

Immunization Pearls

Dane County Immunization Coalition

July 2011

MEASLES IN THE US – AN UPDATE

Measles, a vaccine-preventable, highly contagious acute viral disease, can lead to major complications and death. In 2011, several outbreaks have occurred nationally. However, no confirmed cases of measles have been reported in the state of Wisconsin, although sporadic case reports and investigations are on-going. For the year 2011, thirty-nine (39) suspect cases have been investigated in the state as of June 23, 2011, with 3 suspect cases investigated in Dane County.

From January 1 to June 17, 156 confirmed measles cases were reported to the CDC. Of these, 87% were associated with importations from measles-endemic countries or countries where large outbreaks are occurring, and 85% were unvaccinated or had undocumented vaccination status.

The year's largest U.S. outbreak, in Hennepin County, MN, has ended. Twenty of the cases reported there this spring were linked to a person who acquired the infection in Kenya. An outbreak is now underway in northern Indiana. Large outbreaks continue in Europe, Africa, Asia and elsewhere.



To reduce outbreaks of measles among unvaccinated or inadequately vaccinated individuals, the CDC recommends that healthcare providers:

1. Ensure that all patients are up-to-date on MMR;
2. Protect all U.S. residents older than 6 months who travel anywhere abroad by administering MMR vaccine to them, if needed, prior to departure;
3. Consider a measles diagnosis in anyone with a febrile rash illness lasting 3 days or more, a temperature of 101°F (38.3°C) or higher, and clinically compatible symptoms (cough, coryza, and/or conjunctivitis) who has recently traveled abroad or has had contact with someone with a febrile rash illness;
4. Isolate measles case-patients and immediately report cases to local health departments to ensure a prompt public health response; and
5. Obtain specimens for testing, including viral specimens for confirmation and genotyping.

Instructions for specimen collection and testing are outlined in the Wisconsin Measles Investigation and Control Guidelines: www.dhs.wisconsin.gov/immunization/pdf/Measles_Guidelines.pdf.



The Dane County Immunization Coalition has a new logo, thanks to UW Health Marketing Department. A big THANKS to them for their generosity!

Inside This Issue:

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- Student Immunization Law Age/Grade Requirement

UPCOMING EDUCATIONAL OPPORTUNITIES

Immunization Update 2011

CDC webcast

Thursday, August 4, 2011

Live satellite broadcast and webcast

www.cdc.gov/vaccines/ed/imzupdate/default.htm



DCIC Immunization Symposium

Tuesday, Oct. 4, 5:15-8:30 p.m.

American Family Insurance Training Center

2011 Immunization Update with Patsy Stinchfield, MS, RN, CPNP from Children's Hospitals and Clinics of Minnesota and Dr. James Conway, Pediatric Infectious Disease, UW School of Medicine and Public Health.

For more information, see link:

www.publichealthmdc.com/DCIC/documents/ImmunizationUpdateSaveTheDate.pdf



Immunization Grand Rounds

- Wednesday, Oct. 12, 7:30-8:30 a.m.
St. Mary's Health Center
- Thursday, Oct. 13, 7:30-8:30 a.m.
UW Health Science Building
- Friday, Oct. 14, 7:00- 8:00 a.m.
Meriter, Bolz Auditorium

Adolescent Immunization Update with Dr. Thomas Saari, Professor Emeritus of UW Pediatric Infectious Disease and long-time public advocate for immunizations.

For more information, see link:

www.publichealthmdc.com/DCIC/documents/ImmunizationGrandroundsflyer.pdf

LIMITED FREE ADULT VACCINES AVAILABLE AT PUBLIC HEALTH MADISON & DANE COUNTY

Public Health Madison & Dane County (PHMDC) receives vaccine from the Wisconsin Immunization Program for adults who qualify under their guidelines. The qualifications vary from year to year and do not include all recommended vaccines for adults. The State supplied free vaccines are available at the regularly scheduled immunization clinics at PHMDC. Availability of adult vaccines and general immunization clinic schedules are available at: www.publichealthmdc.com/disease/immunizations/clinics.cfm. National adult recommended immunization schedule available at:

www.cdc.gov/vaccines/recs/schedules/adult-schedule.htm#everyone

- There are many recommended vaccines for adults to maintain good health and protect the vulnerable people around them, such as infants or immune-suppressed individuals.
- If an adult has Medical Assistance or health insurance that covers vaccines, it is recommended they receive the vaccine from their health care provider.
- Children's vaccines are always free from Public Health.
- Concentra, Hometown Pharmacy (McFarland) and Walgreens are other locations that can provide some adult vaccines. Clients should call for cost and availability.





