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Function: Pulmonology/ Intensive Care Consultant,

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**Portuguese National Council for Public Health** 

Main expertise: Pulmonology/Intensive Care

**Respiratory Infections (AMR)** 

**Vaccines** 

**Pandemic preparedness** 

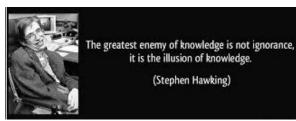




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# **Declaration of interests (<36 months)**

Research grants/clinical trials:	MSD
Lector for:	MSD, GSK, AstraZeneca, Sanofi, Novavax, Gilead, Bial, Hipra, Roche
Member of scientific (advisory) board:	MSD, GSK, AstraZeneca, Sanofi, Hipra
Forder of the discount time.	N
Employer (including part-time)	None
Tobacco industry relationship:	None!!!



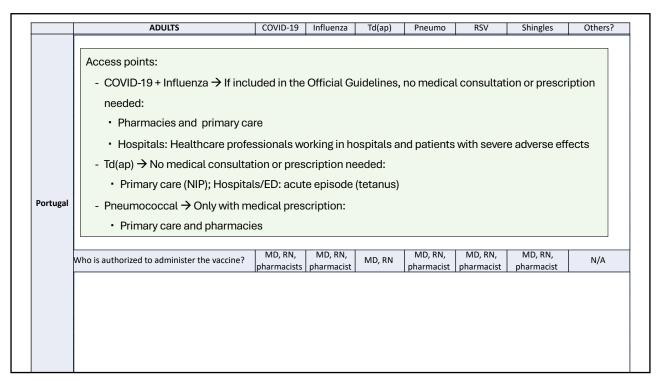
COMPANIES PAY TOO MUCH ATTENTION TO THE COST OF DOING SOMETHING. THEY SHOULD WORRY MORE ABOUT THE COST OF NOT DOING IT.
- PHILIP KOTLER -

	ADULTS	COVID-19	Influenza	Td(ap)	Pneumo	RSV	Shingles	Others?
	Are these vaccines recommended specifically	00115 25	ac.i.za	Ια(αρ)	111001110	1.57	Simigres .	o tineis.
	for all older adults in the National/Regional Vaccination Program (NVP)?	YES	YES	YES	YES	NO	NO	N/A
	At what age are these vaccines recommended in the NVP? Ad	60+ (18+ at risk)	60+ (18+ at risk)	Lifelong	65+ (18+ at risk)	NO	NO	N/A
	What is the recommended frequency of vaccination for older adults as per the NVP?	Annual	Annual	65+: 10-10y 18+: 20-20y	PCV20→PSV23 (single dose)	NO	NO	N/A
	Do the recommendations in the NVP differ from those provided by the National Immunization Technical Advisory Group (NITAG)?	NO	NO	NO	NO	N/A	N/A	N/A
	Which specific vaccine(s) are recommended for older adults in the NVP?	Cominarty	Influvac Vaxigrip Efluelda	Boostrix?	PCV20 PPSV23	N/A	N/A	N/A
Portugal	Is vaccination publicly funded for older adults? If partially reimbursed, what is the out-of- pocket cost?	Free	Free	Free	PCV20: 31-40.7€ PSV23: 12.9-17.0€	N/A	N/A	N/A
	What is the full price of the vaccine without reimbursement?	N/A	SD: 14.10€ HD: 50€	N/A	PCV20: 64.60€ PPSV: 26,99€	197,50€	176.90€	N/A
	Who is authorized to administer the vaccine?	MD, RN, pharmacists	MD, RN, pharmacist	MD, RN	MD, RN, pharmacist	MD, RN, pharmacist	MD, RN, pharmacist	N/A
	What is the cost of a HCP's visit (for vaccination)?	0€	0€	0€	0-5€	0-5€	0-5€	N/A
	What is the vaccination coverage rate in the target group (older adults)?	65+: 50%	65+: 74%	>95%	?	?	?	N/A
	Target coverage?	75%	75%	100%	N/A	N/A	N/A	N/A
	Are healthcare providers (HCPs) also recommended for vaccination in the NVP?	YES	YES	YES	NO	NO	NO	NO
	Are vaccines for HCPs reimbursed? If partially, what is their out-of-pocket cost?	Free	Free	Free	PCV20: 31-40.7€ PSV23: 12.9-17.0€	197,50€	176.90€	N/A

