Many Adults Blasé About Routine Immunization

BY HEIDI SPLETE Senior Writer

WASHINGTON — About half of 1,005 American adults who were surveyed by the National Foundation for Infectious Diseases said they were unconcerned that either they or a family member would become infected with a vaccine-preventable disease, despite the fact that more than half a million U.S. adults die each year from such diseases, reported Dr. Kristin L. Nichol, who presented the survey findings at a press conference.

"Americans don't know much about the [available] vaccines, and they have too little concern about getting these diseases," said Dr. Nichol, who is chair of the advisory committee of the National Coalition for Adult Immunization.

"Most people say they would get a vaccine if their doctor recommends it," said Dr. Nichol, a professor of medicine at the University of Minnesota, Minneapolis. Specifically, 87% of the respondents said they would be "somewhat likely" or "very likely" to get a vaccine based on a doctor's recommendation.

Although 49% of the respondents could name influenza as a vaccine-preventable illness, awareness for other such illnesses dropped drastically, ranging from 18% who named pneumonia, to only 3% who named acellular pertussis and meningitis.

Adult vaccinations should be part of the overall discussion of wellness, along with nutrition, physical activity, and preventive screenings, said Dr. Anne Schuchat, director of the National Center for Immunization and Respiratory Diseases at the Centers for Disease Control and Prevention in Atlanta, who presented data from a firsttime survey of immunization coverage in adults. "We have a long way to go to reach the targets we have set for the nation."

A National Immunization Survey was conducted of about 7,000 adults aged 18 years and older in the summer of 2007. The respondents were selected at random and contacted by phone, similar to the annual survey of childhood vaccination conducted by the CDC and other agencies.

Overall, 69% of adults aged 65 years and older said they had received a flu vaccination during the 2006-2007 flu season. In addition, 66% had received pneumococcal vaccinations, and 44% had received a tetanus shot within the past 10 years.

Coverage was especially low for two newly licensed vaccines, Dr. Schuchat said. The Tdap vaccine, which is recommended for adults aged 18-64 years to prevent tetanus, diphtheria, and acellular pertussis was licensed in 2005, but only 2% of the respondents reported having received it. Similarly, about 2% of the respondents said they had received the shingles vaccine, which was licensed in 2006 and approved for adults aged 60 years and older.

About 10% of female respondents said they had received at least one of the threedose series of the HPV vaccine to prevent cervical cancer, which was licensed in 2006 and approved for females aged 9-26 years.

"Health care providers [need] to know about these new tools and take advantage of them themselves," Dr. Schuchat said, adding that adults should understand that vaccines are for everyone, not just kids.

Through its Part B, Medicare covers the pneumococcal polysaccharide vaccine, the influenza vaccine, and (for high-risk adults) the hepatitis B vaccine, and it covers most other adult vaccinations through Part D, including the shingles vaccine. Adult patients should be reminded that many vaccinations are covered by insurance, said Dr. Schuchat.

Younger adults often have insurance coverage for preventive vaccines, she added,

citing a recent survey of insurance companies in which more than 90% covered the influenza and pneumococcal vaccines and most covered at least five vaccines for adults. "We strongly encourage insurance companies to cover vaccines," she said.

Finding time to coordinate adult vaccination presents another challenge. "If we are going to try to improve immunization rates in the physician practice, it needs to be a team effort," said Dr. Robert H. Hopkins Jr., an internal medicine physician and pediatrician at the University of Arkansas, Little Rock. He suggested increasing in-office adult vaccination by having nurses ask patients about their vaccination status and by providing educational flyers in the office.

Alternative settings for vaccinations, such as pharmacies or workplaces should also be considered, suggested Dr. Hopkins, who is governor of the Arkansas chapter of the American College of Physicians.

For more vaccination information, visit www.cdc.gov.

