

Parsing chronological and biological age effects on vaccine responses

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A new editorial paper was published in *Aging*, titled, "Parsing chronological and biological age effects on vaccine responses."

Researchers Chris P. Verschoor and George A. Kuchel from Health Sciences North Research Institute in Ontario, Canada, began this [editorial](#) by writing that the COVID-19 pandemic illustrated that older age, particularly when accompanied by common chronic illnesses of aging, is arguably the most significant population attributable factor for severe outcomes of acute respiratory infection, including the risk of hospitalization, disability and death.

"In the absence of widely available and highly effective treatments, vaccines remain our most powerful tool to help overcome this [vulnerability](#) through the prevention of primary infection, and far more importantly, by improving clinical outcomes once infection does take place," write the researchers.

In the case of SARS-CoV-2, vaccine effectiveness (VE) against hospitalization was remarkable for dominant strains prior to omicron, whereas for influenza or *Streptococcus pneumoniae* VE ranges from 80% to

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