

EPIDEMIC OBSERVATION UNIT

URGENT NOTICE

Large Scale Trial of Influenza Vaccine in old persons

Trials conducted by the Medical Research Council's Committee on Influenza and Other Respiratory Virus Vaccines during the past two winters have shown that oil-adjuvant influenza vaccines were remarkably free from reactions and produced antibody and clinical protection lasting for at least two years after a single injection.

Members of the College of General Practitioners contributed to this result by inoculating some 1,600 old persons in their practices and by keeping under observation a larger number. However, too few old people were given vaccine to show whether the procedure reduced mortality during the winters in question.

Influenza in old people is deceptive; it appears to attack them far less often than the young and the clinical course is generally less acute. Though the death rate among the elderly is always high at times when influenza is epidemic, in only a small proportion of the death certificates is influenza actually mentioned. One may strongly suspect that influenza is really responsible for most of the deaths but the circumstances which favour influenza may have a similar effect on other infections which should perhaps share the blame.

The elucidation of this problem is a matter of considerable practical importance and can probably be answered only by the controlled use of a potent influenza vaccine on a large scale over several years. The M.R.C. influenza committee realize the difficulties in arranging such a trial but are anxious to know whether the College of General Practitioners would be willing and able to undertake the task.

It is proposed that *the form of the enquiry should be extremely simple so that as many doctors as possible will feel able to take part.* Some 200 or more would be needed, each of whom would undertake to inoculate at least 50 patients in their practice aged 65 years and over. Two oil-adjuvant vaccines would be under trial, one prepared

from an A and the other from a B strain. Individual patients would be given one vaccine or the other by some simple method of random allocation and the injections could be spread over several months. The doctor would be requested to complete a brief index card for each patient, stating:

1. Name, address, sex and date of birth.
2. Date of inoculation and vaccine serial number.
3. Whether patient suffered from chronic bronchitis or other debilitating disease.

Annually, for the duration of the survey, he would be sent a list of the patients he had inoculated and he would be asked to indicate whether they were still registered with him. In the event of a patient's death, a copy of the death certificate and a few additional comments would be required.

ACTION

To manufacture sufficient vaccine on time, we must know almost at once the approximate number of doctors willing to take part in the extended trial. If possible, we want many more than 200 doctors to undertake this vaccination.

If you are prepared to help, please send a post card *immediately* saying so, to the

Director, Epidemic Observation Unit, Corran, Peaslake, Guildford, Surrey.

You will be sent further details later.

(*N.B.* Those doctors who joined the previous trials and are continuing, need do nothing more at present; they will receive separate notices later.)