

**The Hospital for Sick Children  
Technology Assessment at SickKids (TASK)**

**ABSTRACT**

**SYSTEMATIC REVIEW OF THE COST-EFFECTIVENESS OF  
INFLUENZA IMMUNIZATION PROGRAMS: A CANADIAN  
PERSPECTIVE**

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The views expressed in the material are the views of the authors and do not necessarily reflect those of The Hospital for Sick Children, Public Health Ontario, or the province of Ontario.

## **CONFLICTS OF INTEREST**

During the timing of writing this technical report, ET was an employee of AstraZeneca Canada.

## **ABSTRACT**

In Canada, currently no national seasonal influenza immunization program exists. To better inform policy, the cost-effectiveness of influenza immunization programs was examined. Using a best-evidence synthesis approach, 31 economic evaluations were reviewed. Subgroups emerged from the literature, including pregnant and post-partum women, children, and healthy adults. Generally, from the societal and healthcare system perspective, vaccination was cost-effective. For pregnant and post-partum women, vaccinating all versus only high risk was cost-effective. For children (6 months to 18 years), vaccinating all versus only high risk was cost-effective, especially for infants, toddlers, and adolescents. For healthy working age adults (19 to 64 years), results were mixed, and sensitive to vaccine efficacy, uptake, and productivity loss. For adults with co-morbidities and healthcare workers, vaccination was cost-effective. In Canada, six provinces (AB, SK, MB, ON, NS, NL) and all territories offer universal programs as of 2014. Three provinces (BC, QC, NB) offer programs targeting high risk groups only.