



Immunization Pearls



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General Membership Meeting Summary 2/20/2018

Quality Data Measures and how they improve patient health

Wisconsin Collaborative for Healthcare Quality (WCHQ)

Included general update of the program by Jill Lindwall from WCHQ to provide the public with data on quality healthcare measures, and to bring organizations together to learn and share how to improve quality of care. Reviewed how it came to be, what measures exist and how they are reported and available. Tools and resources are available.

Kim Volberg from SSM Health shared how Dean works with payers, with a focus on another quality measure, HEDIS (Healthcare Effectiveness Data and Information Set) and how they are using it to improve gaps in care and reduce disparities.

Finally, Elaine Rosenbaltt, Unity/UWHC discussed internal benchmarking, improvement prioritization and quality incentive programs.

For the full minutes and slides shown at the meeting, see the [Dane County Immunization Coalition website](#).

2018 Membership Meeting Dates:

Tuesdays, from 12-1:30 at the Madison Water Utility conference room at 119 E. Olin Ave.

May 15

August 21

November 13 (light lunch included)



Registration for the DCIC Immunization Symposium has begun

The FREE event is the evening of April 25, 5:00-8:00pm , at American Family Insurance Education and Training Center. It includes a light dinner from 5-6:00 pm, presentation from 6:00-7:00 by CDC nurse health educator, JoEllen Wolicki with immunization updates through the lifespan. from, and a panel discussion from 7-8:00 on how to improve your organization's immunization rates.

Free CEU's for MA's included.

Check the DCIC website for registration at:

<http://www.publichealthmdc.com/DCIC/>



ACIP Recommendations

The new 2018 CDC immunization schedules are available:

[Child and Adolescent schedule](#)

[Adult schedule](#)

For a summary of changes from the previous schedule, see:

[Child and Adolescent summary of changes](#)

[Adult summary of changes](#)

New vaccine for shingles prevention

(from Minnesota Immunization News)

In October 2017, the Advisory Committee on Immunization Practices (ACIP) made recommendations for the use of recombinant herpes zoster vaccine (RZV, brand name Shingrix) to prevent shingles disease.

What health care providers need to know about Shingrix:

- ACIP recommended that Shingrix be preferred over herpes zoster vaccine live (ZVL, brand name Zostavax) because Shingrix has higher efficacy and longer duration of protection.
- Persons who previously received Zostavax should also be vaccinated with Shingrix. This is generally recommended if last vaccination was 5 or more years ago. Persons age 70 years and older can be vaccinated as soon as 8 weeks after Zostavax vaccination.
- The new vaccine is recommended beginning at age 50 years and older. It is routinely covered by insurance that covers vaccines.

Vaccine efficacy is based on completing the 2-dose series. Stress the importance of the patient coming back for the second dose, and schedule the appointment before the patient leaves. Alert patients that side effects are common after Shingrix vaccination (see table below). Provide advice for how to lessen symptoms, such as over-the-counter medications.

[The Recombinant Shingles Vaccine Information Sheet \(VIS\)](#) is now available.

Common Q & A's can be found at: <http://www.immunize.org/catg.d/p4221.pdf>

There are several key differences between Shingrix and Zostavax. See the table below.

	Recombinant Zoster Vaccine (RZV), Shingrix	Zoster Vaccine Live (ZVL), Zostavax
Vaccine type	Inactivated, recombinant subunit, with adjuvant	Live virus
Doses	2 doses, 2-6 months apart	1 dose
ACIP recommended age	50 years and older	60 years and older
Storage temperature	Refrigerated, 36 to 46°F; do not freeze	Frozen, -58 to 5°F
Route	Intramuscular (IM)	Subcutaneous (SQ)
Contraindications	Severe allergic reaction to previous dose of vaccine or a component of the vaccine	<ul style="list-style-type: none"> Severe allergic reaction to previous dose of vaccine or a component of the vaccine Known severe immunodeficiency Pregnancy
Precautions	Acute moderate or severe illness	Acute moderate or severe illness
Common side effects	<i>Frequent</i> <ul style="list-style-type: none"> Local: Redness, pain, swelling Systemic: Aches, tiredness, headache, shivering, fever 	<i>Infrequent</i> <ul style="list-style-type: none"> Local: Redness, pain, swelling Systemic: Headache, zoster-like rash

