



Integrated Community Care, using Municipal Relief Funds for the 13-Valent Polysaccharide Conjugate Vaccine

in town of Mihama

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[Introduction]

The 13-valent pneumococcal conjugate vaccine (PCV13) has been well established to provide protection against Pneumococcal disease(#1). However, the PCV13 is not a routine immunization for adults over 65 years or older in Japan and is thus ineligible for subsidies. To increase coverage rates, we recommended Mihama help pay for the PCV13 vaccine. By increasing awareness of disease prevention, we expected to promote integrated care for adults over 65 years or older in this community.

[Where & Why]

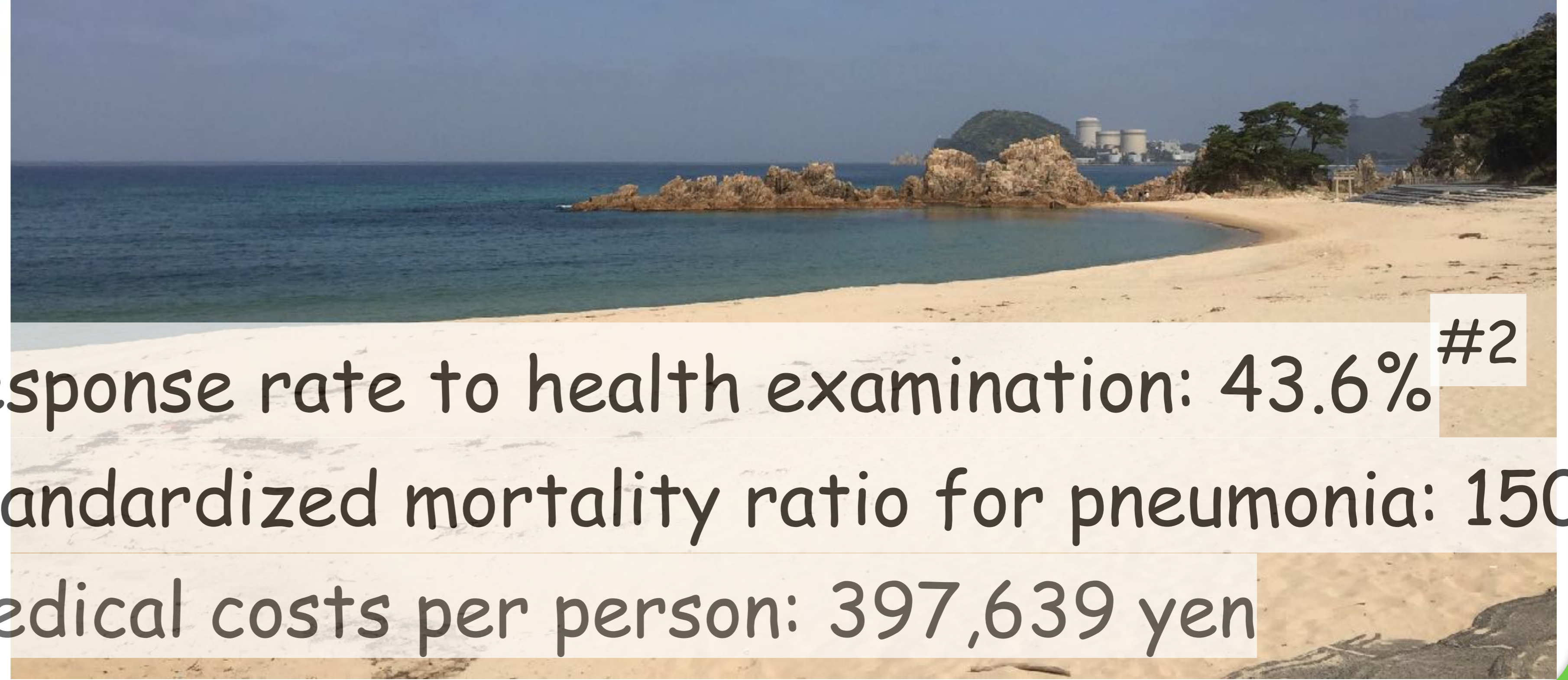


Town of Mihama



Population: about 10,000

Aging rate: more than 30%



The response rate to health examination: 43.6%^{#2}
 The standardized mortality ratio for pneumonia: 150
 The medical costs per person: 397,639 yen