VACCINE ADVERSE EVENT REPORTING SYSTEM (VAERS)

The following information was excerpted from www.cdc.gov/vaccinesafety/Activities/vaers.html:

The National Childhood Vaccine Injury Act (NCVIA) requires health care providers to report adverse events (possible side effects) that occur following vaccination, so the Food and Drug Administration (FDA) and Centers for Disease Control and Prevention (CDC) established the Vaccine Adverse Events Reporting System (VAERS) in 1990.

An “adverse event” is any health problem or side effect that happens after a vaccination. While VAERS cannot determine if an adverse event was caused by a vaccine, it can help determine if further investigations are needed.

Why report? Among other things, reporting gives valuable information that helps the CDC and FDA make sure vaccines are safe. It also helps VAERS assess response to vaccines.

It’s easy for anyone to submit a report to VAERS, including patients, family members, healthcare providers, and vaccine manufacturers. Health care providers are required by law to report to VAERS any conditions on the Reportable Events Table (RET) <http://vaers.hhs.gov/resources/vaersmaterialspublications>, vaccine adverse events that are listed in the manufacturer’s package insert, and clinically significant or unexpected events following vaccination. There are three ways to report an adverse vaccine event – online, by fax, or by mail.

To complete the report online, go to:

<https://vaers.hhs.gov/esub>

To obtain a VAERS form to fax or mail you can:

- Download it at: http://vaers.hhs.gov/resources/vaers_form.pdf; or
- Send an email request to info@vaers.org; or
- Call (800) 822-7967; or
- Fax your request for a form to (877) 721-0366.

Instructions for completing a VAERS form can be obtained at <http://vaers.hhs.gov/helpinstructions>. The form itself will provide additional mailing and faxing information.

National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) is a separate federal program that provides compensation to individuals whose injuries may have been caused by certain vaccines. Reporting an event to VAERS does not constitute filing a claim with VICP. Information on VICP can be obtained by calling (800) 338-2383 or at their website at <http://www.hrsa.gov/vaccinecompensation/>.

IMMUNIZATIONS & PREGNANCY

Vaccines play an important role in keeping a woman and her baby healthy before, during, and after pregnancy. Ideally, women should be immunized before becoming pregnant to protect their babies from serious diseases.

Pregnant women should always consider the risks and benefits of the vaccine as well as the risks of the disease before receiving a vaccine. Many medications, including vaccines, are avoided during pregnancy because of **potential** harm to the mother or fetus. Currently, no evidence exists of risk from vaccinating pregnant women with any inactivated vaccines. Live attenuated vaccines, including MMR and varicella, are of greater theoretical concern.



Please reference the CDC chart titled “Immunization & Pregnancy.”

Also available at: www.cdc.gov/vaccines/pubs/flyers-brochures.htm#preg.

A great resource for information on all vaccines in pregnancy is: www.cdc.gov/vaccines/spec-grps/pregnant.htm.

Before Pregnancy

Before becoming pregnant, a woman should be up to date on routine adult immunizations.

Of particular importance are:

- **Tdap** (tetanus, diphtheria, pertussis)- important for preventing pertussis (whooping cough).
- **MMR** (measles, mumps, rubella)
- **Varicella**
- **Influenza**
- **Hepatitis B**, if at risk

Live virus vaccines (MMR and varicella) should be given four weeks prior to conception due to the theoretical risk of transmission to the fetus.

