

SUCCESS STORY 3 “DEDICATED VACCINATION PROGRAMMES FOR PLHIV”

Context

Due to their compromised immune system, people living with HIV (PLHIV) face a higher risk of developing infections. In addition, this means that certain infections pose a greater risk to PLHIV than they would to the general population. This makes vaccination a fundamental tool for preventing a number of communicable diseases. However, because of their immunodeficiency, some vaccines risk infections in PLHIV. For this reason, vaccinations to be administered to PLHIV need to be selected carefully. For example, the Herpes Zoster vaccine should not administer to seriously immunocompromised people - including PLHIV - because it increases their risk of developing the infection.

It is vital that vaccinations for PLHIV should comply with the treatment guidelines for people with HIV already adopted both at the European and at the national level.

Introduction

In Italy, vaccination programmes targeted at PLHIV are regulated by two plans:

1. National Vaccine Prevention Plan (*Piano Nazionale di Prevenzione Vaccinale - PNPV*)
2. National HIV/AIDS Plan (*Piano Nazionale di Interventi contro HIV e AIDS – PNAIDS*)

Both plans were drafted by the Ministry of Health and agreed upon in the State-Regions Conference. This means that they are shared by the two levels of Government responsible for managing the NHS. Both plans have a section dedicated to vaccinations for PLHIV.

Aims

The goal of the National Vaccine Prevention Plan is to harmonise vaccination programmes across the country. This should ensure that everyone has access to the benefits of vaccination, thus improving individual and collective health. In addition, the plan aims to provide target sub-populations - including PLHIV - and actively offer them vaccines.

Those vaccines listed in the plan are classified as the basic levels of assistance and thus are offered free to those belonging to the relevant target sub-populations.

In the HIV/AIDS plan, vaccines are viewed as a method of preventing infections in PLHIV. It includes specific actions designed to address the needs of PLHIV relating to immunodeficiency. The plan sets the following objectives:

- Implement the National Vaccine Prevention Plan and the guidelines adopted by the scientific community (in particular by the Italian Society of Infectious and Tropical Diseases – SIMIT)
- Conduct a survey in a number of infectious disease units to determine the genuine vaccination rate in PLHIV and any flaws or shortcomings in the provision of vaccines
- Promote personalised vaccination programmes targeted at PLHIV
- Harmonise vaccines on offer of across the country.

Method

Both plans have set the goal of increasing immunisation coverage for people living with HIV (PLHIV). However, achieving this goal has been frequently hampered by the limited funding available.

A more sustainable way of promoting immunisation is to put in place dedicated programmes for providing specific sub-populations of PLHIV (e.g. ageing people) with access to vaccines.

A number of infectious disease units across the country have already implemented dedicated vaccination programmes targeting the needs of specific categories of PLHIV. More specifically, the units offer the following vaccines:

- Meningococcal
- Pneumococcal
- Herpes Zoster
- Hepatitis A and B
- Human Papillomavirus Infection (HPV).

A number of the units have a dedicated vaccination schedule in place.

In addition, in units where patient registries have been digitalised, selected vaccines are actively offered to specific sub-groups of people at risk.

Where digitalised and integrated systems are available, the personalised vaccination programmes also include serologic follow-up after vaccine administration as well as automatic alerts (e.g. for recalls) to minimise the risks potentially harming the retention in care.

Results

Data on the outcomes of vaccination programmes in PLHIV is not yet available, as both plans are still in the course of being implemented. However, the HIV/AIDS Plan has established performance indicators, giving a clear sign that policymakers aim to assess the outcome and performance of the PLHIV vaccination programmes with a view to updating the Plan.

Yet even before any outcome assessment, it is clear that adopting dedicated vaccination programmes for PLHIV in infectious disease units has been a major success. It marks a major advance, from planning vaccination strategies at the national level to actually implementing them locally. Although the vaccines offered to PLHIV vary considerably between regions and even within individual regions, vaccines are now successfully actively offered to PLHIV in a number of units across the country.

Recommendations

- Set PLHIV vaccination programmes for all infectious disease units across the country
- Digitalise all vaccination registries
- Wherever dedicated vaccine programmes are in place, systematically collect data on number and types of vaccines offered to PLHIV to help estimate the number of infections avoided
- Create a dedicated registry for adverse events following vaccinations in PLHIV.