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Flu jabs for care home staff prevents deaths

Effectiveness of an influenza vaccine programme for care home staff to prevent death, morbidity, and health service use among residents: cluster randomised controlled trial BMJ Online First

Vaccinating care home staff against influenza can prevent illness, deaths and health service use during periods of moderate influenza activity, concludes a study published online by the BMJ today.

Weak immune systems mean that many care home residents are vulnerable to influenza outbreaks even when they have been vaccinated. Many countries offer influenza vaccine to healthcare workers every year, but in the UK most care homes do not vaccinate their staff.

So, researchers set out to determine whether vaccinating care home staff against influenza indirectly protects residents.

The study took place in 44 UK care homes during the winters of 2003-4 and 2004-5. Vaccination was promoted and offered to full time staff in some homes (intervention homes) but not in others (control homes).

Vaccine coverage among full time staff in intervention homes was 48.2% in 2003-4 and 43.2% in 2004-5 compared with 5.9% and 3.5% in control homes.

During the 2003-4 influenza season, levels of illness and death were significantly lower in intervention homes compared with control homes. Consultations with general practitioners and admissions to hospital were also substantially lower in the intervention homes.

These effects were seen despite high levels of vaccination of residents and are equivalent to preventing five deaths, two admissions to hospital, seven general practitioner consultations, and nine cases of influenza-like illness per 100 residents during the period of influenza activity, say the authors.

However, no significant differences were found in 2004-5, when national influenza rates were substantially below average, or during periods of no influenza activity.

This study provides strong evidence to support influenza vaccination of care home staff even when vaccine uptake by residents is high, write the authors. Results are likely to apply to other care homes in the UK and abroad and may also be relevant to acute hospital settings, in particular elderly care and rehabilitation wards.

Campaigns to promote influenza vaccination among healthcare workers or staff of long term care facilities should emphasise the protection of vulnerable patients and residents as well as the benefits to the individual, they conclude.