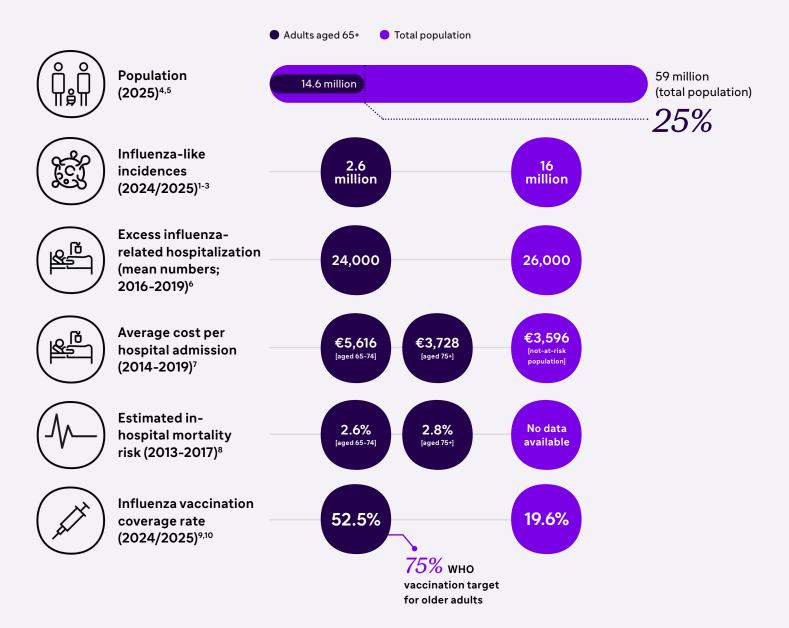




Italy recorded its *highest-ever number of influenza-like incidence (ILI) cases in 2024/2025*,¹⁻³ yet persistent gaps in hospital and mortality data make it difficult to fully assess the impact – especially among older adults, who remain under-protected despite long-standing policy commitments.

Estimated influenza burden





Data and Limitations

Italy recorded an estimated 16 million ILI cases during the 2024/2025 season — the highest incidence since national surveillance began. However, official data for age-specific hospitalizations and ICU admissions have not been published.

Adults over the age of 65 were the largest contributor to excess influenza-related hospitalizations. Over the course of three influenza season between 2016 to 2019, the 3-season mean number of excess influenza-related hospitalizations was approximately 24,000 for adults over the age of 65.6 In comparison, the mean number of excess hospitalizations was 26,000 for the total population over the same period.6

Though it can be seen that older adults are more greatly impacted by the burden of influenza, the inconsistency in data collection reflects *persistent gaps in influenza surveillance*, making it difficult to fully quantify the impact of influenza — especially on older populations — or track year-on-year shifts in disease severity.

The Economic Impact

The most recent cost data comes from a 2024 study analysing influenza seasons between 2014/2015 and 2018/2019, which estimated an average hospitalization cost of €3,596 for people not considered to be at-risk. The same study estimated that total direct costs (mostly hospitalization-related) amounted to approximately €9.7 million, with around 95% of this borne by hospital care. Notably, individuals aged 65 and older and those with comorbidities accounted for nearly half of these hospitalization costs with adults aged 65-74 averaging €5,616 per hospitalization, and those aged 75+ averaging €3,728 per hospitalization.





Policy Landscape

Italy maintains a longstanding national recommendation for annual influenza vaccination and offers the vaccine free of charge to adults aged 60 and over. Despite this, vaccination coverage in this group was only 52.5% during the 2024/2025 influenza season, well below the WHO's 75% target. The vaccination coverage in this group was only 52.5% during the 2024/2025 influenza season, well below the WHO's 75% target.

For the 2024/2025 campaign, authorities authorized eight influenza vaccines, including formulations specifically indicated for older adults. However, authorization does not guarantee that all vaccines were marketed or available across the country. *Systemic barriers persist* — from regional tenders to uneven distribution logistics and inhomogeneous access to vaccination among Regions, and a declining number of general practitioners, which continues to impact timely and equitable vaccine delivery. 13,14

The 2024/2025 season reinforced a recurring challenge: strong policy intent has not yet translated into consistent, real-world protection for high-risk groups. As Italy's population ages, improving both access and uptake among older adults will be critical to reducing the growing annual burden of influenza.

Systemic barriers impact vaccination rates
- despite free access for people aged 65
and over, eight vaccines being available and
influenza vaccination being ingrained in
national policy, barriers remain



Ministry of Health guideline delays



Regional tender delays



Uneven distribution



Fewer GPs



Logistical inconsistencies

Vaccination coverage in adults 65+ was 52.5%

The WHO vaccination coverage rate goal is 75% in this age group





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