

HZ Event in the European Parliament, 5 December 2013

“The role of adult vaccination in the context of an ageing Europe: The example of herpes zoster”

Hosted by MEPs

Heinz K. Becker, Marian Harkin, Thomas Mann Rebecca Taylor

Summary of the event

MEPs Heinz K. Becker (EPP, Austria), Marian Harkin (ALDE, Ireland), Thomas Mann (EPP, Germany) and Rebecca Taylor (ALDE, United Kingdom) lead an EU level initiative to develop policy recommendations on adult vaccination and active and healthy ageing. Taking up the examples of prevention of herpes zoster as a serious but preventable adult disease, the aim of these recommendations were to establish a consensus between leading European experts on adult vaccination against herpes zoster on how vaccination should be used to prevent such a disease in Europe and consequently contribute to keeping older citizens active and healthy longer.

On 5th December, independent experts from several Member States were brought together to have a high level debate on adult vaccination taking up the example of herpes zoster disease. During this event, the policy recommendations working paper developed by the group of experts was presented and launched. The meeting was organised in cooperation with Sanofi Pasteur MSD.

Forewords

Heinz K. Becker, MEP (EPP, Austria)



As one of co-hosts of the meeting, MEP Mr. Becker opened the meeting with welcome words. He underlined that active and healthy ageing always was an important concern to him, not only as an MEP but also as secretary general of the Austrian Senior Citizens' Association, an organisation with 300,000 members. Together with its Socialist & Democratic partner, which gathers another 350,000 members, both organisations reach nearly half of all retired people in Austria. Mr. Becker also stressed that prevention had become a priority in today's health systems in Europe and that also the European Parliament needed to put pressure on Member States on

this issue. He explained that this objective should be one of being proactive instead of reactive. Prevention would contribute to better quality of life and lower the financial burden in national budgets.

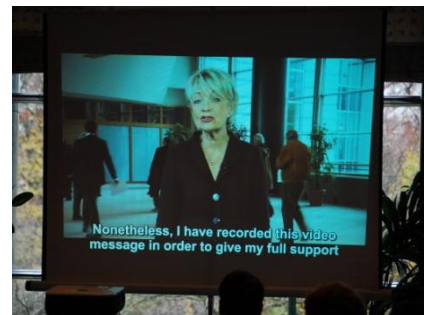
Marian Harkin, MEP (ALDE, Ireland)



Marian Harkin started her speech underlining that as an MEP she had decided to dedicate an important part of her parliamentary work to quality of life as well as health and care for the elderly. As the founder of the European Parliament “Interest Group for Carers”, she decided to address the importance of care and of keeping the ageing population independent. Marian Harkin noted that vaccination was a useful solution for better prevention and thus enabling active and healthy ageing. She also made mention of the benefits of prevention in terms of quality of life as well as in terms of health budget savings. She welcomed the policy recommendations developed by the group of experts and wished for this work to be used by policymakers at both EU and national levels.

Françoise Grossetête, MEP (EPP, France) – Video-message

In a video-message, Françoise Grossetête urged to better take into consideration the large cohorts of baby-boomers that started to retire, which she referred to as a “grey tsunami”. She explained that this demographic situation should be seen as an opportunity for the future, not only to adapt the ageing of European population but also to create new and innovative sectors to restore European competitiveness. Françoise Grossetête explained that health and health prevention are too often considered as a cost and not sufficiently as an investment for the future. She lastly welcomed this event and the expert policy recommendations on adult vaccination as being step forwards in facilitating a better active and healthy ageing of Europeans, in particular with regard to combating herpes zoster.



PART I – Adult vaccination: A preventive solution contributing to active and healthy ageing

Dr. Renate Heinisch, Member of the EESC

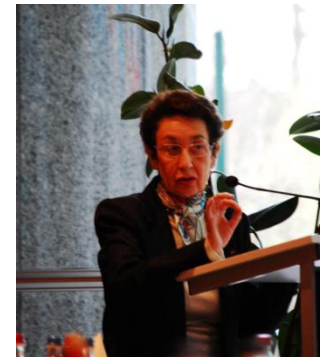


Dr. Heinisch addressed the issue of active and healthy ageing as societal one that also refers to solidarity between generations, older workers, care of the elderly and lifelong learning. As a former MEP, she explained that she considered ageing of European population as the most important and pressing issue of our time. Dr. Heinisch also stressed that the image of age and ageing should be changed because 60 to 100 was not a homogenous group of society. She then

referred to the European Year 2012 for Active and Healthy Ageing, which followed the Commission request to the EESC in 2010 for an opinion on the ageing population and welfare. Dr. Heinisch was the rapporteur for this opinion and she said this was where the term “age-related diseases” was developed. She further explained the Commission’s strategy of 2009, whereby governments had already at that time a short window of opportunity to implement measures for an ageing population. Lastly, she explained that the organisation she represents at the EESC (BAGSO) had recently published a Guide for Vaccination and that she would work on the inclusion of herpes zoster in new guidance documents. She referred to the policy recommendations on adult vaccination presented at this meeting as the start for a new policy that could be created at EU level and in the Member States.

