

Many Parents Undecided About Teen Vaccines

BY KATE JOHNSON
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TORONTO — Parents' safety concerns about children's vaccines may negatively influence their decisions about vaccination, but physicians' recommendations can override that, study results show.

These results might "make us pay a lot more attention to the fact that safety concerns may end up being problematic with respect to eventual acceptance by parents," Sarah Clark of the University of Michigan, Ann Arbor, said in an oral poster presentation at the annual meeting of the Pediatric Academic Societies.

The study used a Web-based survey of 1,410 parents of children aged 9-18 years to gauge the depth of parental concerns about the safety of vaccines and the extent to which these concerns influence parents' decisions to have their children vaccinated.

Parents were asked to respond on the Likert scale to the general statement, "Newly available vaccines are safe for my children," and then were asked whether they planned to vaccinate their children in the next 5 years with the meningococcal conjugate vaccine (MCV-4), combined tetanus-diphtheria-acellular pertussis (Tdap) vaccine, and human papillomavirus vaccine (HPV).

The survey indicated that 49% of the parents had neutral opinions regarding

whether vaccines were safe; 11% said they were not safe, and 40% said they were safe.

Regarding their intentions to vaccinate their children with the specific vaccines, responses were positive for MCV-4 and Tdap with 36% each, compared with 40% for HPV.

In regression analysis, adjusted for parents' age, sex, income, and education, safety concerns were strongly associated with significantly lower odds of MCV-4 adoption (odds ratio [OR] 0.23), Tdap

adoption (OR 0.26), and HPV adoption (OR 0.35).

"The more concern there is with safety, the less likely people are to adopt," coauthor Dianne Singer, also from the University of Michigan, said in an interview.

However, although 11% of parents indicated they disagreed or strongly disagreed about vaccine safety, it was the neutral 49% who interested the researchers most. "As we expected, the people who disagreed or strongly disagreed

were much less likely to have received or to say they planned to receive the vaccines [for their children], but surprisingly the neutral group was also less likely to say they would accept the vaccines," Ms. Clark said in her presentation. "The neutrals were not all that neutral ... and certainly we had a lot of folks who said they needed a lot more information."

"We saw that if physicians recommended the vaccine there was a stronger adoption of the vaccine," said Ms. Singer. ■

Liver Recipients Face Hepatitis B Risk if Titers Dip

SAN FRANCISCO — Children who receive living donor liver transplants are at risk of developing hepatitis B if they have low antibody titers, according to a poster presentation by Dr. Chih-Che Lin at the American Transplant Congress.

In a study of 60 pediatric liver recipients (average age, 1.6 years), two children developed new hepatitis B infections following the transplant. Both of these children had low levels—less than 1,000 IU/L—of antibodies to hepatitis B surface antigen (anti-HBs).

In contrast, none of the 47 children with anti-HBs titers more than 1,000 IU/L developed new hepatitis B infections. This was a statistically significant difference, wrote Dr. Lin and colleagues from the Chang Gung University, Taoyuan, Taiwan.

Of the two children with new hepatitis B infections, one received a graft from a donor who was positive for antibodies to hepatitis B core antigen (anti-HBc), and the other received a graft from a donor who was anti-HBc negative. The presence of antibodies to hepatitis B core antigen is a marker of acute, chronic, or resolved HB virus infection. The meeting was cosponsored by the American Society of Transplant Surgeons and the American Society of Transplantation.

—Robert Finn

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