



# Advancing vaccination strategies for older adults: Insights from the Adult Immunization Board meeting

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## Background and Methods

**Vaccinating older adults remains an underprioritized yet essential public health tool.** 7-8 May 2025, the Adult Immunization Board convened in Warsaw to explore ways to advance older adult immunization efforts across Europe. The meeting brought together experts selected through literature reviews, citation tracking and gray literature analysis. Attendees represented diverse disciplines and regions, focusing on 6 vaccines: **influenza, COVID-19, pneumococcal, herpes zoster, RSV, Tdap**. Older adults were defined as aged 50 and above to ensure the broadest possible inclusion. The meeting agenda and all meeting presentations are available on the AIB website: <https://www.adultimmunizationboard.org/meetings>

## Results

Table 1. Challenges and programmatic considerations in expanding immunization policies beyond childhood and adolescence

Challenges (older) adult vaccination	Required programmatic considerations
Limited disease burden and vaccine effectiveness/impact data and reporting to inform (older) adult vaccination policies	Strengthen adult <b>disease surveillance systems and reporting to generate reliable sources that inform policy and demonstrate vaccine impact</b>
High vaccine prices and limited funding strain already burdened programs and schedules	Improve access to (adult) vaccines at affordable prices
Fragmented data and services make it hard to identify eligible individuals, especially for risk-based vaccination	Invest in <b>electronic immunization registry</b> (that is interoperable with other registries) that enables the <b>identification of eligible individuals</b>
Adult and older <b>adult vaccination services are underdeveloped</b> and <b>poorly integrated</b> into broader care	Adult vaccination lacks <b>clear schedules and integration into primary, chronic, and elderly care</b> . A <b>structured approach</b> , like well-baby visits, embedded <b>in routine care</b> could simplify access and boost uptake
Insufficient training and support for healthcare providers, despite their key role in adult immunization	Support HCPs with <b>accessible training, guidelines, and tools</b> , and engage community leaders and specialist networks to boost adult vaccination
Inadequate awareness, vaccine acceptance and demand among the targeted group	Use <b>social and behavioral insights</b> to drive vaccine demand, trust and uptake
Limited stakeholder collaboration, with organizational heterogeneity	Vaccinating older adults should not rest solely on general practitioners. A <b>broader, multi-sectoral and inclusive governance</b> is needed, with <b>additional stakeholders and structures</b> .
Lack of comprehensive technical guidance to support life course immunization.	Develop <b>structured, evidence-based technical guidance</b> tailored to adult and older adult vaccination.

Table 2: Example of vaccination schedule for adults 50+ (drafted from expert discussions at the AIB meeting)

	50y	55y	60y	65y	70y	≥75y
Vaccinations						
Td(ap)	Every 10 years (for all adults)					
Herpes Zoster	2 doses					
COVID-19			Every year (Aug-Sept)			
Influenza			Every year (Oct-Nov)			
Pneumococcal			1 dose			
RSV						1 dose (Sept-Oct)



Note: No boosters are recommended for RSV, HZ or pneumococcal conjugate vaccines at this time, additional data is needed to determine the necessity and intervals

## Conclusions

- The growing number of older adults highlights the urgent **need to prioritize their vaccination equally alongside other age groups**.
- Achieving this requires **clear schedules, dedicated infrastructure, and well-coordinated programs** that ensure **high coverage and long-term impact**.
- Vaccination should be recognized as **a key investment in healthy ageing**, supporting **independence, functional ability, and overall well-being**.
- Greater **policy alignment**, both within countries and across the EU, can reduce confusion, improve access, and promote consistency in eligibility and delivery.
- Ultimately, moving **from fragmented efforts** to standardized, system-wide strategies will strengthen prevention, enhance equity, and maximize the public health and economic benefits of vaccination.

