



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

Health technology assessment of the addition of herpes zoster (shingles) vaccination to the adult vaccination programme: plain language summary

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About the Health Information and Quality Authority

The Health Information and Quality Authority (HIQA) is an independent statutory body established to promote safety and quality in the provision of health and social care services for the benefit of the health and welfare of the public.

Reporting to the Minister for Health and engaging with the Minister for Children, Equality, Disability, Integration and Youth, HIQA has responsibility for the following:

- **Setting standards for health and social care services** — Developing person-centred standards and guidance, based on evidence and international best practice, for health and social care services in Ireland.
- **Regulating social care services** — The Chief Inspector of Social Services within HIQA is responsible for registering and inspecting residential services for older people and people with a disability, and children’s special care units.
- **Regulating health services** — Regulating medical exposure to ionising radiation.
- **Monitoring services** — Monitoring the safety and quality of permanent international protection accommodation service centres, health services and children’s social services against the national standards. Where necessary, HIQA investigates serious concerns about the health and welfare of people who use health services and children’s social services.
- **Health technology assessment** — Evaluating the clinical and cost effectiveness of health programmes, policies, medicines, medical equipment, diagnostic and surgical techniques, health promotion and protection activities, and providing advice to enable the best use of resources and the best outcomes for people who use our health service.
- **Health information** — Advising on the efficient and secure collection and sharing of health information, setting standards, evaluating information resources and publishing information on the delivery and performance of Ireland’s health and social care services.
- **National Care Experience Programme** — Carrying out national service-user experience surveys across a range of health and social care services, with the Department of Health and the HSE.

Plain language summary

Shingles is a viral infection caused by the same virus that causes chickenpox. You can only get shingles if you have already had chickenpox. Three out of every 10 people who have had chickenpox will go on to have shingles at some point in their life. You cannot pass shingles to another person, but coming in contact with shingles can cause chickenpox in someone who has never had it before. Shingles causes a painful, blister-like rash. While the symptoms normally clear up within a month, some people may continue to experience pain for months, or even years after the rash heals. Older people and people with a medical condition or taking a medicine that can weaken their immune system (immunocompromised) have a higher risk of getting shingles.

Shingles vaccines are available in Ireland, but the Health Service Executive (HSE) does not currently provide free vaccination — people must pay to be vaccinated. The vaccines are designed to prevent shingles and its complications in adults. This assessment looked at a two-dose vaccine.

The Department of Health asked the Health Information and Quality Authority (HIQA) to undertake a health technology assessment (HTA) in relation to shingles vaccination. The assessment has been provided as advice to the Minister for Health to help inform a decision on whether this vaccine should be included in the national immunisation programme for adults. As part of this assessment, HIQA has reviewed the available evidence, and has sought input from a group of experts, including public representatives. It also considered the organisational, ethical and social impact of funding the shingles vaccine.

HIQA found good evidence that the shingles vaccine is safe and effective for the general population aged 50 years and older and for immunocompromised adults aged 18 years and older. Although effective when you first receive it, the benefit of the vaccine decreases over time. Serious harms are rare. However, minor reactions are common. These include pain where the injection was given, tiredness, and muscle pain. These reactions are mild and usually resolve within one to two days.

HIQA looked at the impact of adding the shingles vaccine to the adult vaccination programme. At the current vaccine price, it found that adding shingles vaccination to the routine immunisation schedule for all adults aged 65 years and over would not be an efficient use of resources. Offering the vaccine would also cost a lot of money even after considering savings because fewer people go to the GP or are admitted to hospital. For example, if the vaccine was offered to everyone aged 65 years and over and half of people took up this offer, it would cost the HSE an extra €218 million over the first five years. If the vaccine was offered just to those turning age

65 years old and half of people took up this offer, it would cost the HSE an extra €53.3 million over the first five years.

Adults currently receive their vaccines from either their GP or at the pharmacy. One of the main challenges with providing a shingles vaccination programme would be making sure that enough trained people are available to administer another vaccine. It would be important to provide an information campaign for adults as they make the decision on whether they should receive the vaccine. This campaign should include information about the potential complications from shingles and address concerns they may have regarding the safety and effectiveness of the shingles vaccine.

People who develop shingles can suffer from long-term pain and complications. A vaccine is available that is safe and effective, but the benefit of the vaccine decreases over time. At the current vaccine price, we found that adding shingles vaccination to the routine immunisation schedule for all adults aged 65 years and over would not be an efficient use of resources. While making the vaccine available to all would remove an imbalance in fair access to the vaccine, this could create unfairness in other ways. The health service needs to aim for a fair distribution of benefits and burdens for the whole population of Ireland.

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