Why equating flu with just a cold is a misnomer

sanofi

Adults living with chronic health conditions, by age¹

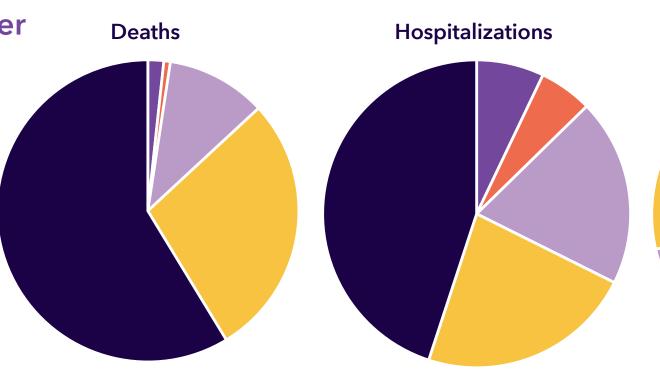
Illnesses

Serious consequences of influenza on patient health occur in older and younger patients

During the 2019-2020 influenza season, severe disease was highest in persons 50+ while illness most affected younger patients



Reference: Burden of flu. Centers for Disease Control and Prevention. Updated October 7, 2022. Accessed March 14, 2024. https://www.cdc.gov/flu/about/ burden/2019-2020.html



100%

90%

80%

70%

60%

50%

40%

30%

20%

10%

0%

The majority of adults 50+ have been diagnosed with at least one chronic condition¹

6X

Increased risk of heart attack within 7 days of influenza infection in adults with heart disease²

~29% Adults 65+ years of age affected by diabetes³

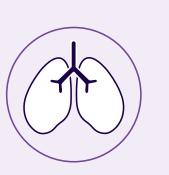
Adults 65+ are living with asthma4

COPD, chronic obstructive pulmonary disease; CVD, cardiovascular disease. References: 1. Boersma P. et al. Prevalence of Multiple Chronic Conditions Among US Adults, 2018. Prev Chronic Dis 2020; 17:200130 Accessed 15 March 2024. https://www.cdc.gov/pcd/issues/2020/20_0130.htm#T1_down. 2. Flu and Chronic Health Conditions. NFID. Accessed March 15, 2024. https://www.nfid.org/infectious-diseases/flu-and-chronic-health-conditions/.3. National Diabetes Statistics Report. CDC. Accessed March 15, 2024 https://www.cdc.gov/diabetes/data/statistics-report/index.html.4.National Diabetes Statistics Report. CDC Accessed March 15, 2024 https://www.cdc.gov/diabetes/data/statistics-report/index.html.

Often underestimated, influenza has direct and indirect impacts

Impact of infection may include:

Cardiovascular Disease



Respiratory

Pneumonia

- Primary viral¹
- Secondary bacterial²

Asthma³

COPD exarcerbations⁴



Acute MI⁵⁻⁸

Heart failure^{9,10}

Myocarditis¹¹

Stroke^{12,13} VTE¹⁴

Functional Decline



ADL decline¹⁵

Weight loss¹⁵

Pressure ulcers¹⁵

Functional loss and higher frailty¹⁶

Diabetes

18-29



Impaired blood glucose control¹⁷

Diabetic ketoacidosis¹⁷ Increased abnormal glycemic events in patients with type 2 diabetes¹⁸