To avoid errors, remember the **new shingles vaccine RZV**:

- is given intramuscular, NOT subcutaneous
- is stored refrigerated NOT frozen
- MUST use diluent supplies with the vaccine
- is a 2-dose series, given over 2-6 months. Both doses are necessary for long term protection
- routinely causes significant pain, redness and swelling-this is a normal part of the immune system process, but patients should be warned at the time of immunization to expect it.

Learn more at [Shingrix Information for Health Care Professionals](#)



New Zoster Vaccine (RZV) Schedule Added to the WIR

A new Zoster schedule was implemented to the WIR on Monday March 5, 2018. The WIR has two Zoster schedules aligning with the most recent ACIP recommendations. The new schedules are as follows:

1. Two-dose Zoster Schedule for Shingrix. As soon as patients turn 50 years old, the WIR will recommend administration of Shingrix.
2. Three-dose Zoster Schedule for patients who were administered Zostavax and now need 2 doses of Shingrix. For patients who previously were administered Zostavax, the new schedule will update the patients and now recommend two doses of Shingrix be administered at least 2 months apart.

If you have any questions about this new vaccine or scheduling change please contact the WIR Help Desk at DHSWIRHelp@dhs.wisconsin.gov

Changes with recent ACIP meeting

Hepatitis A vaccine recommendation update

In addition, the group approved use of hepatitis A vaccine for postexposure prophylaxis for all patients 12 months and older. For more information [see article](#).

New Hepatitis B vaccine approved for adults 18 years and older. Heplisav (by Dynavax) is now an additional vaccine option to prevent hepatitis B in adults 18 years and older for prevention of Hepatitis B. It is a 2 dose series, with a minimum dose interval of 1 month apart. There is no

preferential recommendation for this vaccine over other vaccines for the prevention of hepatitis B infection.

LAIV (FluMist) approved for use in the coming flu season 2018-19

During the Feb. 21-22 meeting(www.cdc.gov) of the CDC's Advisory Committee on Immunization Practices (ACIP), the group voted 12-2 to recommend the inclusion of live attenuated influenza vaccine (LAIV; FluMist) among vaccines eligible for use during the upcoming fluseason.



Specifically, for the 2018-19 influenza season, the ACIP recommended physicians administer any licensed, age-appropriate influenza vaccine, including LAIV, inactivated influenza vaccine and recombinant influenza vaccine. FluMist is licensed for use in healthy, non-pregnant individuals 2 years through 49 years of age.

[ACIP Recommendations website.](#)

CDC publishes ACIP recommendations on use of a third dose of MMR during a mumps outbreak

A substantial increase in the number of mumps outbreaks and outbreak-associated cases has occurred in the United States since late 2015. To address this public health problem, the Advisory Committee on Immunization Practices (ACIP) reviewed the available evidence and determined that a third dose of measles, mumps, rubella (MMR) vaccine is safe and effective at preventing mumps. During its October 2017 meeting, ACIP recommended a third dose of a mumps virus-containing vaccine for persons previously vaccinated with 2 doses who are identified by public health authorities as being part of a group or population at increased risk for acquiring mumps because of an outbreak. The purpose of the recommendation is to improve protection of persons in outbreak settings against mumps disease and mumps-related complications. This recommendation supplements the existing ACIP recommendations for mumps vaccination. [See article for more information.](#)

Influenza



Wisconsin:

(exerpts from Dr. Temte's weekly influenza update)

Wisconsin influenza activity is declining. Influenza A has been the dominant strain so far in Wisconsin. Influenza B is increasing and accounted for 34% of influenza detections last week.

