To whom it may concern,

Adults born with oesophageal atresia and/or tracheo-oesophageal fistula (OA/TOF) have a considerable frequency of respiratory morbidity, with nearly a half having respiratory symptoms each year. (1)

Long term health sequelae include physician diagnosed asthma in 30%, recurrent respiratory infection in over half of adults born with OA/TOF, a diagnosis of pneumonia in working age adults in over half of patients (2) and a diagnosis of bronchiectasis in children evidenced radiologically in up to 27% (3). Unfortunately, the research is not available in adults yet, but it is reasonable to assume the diagnosis would only increase in frequency in adults born with OA/TOF, both due to poorer treatment and surgical options available in their childhood, and due to progression of disease from recurrent aspiration events.

Given the available data, those adults born with OA/TOF with respiratory conditions represent a high-risk group for respiratory viruses (such as influenza and Covid SARS) and streptococcus pneumononieae.

Given this evidence, TOFS, the national patient support group for the condition recommends that this patient group should receive annual influenza vaccines, Covid vaccines (both routine and booster) and the Pneumococcus vaccine from their General Practitioner/local NHS provider, and we would be grateful if you could add them to the practice/national register so they are invited for these vaccine programmes according to their schedule.

Yours faithfully,

Diane Stephens (CEO)
Duncan Jackson (Chairman)

On behalf of TOFS trustees and medical liaison and research sub-committee