freeresources/fluinfo.htm
- Order free materials at www.cdc.gov/flu/freeresources/fluinfo.htm
- Order free materials at www.cdc.gov/flu/freeresources/fluinfo.htm

For more information, please contact us at fluinfo@cdc.gov

www.cdc.gov/flu/freeresources
Thanks!

Please direct flu or flu vaccine-related questions to: FluInbox@cdc.gov

For more information please contact Centers for Disease Control and Prevention

1600 Clifton Road NE, Atlanta, GA 30333
Telephone: 1-800-CDC-INFO (232-4636)/TTY: 1-888-232-6348
Visit: www.cdc.gov | Contact CDC at: 1-800-CDC-INFO or www.cdc.gov/info

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.
Q & A Session
Please Complete Online Evaluation!
National Immunization Awareness Month
Connect with the VICNetwork…

e-mail: info@VICnetwork.org

Website
www.VICNetwork.org
Resources

Centers for Disease Control and Prevention
www.cdc.gov/vaccines

National Public Health Information Coalition
www.nphic.org
Thank you for your support and your participation!
Tweet and Follow

Twitter  @VICNetwork

Facebook  VICNetwork