During Pregnancy

Vaccines recommended for all pregnant women:

- **Influenza (Inactivated)**
- **Tetanus/Pertussis** - A pregnant woman who has not received the pertussis booster vaccine (Tdap) should discuss with her health care provider the benefits and risks of receiving the vaccine if there is a high risk of pertussis. Watch for future recommendation changes due to the June 2011 ACIP meeting vote to recommend Tdap to unimmunized pregnant women over 20 weeks gestation. The current recommendations have NOT yet changed.

Vaccines that pregnant women should not receive:

- **Human papillomavirus (HPV)**

Live-attenuated vaccines are contraindicated for pregnant women because of the theoretical risk of transmission of the vaccine virus to the fetus. The following vaccines should not be administered to pregnant women:

- **Influenza live virus (nasal spray)**
- **MMR**
- **Smallpox**
- **Typhoid**
- **Varicella**
- **Yellow fever**

Vaccines for some pregnant women:

The following vaccines should be considered for pregnant women who are at risk for exposure to these diseases.

- **Hepatitis B**
- **Pneumococcal**
- **Rabies**
- **Meningococcal**
- **Hepatitis A**
- **Polio**

After Pregnancy

It is safe for a woman to receive vaccines right after giving birth, even while she is breastfeeding. Some immunizations should be given in the hospital before discharge to protect the mother and prevent spread to her newborn:

- **Pertussis** - If the mother has not yet received a dose of Tdap, she should be vaccinated right after delivery.
- **Influenza**
- **MMR**
- **Varicella**

See: www.cdc.gov/vaccines/pubs/preg-guide.htm for details of when these vaccines may be indicated. Specific recommendations for travel by pregnant women can be obtained at www.cdc.gov/travel.

IMMUNIZATION & Pregnancy



Vaccines help keep a pregnant woman and her growing family healthy.

Vaccine	<i>Before pregnancy</i>	<i>During pregnancy</i>	<i>After pregnancy</i>	Type of Vaccine	Route
Hepatitis A	If at high risk for disease	If at high risk for disease	If at high risk for disease	Inactivated	IM
Hepatitis B	Yes, if at risk	Yes, if at risk	Yes, if at risk	Inactivated	IM
Human Papillomavirus (HPV)	Yes, if 9 through 26 years of age	No, under study	Yes, if 9 through 26 years of age	Inactivated	IM
Influenza TIV	Yes	Yes	Yes	Inactivated	IM
Influenza LAIV	Yes, if less than 50 years of age and healthy; avoid conception for 4 weeks	No	Yes, if less than 50 years of age and healthy; avoid conception for 4 weeks	Live	Nasal spray
MMR	Yes, avoid conception for 4 weeks	No	Yes, give immediately postpartum if susceptible to rubella	Live	SC
Meningococcal: •polysaccharide •conjugate	If indicated	If indicated	If indicated	Inactivated Inactivated	SC IM
Pneumococcal Polysaccharide	If indicated	If indicated	If indicated	Inactivated	IM or SC
Tetanus/Diphtheria Td	Yes, Tdap preferred	If indicated	Yes, Tdap preferred	Toxoid	IM
Tdap, one dose only	Yes, preferred	If high risk of pertussis; otherwise, Td preferred	Yes, preferred	Toxoid/ inactivated	IM
Varicella	Yes, avoid conception for 4 weeks	No	Yes, give immediately postpartum if susceptible	Live	SC

For information on all vaccines, including travel vaccines, use this table with www.cdc.gov/vaccines

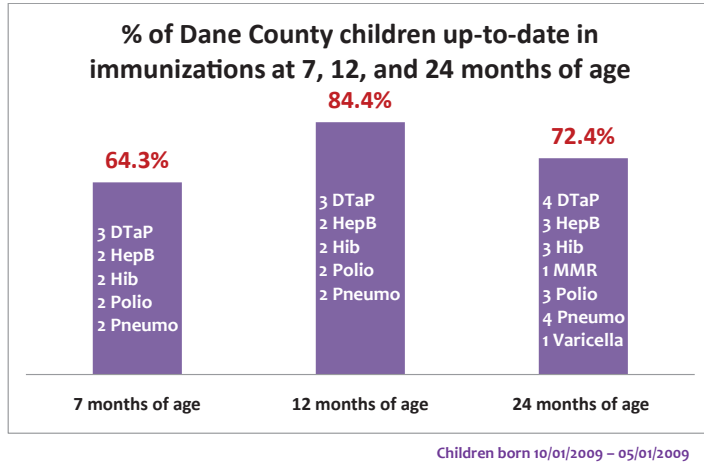
Get an answer to your specific question by e-mailing cdcinfo@cdc.gov or calling 800-CDC-INFO (232-4636) • 24/7 • English or Spanish



