

public funding for this group become significantly weaker. For healthy consenting adults, their individual judgement about the importance of avoiding influenza is central to determining the value to them of being vaccinated. This increases the likelihood that adults with the means, or their employers, will pay for vaccination, and reduces the imperative for governments to take over the responsibility of funding vaccination for this group.

Future directions

Influenza vaccination policy, like the influenza virus, evolves at a relatively rapid rate. Emerging evidence from the Ontario experience of universal vaccination will be closely assessed by policy makers, including the NHMRC in its review of the National Immunisation Handbook and the US Advisory Committee on Immunization Practices, which is currently considering universal influenza vaccination. If this is recommended, vaccine production will need to be increased considerably.

A key issue is whether indirect costs of illness (for example, days off work) will be considered in cost-effectiveness calculations used to develop the case for public funding. If these costs are included, it is likely that cost-effectiveness ratios will improve significantly. Making public funding available on this basis will amount to a slight increase in taxation funding and a slight increase in health expenditure, and should result in slightly improved national productivity. Whether our governments are ready to accept arguments that preventive health expenditure is a useful public investment that drives productivity growth, remains to be seen.

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Conflict of interest: none declared

Self-test questions

The following statements are either true or false (answers on page 55)

1. The influenza vaccine protects 90% of healthy adults against clinical infection with influenza.
2. Vaccinating staff working in aged care facilities reduces influenza-like illness in unimmunised residents.

Dental notes

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Influenza vaccination for healthy adults

Very few dentists fall into the groups eligible for free vaccination under the National Immunisation Program. However, it is likely that all dentists working in both private and public practice

are routinely having an annual vaccination against influenza. This decision to be vaccinated and the discussion about it, is likely to strongly influence work colleagues, dental nurses, oral hygienists and therapists, as well as patients.