As of February 24, 2017, there had been:

- 5,667 influenza-related hospitalizations since September 1, 2017

- 65% of hospitalizations have been in individuals aged ≥65 years
- 704 admissions to ICUs, 58% were aged ≥65 years
- 193 cases requiring mechanical ventilation, 55% aged ≥65 years

This level is well above last year at this time, and above the 3,965 hospitalizations reported at this time in 2014-2015.

Wisconsin's influenza vaccinate rate to date: 34.9% (data from the Wisconsin Immunization registry)

CDC Influenza Updates:

- Flu activity is decreasing but many states still report widespread flu.
<https://www.cdc.gov/flu/weekly/fluactivitiesurv.htm>
- CDC reports 119 pediatric deaths this season.
- See early 2017-18 flu vaccine effectiveness estimates (https://www.cdc.gov/mmwr/volumes/67/wr/mm6706a2.htm?s_cid=mm6706a2_w)

CDC Recommends:

- People who are very sick or who are at high risk of serious flu complications https://www.cdc.gov/flu/about/disease/high_risk.htm and get flu symptoms should be treated with antiviral drugs as soon as possible.
<https://www.cdc.gov/flu/professionals/antivirals/index.htm>
- Get vaccinated if you haven't yet. There are still weeks of flu activity to come.
<https://www.cdc.gov/flu/consumer/prevention.htm>

CDC reports 17 additional pediatric deaths from influenza in the U.S. between October 1 and February 24, bringing total to 114; influenza still widespread and the numbers keep growing.

CDC has reported in its [Weekly U.S. Influenza Surveillance Report, FluView](#), that as of the week ending February 24, influenza activity decreased in the United States, although it was still widespread. The total number of pediatric deaths has climbed to 114 since October 1, 2017. The proportion of outpatient visits for influenza-like illness (ILI) was 5.0%, which is above the national baseline of 2.2%. All 10 regions reported ILI at or above region-specific baseline levels. New York City, the District of Columbia, and 32 states experienced high ILI activity; Puerto Rico and nine states experienced moderate ILI activity; six states experienced low ILI activity; and three states experienced minimal ILI activity.

Influenza vaccination is recommended for everyone six months of age and older. If you don't provide influenza vaccination in your clinic, please recommend vaccination to your patients and refer them to a clinic or pharmacy that provides vaccines or to the [HealthMap Vaccine Finder](#) to locate sites near their workplaces or homes that offer influenza vaccination services

HPV Vaccine



[Voices for Vaccines](#) releases new podcast, "HPV Vaccines, Cancers, and Cervivors"

Voices for Vaccines (VfV) has posted a new entry in its Vax Talk podcast series titled HPV Vaccines, Cancers, and Cervivors. In this episode, Karen Ernst, Voices for Vaccines, and Dr. Nathan Boonstra,

Blank Children's Hospital, talk to Tamika Felder about her battle with HPV-caused cervical cancer and her organization, Cervivor.



Immunizations in the News

"Vaccines don't overload babies' immune systems

Study finds" ABC News (March 7, 2018) - "Some parents may be afraid that babies and toddlers get too many vaccines all at once, but a new study can help put such worries to rest. It found that kids who got more vaccines were not any more likely to get unrelated infections than kids who got fewer vaccines, or who had them spaced out more than recommended."

<https://www.nbcnews.com/health/health-news/vaccines-don-t-overload-babies-immune-systems-study-finds-n854161>

A new handout for parents on vaccine safety is available from CDC at:

https://www.cdc.gov/vaccines/events/niw/ed-resources/downloads/f_provider-qa-color.pdf