HOW ARE WE DOING? IMMUNIZATIONS IN DANE COUNTY

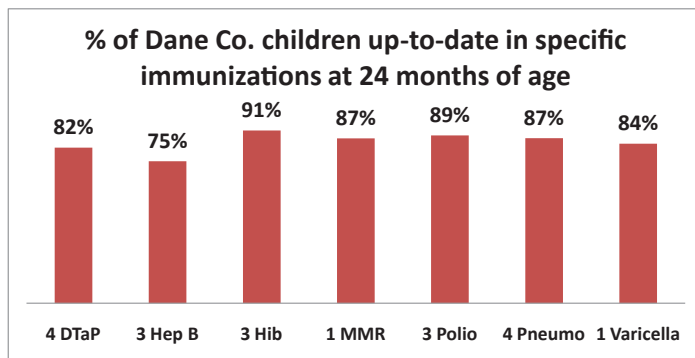
The Wisconsin Immunization Registry (WIR) has matured into an excellent source of data that health care providers can use to help direct their practice. Information on all babies born in Dane County has been entered into WIR since 1995. Almost all immunization providers in our county enter the immunizations they give into WIR.

Here are some very informative data.



There is plenty of room for improvement at each of these ages.

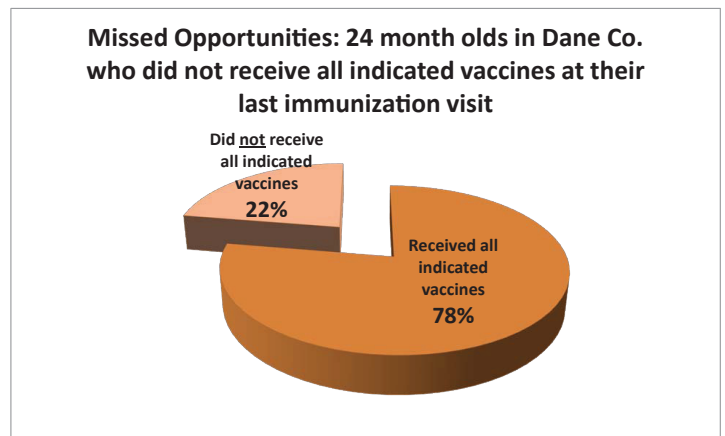
If a child is behind in one vaccine, they are not up-to-date, as shown above. Below is an analysis of which vaccines figure most in the overall up-to-date statistics.



The hepatitis B percentage is partially due to birth doses not being entered universally in 2009, when this cohort was born. Since earlier this year, birth doses of hepatitis B are automatically entered into WIR.

The DTaP percentage largely relates to providers missing the ACIP target of DTaP #4 by 18 months of age.

Rates above 90% are generally considered necessary to provide adequate coverage for effective herd immunity for most vaccines.



Many of the children not up-to-date by 24 months of age could have become current if they had received all recommended vaccines at the last health care visit at which immunizations were given. Probably, these children did not receive all the vaccines they needed because of a variety of factors – parent preference, provider hesitancy to give all the needed vaccines at one time, a clinic immunization schedule that varies from the ACIP schedule, or inadvertent overlooking of a vaccine.

Private medical clinics /providers can get all of the above reports for their own patient population. For more information on how to do so, contact Wilmot Valhmu, Immunization Program Advisor for the Southern Region at (608) 266-0008.

How can we improve our immunization rates and protection for the children of Dane County?