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	ADULTS	COVID-19	Influenza	Td(ap)	Pneumo	RSV	Shingles	Others?
fi N D III V	Are these vaccines recommended specifically for all older adults in the National/Regional Vaccination Program (NVP)?	YES	YES	YES	YES	NO	NO	N/A
	At what age are these vaccines recommended in the NVP? Ad	60+ (18+ at risk)	60+ (18+ at risk)	Lifelong	65+ (18+ at risk)	NO	NO	N/A
	What is the recommended frequency of vaccination for older adults as per the NVP?	Annual	Annual	65+: 10-10y 18+: 20-20y	PCV20→PSV23 (single dose)	NO	NO	N/A
	Recommended vaccines for older adult:  - NIP: COVID + Influenza + Td(ap) + Pneumoccocal  - Scientific Societies: NIP + RSV + Shingles  Eligibility (NIP):  - Age criteria: 60+ (50+): COVID-19 + Influenza;  65+: Pneumoccocal + Td(ap) 10-10y			Respiratory syncytial virus vaccination in older adults and patients with chronic disorders: A position paper from the Portuguese Society of Pulmonology, the Portuguese Association of General and Family Medicine, the Portuguese Society of Cardiology, the Portuguese Society of Infectious Diseases and Clinical Microbiology, the Portuguese Society of Endocrinology, Diabetes and Metabolism, and the Portuguese Society of Internal Medicine  Tago Alfaro and Tiple Froest, Cláudia Vicente <sup>a</sup> , Rul Costa <sup>a</sup> , Cristina Gavina <sup>a</sup> , Rul Baptista <sup>a</sup> , Antono Malom <sup>a</sup> , Saraiva da Cunha <sup>a</sup> , João Sérgio Neves <sup>a</sup> , Pedro Leuschner <sup>t, U</sup> , Sofa Duque <sup>b, Ver</sup> and Paula Pinto <sup>AV</sup>				
	- Risk criteria: 18+ at risk: COVID-19 + Influenza + + Pneumococcal			guidelines cowsensus Recomendações para a Vacinação contra o Herpes Zoster: Documento de Consenso da Sociedade Portuguesa de Medicina Interna e da Associação Portuguesa de Medicina Geral e Familiar				
				Recomm from the Associa	mendations for Portuguese S tion of General	Herpes Zoster ociety of Intern and Family Me	Vaccination: Con- al Medicine and the edicine	sensus Report ne Portuguese

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	Key challenges:								
	- Increase coverage among healthcare professionals								
	(victims of disease, transmission vectors, and vaccination role models)  - Increase vaccination coverage in the population (>75% in 65+)								
	- Improve communication (e.g., vaccination campaigns) - Monitor vaccination coverage (weekly, monthly or annual review) - Conduct periodic evaluation of disease impact and burden of disease								
Portugal	- Improve TRUST (population, official organizations, science)								
	'The key inar	odior	at of	anv	Vacc	rino	ic true	·+'	
'The key ingredient of any vaccine is trust								o L	
	Barry Bloom, Harvard School of Public Hea							lealth	
	hat is the vaccination coverage rate in the rget group (older adults)?	65+: 50%	65+: 74%	>95%	?	?	?	N/A	
	rget coverage?	75%	75%	100%	N/A	N/A	N/A	N/A	
	e healthcare providers (HCPs) also	YES	YES	YES	NO	NO	NO	NO	

### **Future Perspectives**

Portugal - Short term:

- Inclusion of new vaccines in the NIP (RSV, HZ, PCV21)
- Lowering the age threshold to 50 years (COVID-19, Influenza, Pneumococcal, RSV, HZ)

#### Global:

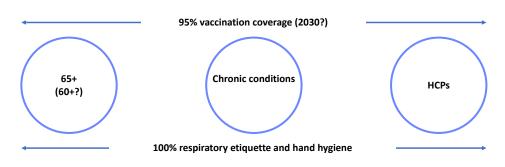
- New vaccines (MRSA, *Clostridium difficile*, etc.) or replacement with more effective, safer, longer-lasting vaccines, and tailored for specific population subgroups (frail, immunocompromised) (AI?)
- Promotion of "Lifelong Immunization"
- Highlighting the value of vaccination in Healthy Aging and Longevity
- Utility in other diseases (oncology, autoimmune, degenerative, etc.) → personalized medicine
- Indirect utility of vaccines in pandemic preparedness and antimicrobial resistance

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# **Future Perspectives**

The example of influenza vaccination:

- There's no need to reinvent the wheel! → 95-95-95
- Implement the same strategy already used for controlling AIDS, proposed in 2021, with excellent results.



Froes F, Kassianos G. Why Not a 95-95-95 Strategy for Influenza by 2030? DOI: 10.1080/25310429.2025.2491896

PULMONOLOGY 2025, VOL. 31, NO. 1, 2491896 https://doi.org/10.1080/25310429.2025.2491896





# Why not a 95-95-95 strategy for influenza by 2030?

F. FROES AND G. KASSIANOS