Prof. Françoise Forette, Director of the International Longevity Centre (France)

Prof. Forette underlined that prevention is increasingly seen by healthcare systems globally as a lifelong perspective on the promotion of health and activity. There are three categories of elderly people, she stressed: those needing long term care (“dependent”); those who are frail (less than 10%); and those who are healthy and independent (more than 80%). Addressing the needs of the third category, she emphasized that it needs increased health literacy about risk factors and access to prevention, as well as social activity. Access to prevention is linked to one’s level of education, as well as one’s workplace. In this respect, organisations that deploy prevention programmes benefit from a healthier workforce. Secondly, she referred to the objective of longevity/activity which is dependant on mental stimulation. As retirement has been found to lead to a reduction in mental functions, and thereby an increased risk of dementia, mental stimulation is best achieved, she explained, by continued professional activities. For example, the difference between retiring at 60 or 65 is a 15% reduction in the risk of dementia. Lastly, she addressed the frail group of elderly people, which is subject to increased vulnerability. The goal is to prevent the conversion of frailty to dependency. This is achieved through systematic screening. Moreover, vaccinations have played a major role in preventing frailty transforming into dependency. Therefore, the goal should be to stay active and healthy. She concluded by pointing out that society needs to stop thinking that increased longevity is a burden.



Juan Picazo, MD, President of the Foundation for the Study of Vaccines, Madrid (Spain)



Dr. Picazo explained that vaccinations are one of the most significant contributions to improved public health, along with access to clean drinking water. In the past one hundred years diseases such as smallpox and rubella in children have been reduced by 90-100%. Additionally, life expectancy has doubled in this period. The elderly, in turn, are more vulnerable to common infectious diseases than the rest of the population, particularly as sometimes diagnosis can be delayed.

Regarding herpes zoster, he stressed that the findings of a study of more than 1,500 cases showed that 40% of patients addressed the problem to

a doctor 72 hours after the first symptom, which renders the antiviral treatment useless. He also indicated that one important factor for developing herpes zoster was the increasing loss of immunity with age. That is why herpes zoster is more likely to occur in people over 60 years old. One of the main effects of herpes zoster, he stressed, is a loss of independence.

Thereafter, Dr. Picazo pointed out that the perception on the need for adult vaccinations is at low level. With the exception of smallpox, for all other vaccine-preventable diseases, once vaccination ceases, diseases return. He emphasized the disparity and lack of guidelines at EU and Member States level, for which added pressure is needed in order to avoid disparities. Such pressure, he concluded, should be based on a commitment by the health sector, decision-makers and the media to provide scientific based on reliable information.

PART II – Herpes zoster: An age-related disease accelerating the functional decline

Marian Nicholson, Director of the Shingles Support Society (UK)

Ms. Nicholson presented the activities of her organisation to help patients' access to information on herpes zoster. This serves to tackle the pervasive misinformation about the disease. She stressed that herpes zoster is not transmissible unless one comes into direct contact with the shingles sores. Addressing the issue of pain, she explained that this can take multiple forms, such as a burn sensation and scalded skin. Pointing out examples of patients' experiences, she underlined that one of the effects of herpes zoster is social exclusion due to self-isolation and embarrassment. This combines with reduced mobility, as well as stress and reduced quality of life. Pain medication currently prescribed consists of two medicines, one an anti-epileptic and another anti-depressant, which sometimes raises concerns with patients. Perceptions of herpes zoster also vary among generations, with the baby boomer group being more proactive to avoid debilitation.



Professor Gaëten Gavazzi, University Professor of geriatrics and hospital practitioner at Grenoble University Hospital (France)



Prof. Gavazzi stressed the difficulty of connecting biological, scientific and clinical data in this field. Ageing, he added, is universal but people of the same age differ in their health status. Therefore, ageing is difficult to understand, and "elderly" could mean 65 and above, 75 and above, 85 and above etc. Ageing, depending on its characteristics, is heterogeneous, depending on the functional decline of organs. These occur on different level and timetables, and are also influenced by environmental factors. The main characteristics are: a reduction in maximal capacity, difficulty in maintaining homeostasis and

vulnerability to coping with any stress.

Immunity, in turn, is divided into two parts: firstly the innate immune system which reacts very fast against an aggressor, whose quality reduces with age; secondly, the adaptive immune system which has the specificity of action against an aggressor (lymphocytes are specific to each antigen). The ageing population is more prone to infection. The rate of herpes zoster increases with age, however the immune reaction to the vaccine is less effective in very old people. A good response to the vaccine is noted in those aged 50 to 80 year. He concluded that more clinical research is needed to improve understanding of immune systems in an ageing population.

Professor Dr Med Ralf Baron, Vice-Chair of the Department of Neurology, University Medical Centre Schleswig-Holstein, Kiel (Germany) was unable to attend, however his presentation was distributed to participants.