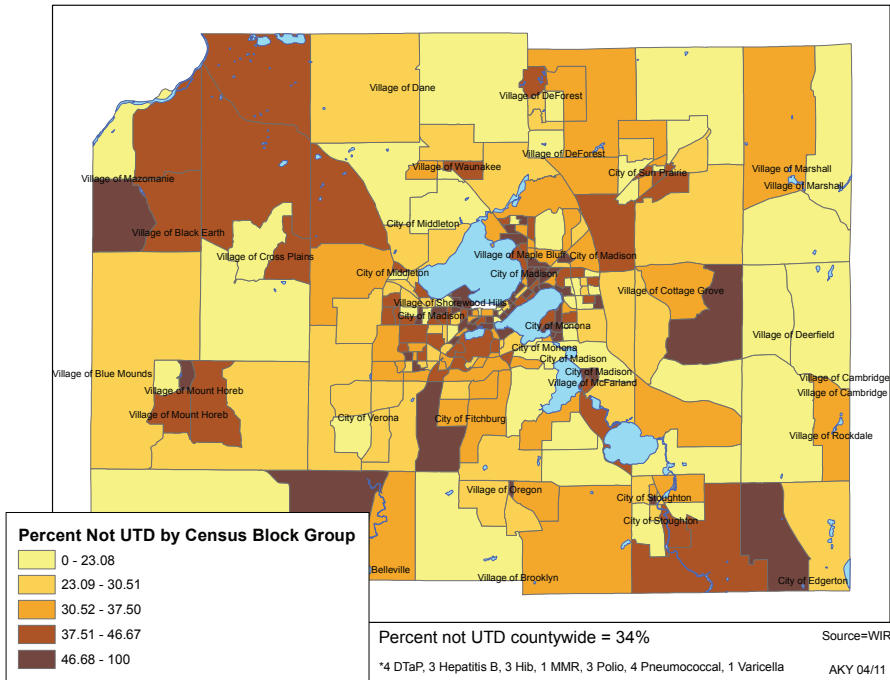
- Check immunization status at every patient visit, and immunize when able
- Immunize with all vaccines due at each visit
- Educate parents on vaccine safety, recommended immunization schedule, and risks of not immunizing on schedule
- Use recall and reminder systems for immunization

WHERE ARE THE CHILDREN WHO ARE NOT UP-TO-DATE?

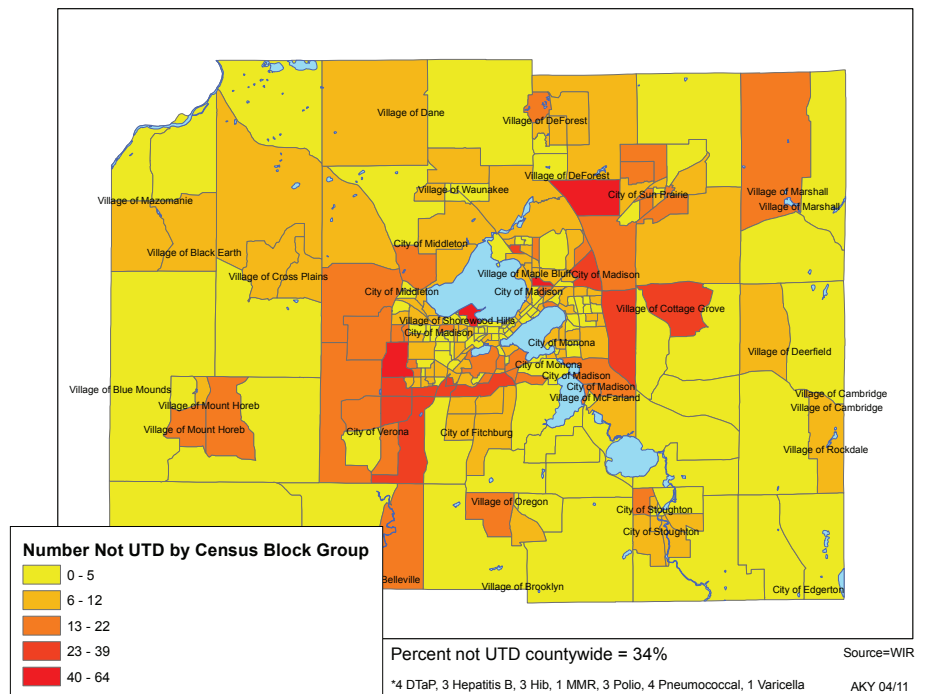
WIR data can give us data on immunization rates by geography. Here are two maps illustrating the immunization status of 24 month olds (born in 2008), by place of residence.

