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HEALTH AND HEALTHCARE SYSTEMS

# Measuring the full value of flu prevention among APAC's ageing population

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Recording information such as influenza vaccine rates and hospitalisations can underpin healthy ageing policy.  
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This article is part of:

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- **Populations across the Asia Pacific (APAC) region are getting older, which means countries should make healthy ageing a strategic priority.**
- **They could start by tackling overlooked diseases, such as influenza, which can have broad societal and economic effects.**
- **Prevention should be a policy priority, underpinned by evidence including influenza mortality and hospitalisation rates, and vaccination status.**

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Better living standards, improved public health and medical innovation is making healthy ageing much more common across the Asia Pacific (APAC) region. And as populations grow older across APAC, [healthy ageing should be embraced](#) as a strategic priority, rather than a problem to solve.

This shift could begin by addressing the diseases that are often overlooked, such as influenza. The flu is usually a temporary setback for younger, healthy adults, manageable with rest and over-the-counter remedies. But the burden can be far more significant for older adults, with broader societal and economic implications.

Infections like influenza can trigger [inflammation in the body](#) which can make people more frail. Severe influenza can trigger hospitalisation and functional decline. It can also engender a range of cascading complications and, in some cases, necessitate long-term care.

For instance, influenza [increases the risk](#) of having heart attack and pneumonia by 10 and 8 times respectively. This translates into increased caregiving responsibilities, ed work, significant burnout and financial stress among families. It also means

## Have you read?

- [Here's all you need to know about influenza around the world](#)
- [The Spanish flu and the global impact of the largest influenza pandemic in history](#)
- [How to boost immunization for Asia-Pacific's ageing population](#)

Such results were seen across APAC in late 2025. During the rainy season, Thailand logged [more than 30,000 new cases](#) of influenza in a single week, while Japan declared a [nationwide flu epidemic](#). The Philippines surpassed epidemic thresholds for influenza infections, recording [a 10% rise](#) in private hospital admissions. Similar upward trends were reported in [Singapore](#) and [Taiwan, China](#).

That's why tackling the substantial burden of influenza on older adults was squarely on the agenda at the Asia Pacific Economic Cooperation ([APEC](#)) [Policy Dialogue on Reducing Influenza Burden in the Elderly](#), held in Guangzhou, China in February 2026. To do this, prevention must be tailored to ageing immune systems and real-world risk.

## Shifting from 'cost' to 'value'

According to the World Health Organization (WHO), traditional influenza vaccines are [less effective in older adults](#) and so, since 2022, it has recommended high-dose influenza vaccines for older adults.

Japan includes the high-dose influenza vaccine in its [domestic immunisation programme](#). Taiwan, China has also announced that [over 200,000 doses](#) of the

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Other APAC economies should also accelerate policy reforms and investments to ensure that their ageing populations have the necessary access to vaccines tailored to their needs.

But one of the challenges that slows policy evolution in this area is that influenza prevention decisions are often driven by narrow, short-term budget discussions, rather than being evaluated as part of a broader healthy ageing strategy. The most expensive influenza strategy is one that repeatedly manages outbreaks rather than preventing them.

The cost of underinvesting in prevention is inevitably paid later through avoidable hospitalisations, the need for prophylactic use of antivirals, overwhelmed healthcare systems, caregiver burdens, reduced workforce participation and diminished quality of life. Managing the effects of the 2023-2024 influenza season among the 65 and older population cost the US [almost \\$4.3billion](#), for example.



A [study in Japan](#) demonstrated that switching from standard-dose to high-dose vaccines in adults aged over 65 is cost-effective and reduces influenza cases, related hospitalisations and deaths, as well as outpatient and emergency department visits. And a [multicentre study](#) in South Korea shows that, despite vaccination rates in adults aged over 65 reaching 82.2%, the effectiveness of standard-dose vaccine against certain types of influenza was significantly lower in this population than in younger adults.

This suggests that protection may be more modest in older adults. Instead, research shows that high-dose influenza vaccines could help reduce hospitalisations by [an additional 31.9%](#) compared to standard-dose influenza vaccines.

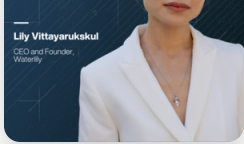
## Why acting now is smart and economical

Influenza returns every year. Whether it remains a manageable risk or a recurring shock to families, health systems and economies will depend on whether governments act now. In rapidly ageing regions, strengthening prevention must be a policy priority – and that starts with better evidence.

Building a stronger evidence base across influenza mortality, hospitalisation, infection severity, long-term outcomes, vaccination status and the economic value of enhanced influenza vaccines will enable policy-makers to act with confidence. This can improve older adults' access to vaccines tailored to their needs as part of comprehensive healthy ageing strategies.

With better prevention tools, wider access to health care and clearer measurement of value, APAC governments can ensure that longer lives are not simply endured, but are productive and actively supported.





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