Q&A session / debate

Vaccination as an effective tool to prevent herpes zoster

Marian Nicholson started the session by stating that the vaccination against herpes zoster prevents half of cases, and in the other half, the risk of PHN is reduced by one-third. **Juan Picazo** further commented on the 72 hour timeframe for treatment and emphasised the relativeness of this timeframe. He also mentioned that the treatment for pain may have side effects and it is about how a person perceives life. **Marian Nicholson** also added that it is safe to give a stronger vaccination to someone who has never had chicken pox. **Rebecca Taylor**, MEP referred to her personal experience of herpes zoster, when her father developed the disease had to take 6 weeks of sick leave from work to recover. She noted that he was below the age for the vaccination in the UK, so she asked the experts about this. As a response, **Marian Nicholson** explained that the risk of herpes zoster increased with age and said that the vaccination in the UK is for people from the age of 70, but that it was licensed for people over 50. **Professor Gaëten Gavazzi** said that this age choice for vaccination against herpes zoster was not as much scientific, but much rather economic.



Increasing awareness about vaccination



Professor Roberto Bernabei, Professor of internal medicine and expert in geriatry, stressed on his side that there was a real need on prioritising adult vaccination next to child vaccination. The question, he underlined, was how to increase awareness and organize vaccination campaigns and how the European Parliament could be of

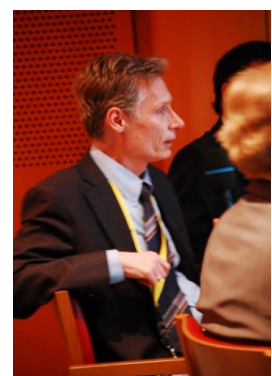
help in that context. **Renate Heinisch** on her side wondered whether she could take the vaccination herself, as she reminded having suffered from herpes zoster three times. **Juan Picazo** responded by saying that the vaccination could be provided to adults of 50 years and above. He underlined that 60-70 years would be the right time but that this age range was not obligatory.

Call for Leadership

Heinz K. Becker, MEP, called for more cooperation with a view to raising awareness. He stressed that industry, economy, civil society and policy should commonly contribute to that goal. He also stressed the urgency of the matter by not only reminding but also pointing out that waiting should not be considered as an option. **Rebecca Taylor**, MEP, added that the European Parliament could not legislate on this area but that the European Centre for Disease Prevention and Control (ECDC) had a programme on vaccinations and that consequently, it should be noted that EU activities were evolving in the good direction. She also made mention of the parliamentary debates on Serious Cross-Border Threats in the EU, reminding that Member States had emphasised that vaccination programmes were of their responsibilities, and not the EU's. **Andrea Rappagliosi**, **President of Vaccines Europe**, supported the call for leadership made by MEP Becker and called for more cooperation. MEP **Heinz K. Becker** stressed that the industry could not create the lead. It should be up to policy makers to do so and support such initiatives. As representative of the manufacturers, he stressed that the industry would be happy to participate to any political initiative following the objective of investing smartly in health to respond to today's and tomorrow's challenges.



Dr. Michael Sulzner, **Policy Officer, Health Threats Unit, DG Health and Consumers** pointed out that the European Commission would also be supportive of such initiatives, but also stressed that the responsibilities and competencies of Member States had also to be respected. The EU, he added, complements these competences, such as in the new Decision on Serious Cross-Border Threats in Health. The emphasis should be placed on the lifespan approach and linkages between age groups, and the Commission sees vaccination as an integrative part of the public health system. As an example, he reminded of the Council recommendation on the vaccinations for influenza, rubella and measles, underlining that there is ample scope for improvement. Vaccinations are a cost effective preventive tool, and a better understanding of their risks and benefits would of high added value to people. **Professor Gaëten Gavazzi** concluded the Q&A session by mentioning the need for a 'how to' campaign. Globally, there is good vaccination coverage, but added resources and cooperation with patients organisations are needed to improve the populations understanding of vaccination. Policy-makers should organize this cooperation, reuniting those who know about or who are involved in tackling herpes zoster.



Conclusions

Rebecca Taylor, MEP (ALDE, UK)



Ms. Taylor summarized the reunion by reemphasizing the drive towards better focus on healthy ageing, in the context of which vaccinations are an investment and not just a cost. Some doctors, she stressed, are not fully capable to communicating about vaccination, and therefore there is a need to educate them about life course vaccinations. The large variations among older people and their health make the group a heterogeneous one. Finally, whilst the power in the field of health lies with Member States, the EU has an increasing role to play in promoting vaccinations in terms of life course, healthy ageing and investment.

Thomas Mann, MEP (EPP, Germany)

Mr. Mann concluded that various initiatives such as the European Year for Active and Healthy Ageing in 2012, as well as active strategies in the EU for better health should be promoted in all Member States. He added that a more holistic approach to health would be to integrate it in the social dimension. The issues related to safety and cost of vaccinations should be a part of the discussion. Member States, in the context of an ageing society, should also support the development of an innovative “silver economy”.

