Disclaimer: We kindly ask to acknowledge that due to the diverse and heterogeneous nature of the questions and dynamic situations they pertain to, some of the information might be incomplete or only correct for the time being. Thus, please consider the date and date of last update with the below information. All available information was provided by a country representative from the PHIRI network during or in connection to the respective meeting.

Date: 12.02.2024

Table 1: Country responses: Covid infection in vaccinated people in autumn/winter

Country	Topic: Covid infection in vaccinated people in autumn/winter
Austria	Recommendations to the public:  Booster vaccinations are possible for children from the age of 6 months according to the Austrian vaccination plan for the 2023/2024 season, and are also recommended in case or risk factors.  Starting from autumn 2023, only XBB.1.5-adapted vaccines are recommended for COVID-19 vaccinations.  A booster dose of this vaccine is deemed sufficient for optimal protection for most individuals.  After a minimum interval of 6 months from the last vaccination or infection, a booster dose is recommended for all individuals seeking protection.  Individuals aged 60 and above, as well as certain high-risk groups like immunocompromised individuals, may receive the booster earlier (after 4 months).  However, even for these groups, a minimum interval of 4 months from the previous vaccination or infection should not be shortened.  Current data sources on vaccination rates:  The SARI Dashboard provides data on hospital admissions in Austrian healthcare facilities however, it does not offer information on the vaccination status of patients.  Although there is an immunization data dashboard available, it solely registers COVID-19 vaccinations recorded in the electronic vaccination record. Consequently, COVID-19 vaccinations have been declining steadily since October 1, 2023, albeit not consistently.
	Number of persons with a vaccination documented in the "e-Impfpass" since September 23 up until Feb. 24  Hospital Admissions with COVID-19-diagnoses by age and sex of the patients from September 23 to Feb 24  Feb. 24  Hospital Admissions with COVID-19-diagnoses by age and sex of the patients from September 23 to Feb 24  Feb. 24  Feb. 24  Foot prevention and sex of the patients from September 23 to Feb 24  Feb. 24  Foot prevention and sex of the patients from September 23 to Feb 24  Feb. 24  Feb. 25  Feb. 26  Feb. 26  Feb. 27  Feb. 26  Feb. 27  Feb. 27  Feb. 28  Feb. 28  Feb. 28  Feb. 28  Feb. 29  Feb. 29  Feb. 20  Fe
	80 years and older  5-14  45-59  60-69  0 - 4 years  5 - 14 years  15 - 29 years  60 - 69 years  60 - 69 years  70 - 79 years  80 years and older  80 years and older  80 years and older
	Vaccination rate and COVID-19 hospital admission rate:
	Total amount of hospital admissions with SARI-diagnoses per week, calender week 39, 2023 to 4, 2024  Most of the data reported up to this point  1,000  1,000  1,000  40,000  1,000  40,000  1,000  40,000  1,000  40,000
Belgium	In the Acute respiratory infections weekly bulletin ( <a href="https://www.sciensano.be/fr/biblio/bulletin-infections-respiratoires-aigues-semaine-05-2024">https://www.sciensano.be/fr/biblio/bulletin-infections-respiratoires-aigues-semaine-05-2024</a> ) vaccine effectiveness estimates over a giver

	period are usually provided. However, for the ongoing winter season, there are only few
	hospitals reporting admissions, so the confidence intervals are huge, and estimates are not
	reported.
	For infections: as testing only still occurs in a very specific group of individuals (e.g. nursing
	home residents, HCW), calculating vaccine effectiveness against infection will very easily lead
	to wrong conclusions. Therefore, for this season there is no reliable information to present (yet)
	Regarding more general information on COVID-19 we have a Dashboard updated weekly
	every Thursday containing information cases, mortality, vaccination
	(https://lookerstudio.google.com/embed/u/0/reporting/c14a5cfc-cab7-4812-848c-
	0369173148ab/page/ZwmOB)
	On the Dashboard there is no information on the linkage between vaccination on the one hand
	and infection / hospitalization on the other hand.
Portugal	If there is a different situation in Europe, it is that nowadays, around 60% of vaccinations are
	distributed by pharmacies.
	So, pharmacies have built up a network for the distribution of vaccinations since last year.
	Another thing is that the vaccination rate for influenza is a little higher.
	Vaccination is free for people over sixty. That seems like a good policy to encourage and
	motivate the at-risk group to get vaccinated.
	We also see that people are feeling the stress of mortality and understand the danger of both
	flu and COVID. There has been an increase every week since January.
Slovenia	Testing is still free of charge at the doctors, ibut not widely performed
	There are not as many testing centres as there used to be, and the tests are mainly only carried
	out for those who have a severe course of the disease or risk factors for developing a severe
	form of COVID. For example, less healthy adults, who usually survive COVID without major
	complications, are not usually tested, so it is not actually possible to give an exact number of
	sufferers among those vaccinated. Since September 2023, 7023 people have been vaccinated
	against COVID, and of these, 225 people fell ill fourteen days or later after vaccination. However,
	due to the way the tests are carried out and the limited scope, these numbers are most likely
	underestimated.