Renal Disease

60%

32%

28%

50-64

2 or more

34%

20% 21%

13%

30-49

None 1

32%

43%

65+



Rhabdomyolysis¹⁹ Acute kidney injury¹⁹

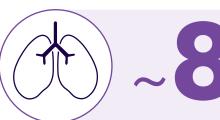
ADL, activities of daily living; MI, myocardial infarction; VTE, venous thromboembolism References: 1. Murata Y, et al. J Infect Dis. 2007;195(7):1029-37. 2. McCullers, JA. Clin Microbiol Rev. 2006;19(3):571-82. 3. Cates CJ, et al. Cochrane Database Syst Rev. 2013;(2):CD000364. 4. Kopsaftis Z, et al. Cochrane Database Syst Rev. 2018;6:CD002733. 5. Udell JA, et al. JAMA. 2013;310(16):1711-20. 6. Udell JA, et al. Expert Rev Cardiovasc Ther. 2015;13(6): 593-96. 7. Kwong JC, et al. N Engl J Med. 2018;378(4):345-53. 8. Siriwardena AN, et al. CMAJ. 2010;182(15):1617-23. 9. Kytomaa S, et al. JAMA Cardiol. 2019;4(4):363-69. 10. Panhwar MS, et al. JACC Heart Fail. 2019;7(2):112-17. 11. Rezkalla S, et al. WMJ. 2010;109(4):209-13. 12. Warren-Gash C, et al. Eur Respir J. 2018;51(3):pii1701794. 13. Boehme AK, et al. Ann Clin Transl Neurol. 2018;5(4):456-63. 14. Zhu T, et al. Thromb Haemost. 2019;102(6):1259-64. 15. Gozalo PL, et al. J Am Geriatr Soc. 2012;60(7):1260-67. 16. Andrew MK, et al. J Am Geriatr Soc. 2021;69(3):696-703. 17. Diepersloot RJA et al Diabetes Care. 1990; 13(8):876-82. 18. Samson SI, et al. J Diabetes Sci Technol. 2021;15(1):44-52. 19. Watanabe, T. Eur J Pediatr. 2013;172(1):15-22.

Influenza and its association with risk of pneumonia, heart attack, and stroke



Increased risk of stroke¹

Adjusted IRs^a, day 1-3 post-infection, 95% CI 1.07-56.9, n=762 individuals 40+ years of age



Increased risk of pneumonia²

Matched OR, 0-6 days after infection, 95% CI 4.8-14.5, n=3234 children 0 to 14 years of age



Increased risk of heart attack¹

Adjusted IRs^a, day 1-3 post-infection, 95% CI 2.37-40.5, n=1227 individuals 40+ years of age



CI, confidence interval; IR, incidence ratio; OR, odds ratio.

2. Kubale J, et al. Clin Inf Dis. 2021;73(11):e4288-e4295.

References: 1. Warren-Gash C, et al. Eur Respir J. 2018;51(3):1701794.

^aAdjusted for age and season.

Protecting against influenza through vaccination is associated with

36% lower risk of cardiovascular events

Influenza vaccine was associated with a lower risk of composite cardiovascular events (RR, 0.64 [95% CI, 0.48-0.86]) in a meta-analysis (6735 patients, mean age 67 years, 36.2% with a cardiac history; mean follow-up time, 7.9 months).

Reference: Udell JA. et al. JAMA. 2013:310(16):1711-20.

ACIP recommendation acknowledges increased risk in elderly patients^{1,2}

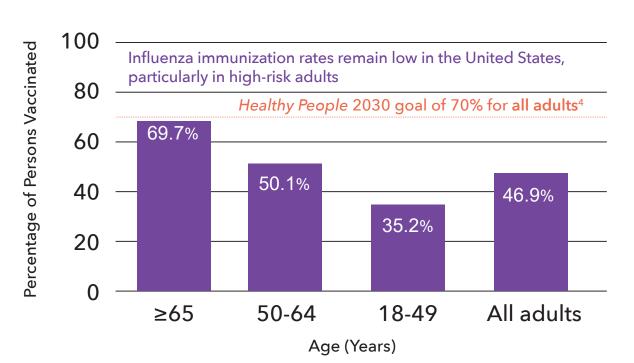
Routine annual influenza vaccination for all eligible persons ≥6 months

As of the 2023/24 flu season, the use of higher dose and adjuvanted vaccines are preferentially recommended for adults age 65 years and older

If none of the preferentially recommended vaccines are available, adults 65 years and older should get any other age-appropriate influenza vaccine instead

References: 1. Grohskopf LA, et al. MMWR Recomm Rep. 2023;72(No. RR-2):1-25. 2. Flu & people 65 years and older. Centers for Disease Control and Prevention. Updated August 25, 2022. Accessed March 14, 2024. https://www.cdc.gov/flu/highrisk/65over.htm 3. Flu vaccination coverage, United States, 2022-23 influenza season. Centers for Disease Control and Prevention. Updated October 18, 2022. Accessed March 14, 2024. https:// www.cdc.gov/flu/fluvaxview/coverage-2223estimates.htm 4. Healthy people 2030. U.S. Department of Health and Human Services. Accessed June 7, 2022. https://health.gov/healthypeople/objectives-and-data/browse-objectives/vaccination/increase-proportion-people-who-get-flu-vaccine-every-

Vaccination coverage, 2022-2023 influenza season³





Influenza and its serious complications are underestimated: supporting the need for widespread influenza vaccination in all eligible patients