



Essential immunization services during times of severe disruption

During times of severe disruption to health service delivery, immunization activities should be prioritized and safeguarded for continuity to the greatest extent possible.¹ Even brief disruption or postponement of immunization services could lead to increases in individual and population susceptibility to vaccine preventable diseases, and potentially outbreaks of infections such as measles following importation. Immunization services should be prioritized to protect both the most vulnerable individuals and to prevent accumulation of susceptibles in the population.² Post-exposure prophylaxis must also continue to be offered.

Based on provincial epidemiology, severity of disease, and potential for outbreaks, the BC Centre for Disease Control recommends that as a minimum, the following immunization services be deemed essential:

1. Infant and childhood immunizations

Delivery of the infant/childhood immunization series from two to twelve months of age should be maintained. This provides protection against diphtheria, tetanus, pertussis, hepatitis B, polio, *Haemophilus influenzae* type b, meningococcal C and invasive pneumococcal disease, rotavirus, measles, mumps, rubella and varicella. Infants and young children are at greatest risk of severe illness from these infections, which can result in hospitalization and death in those unimmunized or under-immunized. Furthermore, a gap in population susceptibility facilitates transmission and outbreaks of infections such as measles, varicella and pertussis.

2. Immunizations for special populations

Ongoing immunization of individuals at higher risk of morbidity and mortality due to VPDs and other special populations should be maintained. These populations are listed in the BC Immunization Manual, [Individuals at High Risk for Vaccine Preventable Disease](#), and the provision of routine and additional recommended vaccines should be prioritized, including the provision of pneumococcal and meningococcal vaccines.

3. Post-exposure prophylaxis

Immunization following exposure to certain VPDs is essential for the prevention of infection / reduced severity of clinical manifestations in susceptible individuals, as well as outbreak control. These include, but are not limited to, rabies, hepatitis B, measles, monkeypox, and hepatitis A.

4. Immunizations to prevent outbreaks of vaccine preventable diseases

In addition to the infections listed above, immunization against other VPDs, such as influenza and COVID-19, is essential in reducing the risk of outbreaks and associated burden of illness. Influenza is associated with an average of 12,200 hospitalizations and 3,500 deaths annually in Canada³, and the COVID-19 pandemic continues to cause significant morbidity and mortality, as well as social and economic disruption in Canada and worldwide.

¹ World Health Organization. [Maintaining essential health services: operational guidance for the COVID-19 context](#). 1 June 2020

² World Health Organization. [Immunization as an essential health service: guiding principles for immunization activities during the COVID-19 pandemic and other times of severe disruption](#). 1 November 2020.

³ Public Health Agency of Canada. [Canadian Immunization Guide Chapter on Influenza and Statement on Seasonal Influenza Vaccine for 2022–2023 National Advisory Committee on Immunization](#). 8 June 2022