Introduction The benefits of influenza vaccination among the elderly and people with chronic conditions have been shown in several studies. The aim this study was to assess the influenza vaccination coverage in the elderly, identifying associated factors and reasons for non-compliance.

Methods This was a cross-sectional population-based study with stratified clustered two-stage sampling in Campinas, São Paulo, Brazil in 2008–2009.

Results Among the 1517 elderly, 62.6% reported influenza vaccination during the previous year. Physical activity in leisure, self-reported diabetes and recommendation from a healthcare worker were positively associated with the vaccination, while occupational activity and hospitalisation were negatively statistically related. Except for diabetics, the vaccination didn’t reach adequate levels in elderly with chronic diseases. Reasons for non-compliance were: not considered necessary and belief that the vaccine causes side effects.

Conclusion Socioeconomic conditions, lifestyle and physical mobility did not restrict adherence to vaccination, but the coverage was below the target of 80% established by the Ministry of Health. Campaigns focused on the elderly aged 60–69 years and on patients with chronic conditions, beyond the guidance of health professionals can expand coverage to groups with low adherence to the campaigns.

Introduction Motorcycle accidents are increasing in several parts of the world (Asia, Africa and Latin America) and are associated with high levels of mortality and morbidity.

Methods Mortality data and estimates of resident population, stratified by age and sex were obtained from the Brazilian Mortality Information System (SIM) for 1996–2007. Age-standardised mortality rates were calculated by the direct method using the 2000 Brazilian population. Trends were modelled using linear regression. Joinpoint regression method was used to study the annual per cent change in mortality rates.

Results There were 580 deaths of motorcyclists during the studied period. They were men (94.3%), aged between 20 and 29-year-old (73.8%) and mulattos (71.0%). Standard mortality rate of motorcyclists among males was 1.9 death/100 000 males in 1996 and increased to 7.2 deaths/100 000 males in 2007. In 1998 there were 2.0 deaths/10 000 motorcycles and in 2007 there were 10 deaths/10 000 motorcycles in DF. The estimated annual increase in age-standardised mortality rate was 0.48 deaths/100 000 men (95% CI 0.31 to 0.65; p<0.001). The annual per cent change in age-standardised mortality rate among males in the period between 1998 and 2007 was 36.2% (95% CI 21.2% to 53.2%; p<0.05).

Conclusion There was an important increase in mortality due to motorcycle accidents. The fleet explained in part this increase. But additional studies are necessary to investigate factors associated to this type of transport accidents.