

The Active Citizenship Network's Mariano Votta and Maira Cardillo detail the impact of Covid-19 on immunisation efforts across Italy

# “For vaccination? Come back...I can't tell you when”

**T**he situation is fraught: even within the same regional territory, very different protocols are in place regarding infection prevention policies, both in facilitating access to vaccines and in conducting screenings. This is the picture emerging from a civic survey<sup>1</sup> conducted in Italy by the civic participation NGO Cittadinanzattiva to mark the annual European Immunisation Week, which ran from 20 April to 26 April 2020.

Information has proved difficult to find, with telephone numbers which no-one answers and an overarching lack of a single point of reference between regions. The survey indicated that – in general – Northern regions tend to limit access, by suspending or postponing some vaccinations, predominantly those aimed at teenagers, adults, and travel-related needs. However, some regions such as Marche, the Autonomous Region of Trento and Umbria are not even completing unfinished cycles of compulsory vaccinations. Vaccination services in Piemonte have shut down completely and indefinitely; while Lombardia, despite the seriousness of the pandemic, has reopened all vaccination programmes since 14 April. The inexplicable decision to close was adopted in Sicily, where the infections are significantly lower; Messina closed entirely; and in Palermo only the first sets of inoculations are guaranteed. Meanwhile vaccination services remain regularly active in Lazio, Valle d'Aosta, Calabria and Puglia.

Veneto, Abruzzo, Sardegna and Toscana currently guarantee only the vaccinations which are compulsory for the 0-6 age group, thus closing

the possibility of booster doses expected beyond that age group – although Sardegna also permits vaccinations for certain vulnerable populations. Emilia Romagna also presents a very uneven situation: while in Ferrara patients can receive any vaccination, Bologna has only suspended those for travel-related needs; Imola will only allow pediatric vaccinations; Parma has suspended all HPV vaccinations aside from those which were already scheduled. In the Marche and Trento, the only permitted vaccinations are those which are necessary for the 0-2 age group.

## Uneven and erratic

In short, the Cittadinanzattiva's survey on disease prevention services highlights an uneven situation both between regions and even between different areas of the same region; with many vaccination centres posting messages to the effect: 'Come back...I can't tell you when'. The level of indeterminacy this implies is both confusing and potentially dangerous. Stopping vaccination programmes is inherently flawed as a strategy – not only because doing so suggests that vaccination services are not essential, after all the years spent to make the public understand the importance of them; but also, and most urgently, because it heightens the risk of the return of serious pathologies such as measles or meningitis, or exposing young patients to a potential onset of tumours, by blocking vaccinations for HPV and Hepatitis B.

For Cittadinanzattiva, a civic organisation which promotes citizens' activism for the protection of own rights, maintaining the common good, and offering the support for people in vulnerable

conditions, it is not acceptable to respond to the immediate needs of citizens in the face of Covid-19 simply by closing services. Alternative organisational solutions are therefore needed to guarantee continuity in the service; and in doing so to resume vaccination campaigns, which are extremely important even at this stage.

## A fundamental component of healthcare

The World Health Organization (WHO), in particular, recently stressed that vaccinations are a fundamental component of health services; and that their interruption, even if for a short period, would lead to an accumulation of people susceptible to a greater risk of vaccine-preventable disease outbreaks. This in turn would render certain categories of people more vulnerable to disease or even death, as well as increasing the burden on healthcare resources in order to cope with them. According to the WHO, it is essential to keep vaccination appointments, especially for routine vaccinations. Echoing WHO has been also the Director-General of UNICEF, Henrietta Fore, who in her recent official statement<sup>2</sup> expressed her concern on finding that: “As the pandemic progresses, essential lifesaving services, including vaccinations, will likely be interrupted, especially in Africa, Asia and the Middle East, where they are extremely necessary.”

Unfortunately, the coronavirus pandemic has already dealt a blow to measles control efforts. According to one study,<sup>3</sup> “already 23 countries have suspended planned measles campaigns and 78 million children worldwide will not be



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vaccinated as it was previously planned.” The study goes on to warn of the negative impact that the cancellation of vaccination campaigns could have on rates of immunity to this dangerous and still widespread disease.

### Planning ahead

In Italy, continued adherence to vaccination guidelines as well as a return to full capacity for vaccination centres – obviously under conditions of maximum safety for both health professionals and patients – is also justified in view of a possible overload in the months to come, regardless of the potential discovery and commercialisation of a Covid-19 vaccine. Recognising the value of immunisation, the Italian Federation of General Practitioners (FIMMG) and Cittadinanzattiva have recently written to the Italian Government and to all regional authorities to propose a flu and pneumococcal vaccination campaign, with a projected start in early October 2020, with the age at which patients can receive the vaccine for free lowered to 55 years.

While we are aware that the pandemic has forced Italy’s entire public health infrastructure and personnel to concentrate their efforts and activities on the management of the emergency, a planning effort with measures that can ensure an efficient performance of the next vaccination awareness campaign in the second half of the year is entirely appropriate. The real risk is that

we could find ourselves in October with insufficient stocks of vaccines, thus repeating the dramatic experience of personal protective equipment shortages during the most crucial days of the pandemic.

In fact, as clarified by the Secretary General of FIMMG Silvestro Scotti, “There are few manufacturers of flu and pneumococcal vaccines and the particularity of the vaccine production cycle does not allow [producers] to respond in emergency to an excess of demand, if not programmed in advance. Italy does not have production facilities capable of making the country autonomous in the production of vaccines with the consequence of not being able to cope, with internal production, with a possible vaccine deficiency.”

Hence an appeal for a double level of action. On the one hand, it is essential that the regions prepare an updated estimate of the vaccine requirements in a very short time and that they communicate the increase in demand by co-ordinating with the Ministry of Health. On the other hand, the necessary recommendations regarding the prevention and control of flu must be issued as soon as possible, allowing for a better planning at the regional level in order to quickly complete all public procurement procedures.

The game also has a significant economic impact, given that the increased demand for vaccines will be financed not only with the ordinary funds of the regions, but also with extraordinary funds made available by the government. Has it been forward-looking Italy’s choice not to follow the example of 15 European countries that just one year ago, on 28 March 2019, for the first time used the Joint Procurement Agreement – devised by the EU Institutions to better face pandemic flu vaccines – for the joint purchase of the flu vaccine?

### References

- 1 <https://www.cittadinanzattiva.it/comunicati/salute/13216-per-la-prevenzione-ritorni-non-so-dirle-quando-la-nostra-indagine-sui-servizi-di-prevenzione.html>
- 2 <https://www.unicef.org/press-releases/statement-unicef-executive-director-henrietta-fore-disruption-immunization-and-basic>
- 3 <https://www.nature.com/articles/d41586-020-01011-6>

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