



**(April 27, 2020-Toronto, ON):** The [Canadian Association for Retired Persons \(CARP\)](http://www.carp.ca) implores all provincial governments to ensure that the high-dose flu vaccine is publicly funded for as many seniors as possible, in preparation for this fall.

According to FluWatch, the 2018-19 season saw an annual seasonal hospitalization rate that was above average compared to the previous five seasons. Adults 65 years of age and older had the highest overall hospitalization rate (60%), and the highest proportion of deaths was reported among adults over 65 years of age (66%).

“With all that remains unknown as we continue the battle against COVID-19, we must also be prepared for what we know is coming,” says Marissa Lennox, Chief Policy Officer at CARP. “We should be safeguarding our seniors as best we can, and that includes funded and easy access to the best-in-class options for both flu and pneumonia.”

Given the rising concern in long-term care and residential care facilities, CARP also asks that all seniors living in long-term care or residential care settings should have annual immunization clinics to administer high-dose flu and pneumonia vaccine protections. “It’s just common sense. We know that we are living longer. Seasonal flu and pneumonia claim a disproportionate number of senior lives each year, and can have a greater risk of transmission in these settings.”

FluWatch reported that 62% of reported outbreaks were in long-term care facilities, and a further 22% were in other settings (e.g. retirement homes, correctional facilities, etc.). Certain provinces, like BC for example, do not have any programs that publicly fund high-dose flu vaccines for older adults, including for those living in long-term care homes.

Lennox states, “If you are waiting for a flu vaccine that’s 100% effective, you’re putting lives at risk every year.” FluWatch also reported that A(H1N1) was the predominant influenza strain in the earlier part of the season (October to February), followed by a smaller wave of A(H3N2) circulation (March to April). Overall, A(H1N1) was the predominant strain nationally, and vaccine effectiveness studies in both the outpatient setting and adult inpatient setting observed good protection against A(H1N1). Protection was minimal against A(H3N2).

By contrast, in Ontario, high-dose flu vaccines are covered for all older adults over 65 years of age, but only through a physician or via public health. Lennox adds, “We certainly applaud the Ontario government for being a leader in the fight against influenza for seniors, but ask that they ensure that the vaccines are as accessible as possible. If we are in for another fight this fall with Coronavirus and practicing social distancing as we are today, we want to be sure that people get the support and the baseline protections they need, without barriers to access.”



Canada's National Advisory Committee on Immunization (NACI) [recommends](#) that at an individual level, the high-dose flu vaccine—which contains four times the standard amount of antigen—should be offered over the standard dose flu vaccine to adults 65 years of age and older.

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