

Special Issue

Immunosenescence and Vaccine Immune Responses

Message from the Guest Editor

This Special Issue is focused on the impaired immunity with age or other related special pathological processes, a phenomenon called immunosenescence, resulting in an increased vulnerability of individuals to infectious diseases, age-related inflammatory diseases and also a diminished response to vaccination. The collection within this Special Issue aims to gather original articles and reviews or communications that offer insight into the underlying biology of immunosenescence, immune response to vaccines, the assessment of cellular and humoral immune responses induced by vaccines, the durability of antibody and cellular immunity, response differences associated with varying vaccine platforms, differences in vaccine populations, innate responses in vaccine-mediated protection, etc.

Guest Editor

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About the Journal

Message from the Editor-in-Chief

Vaccines (ISSN 2076-393X), founded in 2013, now has a firm history of publishing peer-reviewed, state-of-the-art research papers on vaccines and vaccination in the broadest sense. Areas covered include, but are not limited to, novel and emerging vaccine technologies, building on in-depth knowledge of what constitutes a protective immune response. These can be new vaccines for old diseases, or old vaccines for new diseases. Vaccines against cancer and autoimmune diseases explicitly are also within the scope of the journal. Because public opinion and even government policies towards vaccines and vaccination have changed, vaccine policy and public health issues are major concerns. Climate change will also have an impact on the spread of infectious diseases, and thus also on vaccine and vaccination policies worldwide.

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Rapid Publication:

manuscripts are peer-reviewed and a first decision is provided to authors approximately 18.1 days after submission; acceptance to publication is undertaken in 2.8 days (median values for papers published in this journal in the second half of 2025).