



Shingles Infections Pose Serious Health Risks and Cost the Canadian Health Care System Upwards of \$67M Annually

National Institute on Ageing Recommends Immediate Steps to Improve Canada's Unacceptably Low Immunization Rates Against Shingles

TORONTO, March 1, 2022 — Shingles infections affect an estimated 90,000 Canadians aged 50 years and over each year, and cost the health care system approximately \$67-82 million. Despite its prevalence—particularly among older adults—and the risk of serious health complications, only 27% of Canadians aged 50 years and over report having a shingles vaccine, according to the Public Health Agency of Canada.

This low immunization rate leaves older Canadians unnecessarily vulnerable to infection, which is largely preventable with a single dose of shingles vaccination. The National Institute on Ageing's (NIA) latest report, <u>The Overlooked Issue of Shingles Infections in Older Canadians, And How to</u> <u>Address It!</u>, reveals a patchwork approach to shingles vaccination across the country, which does not adequately address the prevalence, seriousness or costs of the disease.

"The recommendation in Canada is clear. All adults aged 50 years and older should be offered a shingles vaccine," says Dr. Samir Sinha, Director of Health Policy Research at the NIA and lead author of the report. "Shingles infections often present as a painful, blistering rash, accompanied by headache and fever. But this infection can cause many serious complications, particularly for older adults and those with compromised immune systems. We need to work together to dramatically increase the number of Canadians 50 years of age and older who receive this vaccine—27% is unacceptably low."

The most common complication of a shingles infection is post-herpetic neuralgia, a painful condition that can remain active for three months or more after the onset of the rash. This pain affects the nerves and skin and may decrease quality of life and impact daily activities. Shingles can also cause a number of other health complications including scarring, chronic pain, and vision loss. Canadian studies have found that, in addition to higher rates of shingles infection, older adults are also more vulnerable to complications, hospitalizations, and even death. As there is no cure for shingles, and treatment options are aimed primarily at pain and symptom management, vaccination is a crucial tool for prevention.

However, the Canadian vaccine landscape is fragmented—with only three provinces and territories providing free shingles vaccines. Ontario and the Yukon provide publicly-funded vaccines to some specific groups of older adults, while Alberta provides vaccines to a small segment of its population with specific health conditions. In all other jurisdictions, residents must pay around \$200-\$300 out-of-pocket to receive an immunization.







As demonstrated in the NIA's <u>National Seniors Strategy</u>, there is widespread consensus that access to necessary vaccines and prescription medications are directly influenced by an individual's ability to pay. Financial barriers, like co-payments and out-of-pocket costs, have consistently been found to decrease uptake and utilization rates. In addition, regional regulatory differences determine where shingles vaccines can be purchased, and who can administer them, further complicate the national picture. Providing publicly-funded shingles vaccinations to older Canadians, is an effective strategy to improve uptake rates, strengthen prevention efforts and reduce health care costs; the bulk of the nation's current expenditures of \$67-\$82 million annually are due to the complications arising from shingles infections, including additional and avoidable visits to healthcare providers and hospitalizations.

"The impact on individual health can be very serious, causing chronic pain for months and even years. This can substantially reduce one's quality of life," says Dr. Sinha. "The annual impact on provincial and territorial health care systems is also significant. Raising awareness about shingles vaccines and increasing uptake, particularly among older adults, is a step we can take today to improve health and well-being in communities across Canada."

To increase overall prevention of shingles across Canada, and to support the efforts of health authorities and organizations to increase vaccine uptake, the report includes eight evidence-informed policy recommendations:

- 1. Promote a Life-Course Vaccination Schedule that Includes Older Adults
- 2. Improve the Surveillance of Shingles Cases Across Canada and Its Implications on Canadian Healthcare Systems
- 3. Improve Reporting and Monitoring of Shingles Vaccination Rates
- 4. Provide the Shingles Vaccination Free of Cost to all Eligible Canadians Aged 50 Years and Older
- 5. Adhere to Canada's Current NACI Statement for Shingles Vaccination
- 6. Provide Clinician Education and Support for Pharmacists, Primary Care and Other Health Care Providers to Deliver Vaccinations
- Recommend the Administration of Shingles Vaccine in Conjunction with Other Vaccines, Where Applicable, Including the Influenza and COVID-19 Vaccines to Improve Uptake and Compliance
- 8. Harmonize Vaccination Administration Across and Within Canada's Provinces/Territories

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The National Institute on Ageing is a Ryerson University think tank focused on the realities of Canada's ageing population. Follow us on Twitter <u>@RyersonNIA</u> and support our call for a National Seniors Strategy <u>@NSS_Now</u>.



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