

Systematic Review on the Cost-Effectiveness of Seasonal Influenza Vaccines

Rationale

Influenza vaccine effectiveness is highly variable by season. In addition to clinical effectiveness, it is also important to consider the cost-effectiveness of vaccines.

Implications

A systematic review will help inform decision makers on the cost-effectiveness of different influenza vaccines for older adults 65 years and older.

PROSPERO registration number:
CRD42020177337

**For more information, please contact
Andrea Tricco:
Andrea.Tricco@unityhealth.to**

Background

- The lack of comparative studies between specialty vaccines made available to older adults 65 years and older has made it difficult for the National Advisory Committee on Immunization (NACI) to draw conclusions on whether any of the available vaccines should be preferentially recommended.

Objective

- To compare the cost-effectiveness of the various available influenza vaccines in Canada/United States among older adults aged 65 years and older.

Methodology

- **Eligibility Criteria:**
 - Population:** Adults 65 years of age and older.
 - Interventions:** All influenza vaccines approved for use in adults 65 years of age and older in Canada/United States.
 - Comparators:** One of the available influenza vaccines approved for use in adults 65 years and older in Canada/United States or any other vaccine.
 - Outcomes:** Incremental cost-effectiveness ratio, or where possible, net monetary benefit and/or net health benefit; stratified by influenza subtypes if possible.
- **Literature Search:** Developed by an experienced librarian for MEDLINE, EMBASE, and the Cochrane Library. Grey literature will be searched using the Canadian Agency for Drugs and Technologies in Health guide.
- **Study Selection/Data Abstraction:** Prior to title/abstract screening, a calibration exercise will be conducted. Reviewers will screen the same titles and will be repeated until 80% agreement. Screening will be completed independently in pairs using Synthesi.SR. A third reviewer will resolve discrepancies. Includes study identifiers, design, perspectives, settings, vaccine strategies, vaccine effectiveness, type of economic evaluation, model assumptions, model parameters, participants, costs included in model, main analysis outcomes, sensitivity analyses, and key findings. Calibration exercise forms will be completed using 5 included articles. Two reviewers will independently abstract data.
- **Synthesis:** A descriptive/narrative summary of included studies with summary tables.

Knowledge Translation Strategy

- Summary of findings will be sent to the Public Health Agency of Canada (PHAC), the National Advisory Committee on Immunization (NACI) through PHAC, and other relevant Drug Safety and Effectiveness Network (DSEN) policy-makers. A stakeholder meeting will be held to discuss implications, key messages, and finalize KT strategies. Submission to an open-access, peer-reviewed journal will be made for publication purposes