PHMDC staff recently used these maps to target distribution of information on its immunization clinics to medical clinics, day care centers, and other community sites (i.e., laundromats).

Percent of Children Born in 2008 With Immunizations Not Up to Date* at 24 Months of Age



Number of Children Born in 2008 With Immunizations Not Up to Date* at 24 Months of Age



These maps were produced by PHMDC’s Communicable Disease Epidemiologist, Amanda Kita-Yarbro.

Keep immunizing to keep kids up-to-date on their required school immunizations. The requirements for the upcoming school year are below. Remember to immunize with all recommended vaccines, not only the ones required by law.

STUDENT IMMUNIZATION LAW AGE/GRADE REQUIREMENTS - 2011- 2012 SCHOOL YEAR

The following are the minimum required immunizations for each age/grade level. For the complete list with footnotes see: www.dhs.wisconsin.gov/immunization/reqs.htm.

Age/Grade	Number of Doses					
Pre K (2 yrs through 4 yrs)	4 DTP/DTaP/DT ²		3 Polio	3 Hep B	1 MMR ⁵	1 Var ⁶
Grades K through 3	4 DTP/DTaP/DT/Td ¹		4 Polio ⁴	3 Hep B	2 MMR ⁵	2 Var ⁶
Grades 4 through 5	4 DTP/DTaP/DT/Td ²		4 Polio ⁴	3 Hep B	2 MMR ⁵	1 Var ⁶
Grades 6 through 9	4 DTP/DTaP/DT/Td ²	1 Tdap ³	4 Polio ⁴	3 Hep B	2 MMR ⁵	2 Var ⁶
Grades 10 through 11	4 DTP/DTaP/DT/Td ²	1 Tdap ³	4 Polio ⁴	3 Hep B	2 MMR ⁵	1 Var ⁶
Grade 12	4 DTP/DTaP/DT/Td ²	1 Tdap ³	4 Polio ⁴	3 Hep B	2 MMR ⁵	2 Var ⁶

See the progression of school immunizations required in the years ahead. Immunize eligible students when able, and avoid the school rush! For more details, see:

www.dhs.wisconsin.gov/immunization/varicellareqs.htm.

School Year	School Grades		Daycare
	Varicella*	Tdap*	
			5 mos thru 4 yrs
2011-2012	K thru 3, 6 thru 9, and 12	6 thru 12	
2012-2013	K thru 4, 6 thru 10, and 12		
2013-2014	K thru 12		

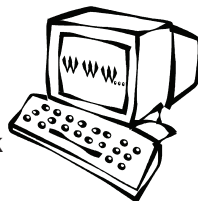
Public Health Madison and Dane County has recently joined Facebook. Check us out for updates on public health news and services in Dane County!



Check it out!

Dane County Immunization Coalition's website: www.immunizedanecounty.org

- ✓ Minutes from the General Membership meetings
- ✓ Immunization Schedules
- ✓ Public Health's immunization clinic schedules
- ✓ Media Campaigns
- ✓ Membership
- ✓ Coalition Goals & Impact



The Coalition welcomes your feedback and suggestions for website content!
Contact: dmchugh@publichealthmdc.com

DANE COUNTY IMMUNIZATION COALITION

www.immunizedanecounty.org

Immunization PEARLS brought to you by the DCIC Immunization Practices Committee



Rebecca Suda
Access Community Health Center

Linda Capener
Dean Clinic

Terry Bilke
Group Health Cooperative-SCW

Freddi Adelson
Madison Metropolitan School District

Diane McHugh, Cheryl Robinson
Public Health - Madison & Dane County

Sandy Jacobson
UW Medical Foundation

Wilmot Valhmu
Wisconsin Immunization Program

Alana Knuth
University Health Service

