## **VACCINATION FOR PATIENTS** WITH CHRONIC CONDITIONS

VACCINE

#### **HOW DOES VACCINATION** WORK?

→ Vaccination is the use of vaccines to protect from infectious illnesses. The term originates in Latin (vacca = cow). The first vaccinations used a mild disease, cowpox, to produce immunity against a very serious disease, smallpox. Today, vaccines exist to prevent a great number of diseases.

Vaccines are medicinal products that contain weakened or dead forms of the disease-causing organism, enough to get the body's defensive system to react and produce immunity, but without causing the disease.

→ Immunisation is the process of becoming immune to (protected against) a disease. It can happen by having the disease, or thanks to a vaccine. Once a person's immune system is triggered, it will remember the disease-causing organism.

#### WHY IS IT IMPORTANT THAT MOST **PEOPLE ARE VACCINATED?**

Vaccination protects not only the person who is vaccinated, but also other people, through community immunity (herd immunity). When enough people are vaccinated, herd immunity starts protecting those people who are not vaccinated, for example some people with weakened immune systems.

~%

The least level of vaccination in the population needed (for some diseases even 95%) to produce community immunity. If the level falls below, protection is weakened.

### THE IMPORTANCE OF VACCINATION FOR **PATIENTS WITH CHRONIC CONDITIONS**

It is particularly important for patients to be vaccinated because their immune system is weaker and they are more likely to develop complications if they get sick with vaccine-preventable diseases. Each country has different recommendations for vaccination for patients. Common recommendations for patients with chronic conditions may include:



vaccination

every year







Pneumococcal vaccination

**Hepatitis B** vaccination



Tetanus (Td) vaccination or Tetanus, diphtheria and pertussis (Tdap)

 infected • unvaccinated

vaccinated

Vaccination is a weapon that people with chronic diseases can use to protect themselves from common viruses, because it reduces the risk of complications. For example, when children with asthma get the flu, they have a higher risk of flare-ups and breathing difficulties that can lead them to miss school or to hospitalisation. In the case of COPD, exacerbations caused by an infection lead to a permanent worsening of their disease, and recovering can take up to half-a-year.



Caroline Heilpern, **European Federation of Allergy and Airways** Diseases Patients' Associations (EFA)



#### THE RISK OF NOT BEING VACCINATED

Patients sometimes underestimate the risk of getting a disease – for example influenza – and not realise that not being vaccinated can result in a serious risk to their health. The story of Dominic, patient from Belgium living with Diabetes Type 2, shows how this can happen.

Dominic is an active person who does a lot of sports and lives a healthy life. He is also a doctor and knows about the importance of vaccination. Normally he gets the seasonal influenza vaccination every year as it is obligatory for his work at the hospital. Last year he missed the date of the vaccination, but didn't worry too much because he felt strong and assumed influenza wasn't a big deal. His assumption was wrong. Dominic fell sick with the flu in spring, and the disease almost killed him. He believes he is lucky to be alive and regrets having been negligent with his vaccination.

## WHAT IS THE ROLE OF THE EU?

Vaccines, like other medicinal products, are authorised and regulated at EU level. The European Medicines Agency (EMA) regulates vaccines and monitors their safety. Before a new vaccine is put on the market it undergoes assessments for quality, efficacy and safety. The EMA also has scientific guidelines on vaccines development.

→ The World Health Organization (WHO) Europe provides guidance to countries, for example evidence-based policy recommendations; position papers with vaccine and immunisation recommendations; and tables for routine immunisation. National vaccination policies, schedules, legal rules and recommendations are set by EU Member States and are not regulated at EU level.

The European Commission, the European Centre for Disease Control and Prevention (ECDC), and various scientific bodies research the latest evidence, monitor trends, and share evidence-based information for policymakers. The ECDC is a source of data and evidence-based information, but does not regulate or make policy. The ECDC supports the European Immunisation Week that takes place every year in April.

# Find out more about our work on vaccination!

European Patients Forum

European Patients' Forum (EPF) Chaussée d'Etterbeek 180 1040 Brussels, Belgium Phone : + 32 2 280 23 34 info@eu-patient.eu www.eu-patient.eu

- fb.com/europeanpatientsforum
  @eupatientsforum
- www.eu-patient.eu/blog

This document was developed by the European Patients' Forum with the support of an unrestricted grant from Vaccines Europe.



DISCLAIMER: The information on this factsheet is not intended as medical advice. Please speak to a healthcare professional if you have any concerns relating to a health condition, diagnosis or treatment.

## **RECENT EU INITIATIVES**



The <u>Commission's Communication</u> and <u>proposal for a Council recommendation</u> on vaccine-preventable diseases contain recommendations for stronger cooperation, including strategies to counter hesitancy.



The **Joint Action on vaccination (EU-JAV)** involves 20 EU Member States, ECDC, EMA, WHO and many stakeholder organisations. EPF is involved in the EU-JAV.



The **European Parliament's Resolution** on vaccination rates asks Member States and the Commission to take action, including providing information for patients.