[How]

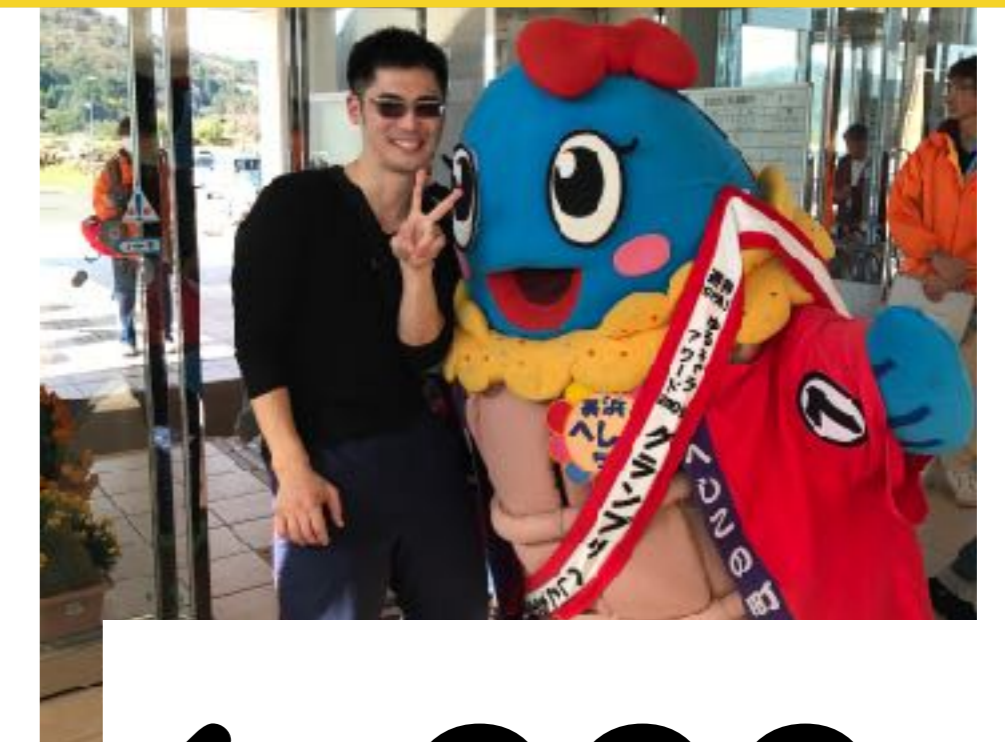
over 65 years or older
100 person



Patient

① Subsidy for the PCV13

Town of Mihama



6,000 yen

② Have a Vaccination



PCV13

11,000 yen

[Discussion]



<http://lsim-forum.jp/blog/2011/0519140052>

CAP Incidence rate

community acquired pneumonia

65-84 years old 10.5% over 80 years old 9.1%^{#3}

Admission rate 93.8%^{#3}

Hospitalization cost 722,037 yen^{#3}

Coverage rates for PCV13 0 → 20% for the first year

Promote Integrated Community Care
by increasing Awareness of disease prevention

[References]

#1. Bonten MJM, Huijts SM, Bolkenbaas M, et al. Polysaccharide conjugate vaccine against pneumococcal pneumonia in adults. N Engl J Med. 2015;372:1114-1125.
 #2. http://www.fukui-kokuhoren.or.jp/H27_fukuikennokokuho.pdf
 #3. Akira Watanabe, et al. Cost-effectiveness analysis of 13-valent pneumococcal conjugate vaccine for adult pneumococcal disease. Respiratory medicine, 25(4):387-396, 2014.

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 Conflict of Interest (COI) of the Co-Presenter : No potential COI to disclose