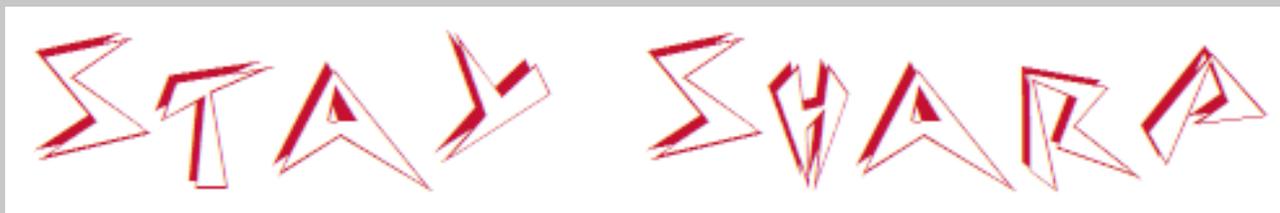
A story of diagnosis, treatment, and survival to raise awareness

Jason Mendelsohn, a 44-year-old father of three, was diagnosed with Stage 4 HPV-related oral cancer after he felt a lump in his neck. To raise awareness about the disease and its prevention, he posted the story of his diagnosis, treatment, and survival in a video on his website, www.supermanhpv.com. He chose the name SupermanHPV to draw attention to the diagnosis and to help spread the word about HPV-related oral cancer.

View the 2:40 minute video: [Jason Mendelsohn's HPV Oral Cancer Testimonial](#).

Related Links

- NBC News: [A Silent Epidemic of Cancer is Spreading among Men](#) (article, 10/23/17)
- NBC Nightly News: [A Silent Epidemic of Cancer is Spreading among Men](#) (2:00 minute video)



Voices for Vaccines has been doing regular podcasts on vaccine issues, called VaxTalk. There has been a lot of positive talk about the most recent podcast where Dr. Paul Offit answers immunization questions from influenza to HPV. See the links to this podcast and subscribe at:

Registration is now open for the next Current Issues in Vaccines

webinar March 28, 2018, at noon ET.

Dr. Offit will discuss the following topics:

- Novel hepatitis B vaccine: ACIP recommendations
- Influenza: Updates on vaccine efficacy and disease burden
- HPV: Updates on vaccine safety and long-term efficacy
- PCV13: Evidence for herd immunity
- Meningococcal disease: Revised data on risk for college students

The Current Issues in Vaccines webinars are supported by the Thomas F. McNair Scott Endowed Research and Lectureship Fund and co-sponsored by the Pennsylvania Chapter, American Academy of Pediatrics. Free continuing education credits are available from University of Pittsburgh (CME, CEU) and Wilkes University (CPE)

[Register here.](#)

2018
NIC

Immunization:
PREVENTION, PROTECTION, & PROGRESS



48th National Immunization Conference (NIC)

The 48th NIC-Immunization: Prevention, Protection, and Progress-will be held in Atlanta, Georgia, May 15-17, 2018. The NIC brings together more than 1,500 local, state, federal, and private-sector immunization stakeholders and partners to explore science, policy, education, and planning issues related to immunization and vaccine-preventable diseases. The conference will have exhibits and poster presentations and will include tracks on adult immunization, immunization information systems, programmatic issues, health and risk communications, epidemiology and surveillance, and childhood/adolescent immunization. The NIC mission is to offer information that will help participants provide comprehensive immunization services for all age groups. The conference also provides participants an opportunity to learn innovative strategies for developing programs and policies and advancing science to promote immunization among all ages today for a healthy tomorrow. Conference registration and abstract submission are already open and abstracts will be accepted through December 31. For more information, please visit the [NIC registration site](#) and the [NIC web page](#)

DCIC has a copy of the DVD "Someone You Love" to show to groups.

This compelling film shows the how the lives of 5 women are changed by cervical cancer, that could have been prevented with HPV vaccine. Let us know if you would like to set up a showing at your office/clinic/school or community. Contact Diane McHugh, PHMDC at 243-0393 for more information. Learn more about the film at: <http://www.hpvepidemic.com/>



[Immunize.org/publications](https://immunize.org/publications)

Vaccine Update from

[The Vaccine Education Center at The Children's Hospital of Philadelphia](#)

The CDC

[Immunization Works](#)