



Published Estimates of LAIV Effectiveness

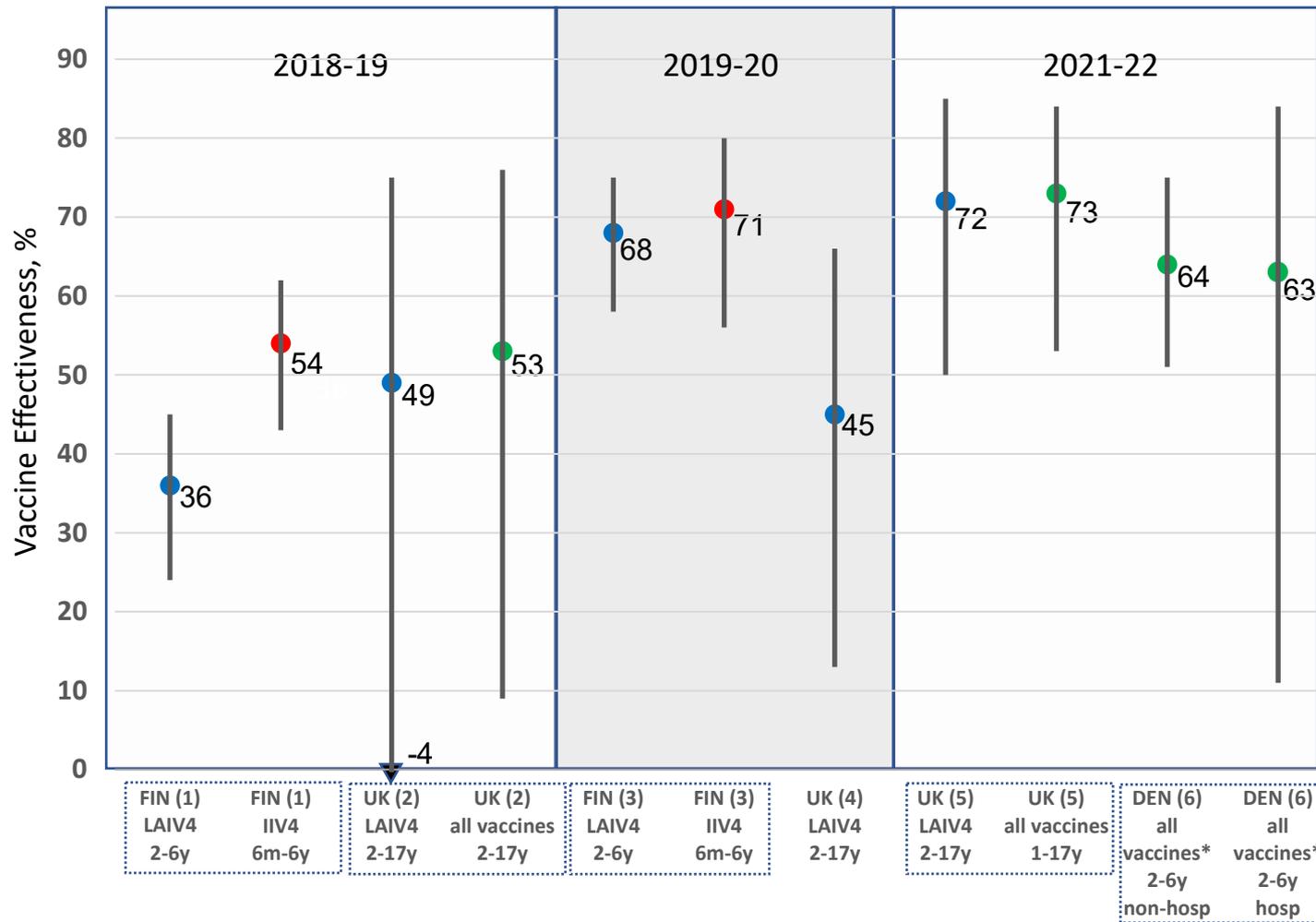
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Update on Published Estimates of LAIV4 Effectiveness: Background

- LAIV4 not recommended in the U.S. for 2016-17 and 2017-18, following observation of poor effectiveness against H1N1pdm09 viruses.
- Subsequent studies suggested poor replicative fitness of the LAIV4 H1N1pdm09-like vaccine virus, which was subsequently updated.
- LAIV4 again a recommended option starting in 2018-19 after discussion of
 - Combined U.S. individual level patient VE analysis,
 - Systematic review of post-2009 US/non-US LAIV VE estimates,
 - MedImmune data suggesting better fitness of new H1N1pdm09 vaccine virus.
- LAIV4 use within CDC U.S. VE networks has been low since 2018-19, precluding assessment of vaccine-specific VE.
- LAIV VE estimates have been published from non-U.S. observational studies.



Published Non-US VE Estimates

All influenza viral types/subtypes



1. Stuurman et al Vaccine 2020;38:6455-6463
2. Pebody, Vaccine 38 (2020) 489-4
3. Stuurman et al Vaccine 2021;39:3964-3973
4. <https://webarchive.nationalarchives.gov.uk/ukgwa/20220401215804/https://www.gov.uk/government/statistics/annual-flu-reports>
5. <https://www.gov.uk/government/statistics/annual-flu-reports/surveillance-of-influenza-and-other-seasonal-respiratory-viruses-in-winter-2021-to-2022>
6. Emborg, Euro Surveill 2022;27:pii=2200278

* Report notes that 92% in 2-6y age group received LAIV4; the remainder offered IIV4.

For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

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