CLINICAL CAPSULES

First-Time Flu Shot Rates Fall Short

Compliance with the recommended two doses of influenza vaccine for children being vaccinated for the first time is suboptimal, based on data from three flu seasons involving 125,928 children younger than 9 years of age.

Previous research has shown that a second flu vaccination in vaccine-naive children aged 6 months to 8 years is significantly associated with a protective level of antibodies, and not getting a second dose could reduce the public health benefits of vaccination, Dr. Lisa A. Jackson and her colleagues said (Pediatrics 2006;118:2032-7).

Dr. Jackson, of the University of Washington, Seattle, and her co-workers evaluated children enrolled in HMOs as part of the Vaccine Safety Datalink Project. These children received their first doses of vaccine during the 2001-2002, 2002-2003, or 2003-2004 flu seasons.

Overall, 44%, 54%, and 29% of children aged 6-23 months who received their first vaccinations in the 2001-2002, 2002-2003, and 2003-2004 flu seasons, respectively, also received a second vaccination. Additionally, 15%, 24%, and 42% of children aged 24 months to 8 years who received their first vaccinations in the 2001-2002, 2002-2003, and 2003-2004 flu seasons, respectively, also received a second vaccination. Rates of second vaccination were highest in children who received their initial vaccinations by mid-November in each season for all age groups.

The increase in vaccination of vaccine-naive children aged 2-8 years in 2003-2004 compared with previous years may have been due to compliance with the recommendation issued that year to vaccinate children who were household contacts of infants younger than 2 years, the researchers noted. But compliance with the two-dose series was highest for children aged 6-11 months, and overall compliance rates decreased with age.

Bacteria, Viruses Jointly Cause AOM

Coinfection with both bacteria and viruses caused 52 of 79 (66%) cases of new-onset acute otitis media in children who had otorrhea through tympanostomy tubes, reported Dr. Aino Ruohola and colleagues in the December issue of Clinical Infectious Diseases.

Ten previous studies of acute otitis media (AOM) patients have shown co-infection rates ranging from 5% to 27%. The microbiologic etiology of AOM was unknown in at least 15% of patients in these studies, perhaps because microbiologic tests have not been used concomitantly in AOM cases, said Dr. Ruohola of Turku (Finland) University Hospital.

To identify the causes of AOM in a population of children aged 7-71 months, the researchers analyzed middle ear fluid samples using culture, polymerase chain reaction, and antigen detection (Clin. Infect. Dis. 2006;43:1417-22).

At least one respiratory pathogen was identified in 76 of 79 (96%) children. Bacteria were identified in 73 (92%) cases and viruses were found in 55 (70%). Overall, 86% of the patients had bacteria typical of AOM; the most common bacteria were *Streptococcus pneumoniae* in 39 cases (49%), *Haemophilus influenzae* in 23 (29%), and *Moraxella catarrhalis* in 22 (28%). Picornaviruses accounted for 41% of the viruses.

Circumcision May Reduce STI Risk

Males who were not circumcised in childhood were more than twice as likely to develop sexually transmitted infections in young adulthood, even after controlling for sex practices, according to a 25-year birth cohort study.

The findings support data from previous studies that show an increased risk of STIs among uncircumcised males, wrote David M. Fergusson, Ph.D., of Christchurch School of Medicine and Health Sciences in Christchurch, New Zealand, and his associates. Dr. Fergusson and his colleagues examined the impact of circumcision status on STI risk after controlling for confounding factors including having unprotected sex and multiple sex partners (Pediatrics 2006;118:1971-7).

A total of 154 (30.2%) individuals from a sample of 510 boys born in 1977 had been circumcised by age 15 years. The subjects were interviewed at ages 21 and 25 years. Overall, 42 subjects reported STIs; 14 subjects reported a medically diagnosed STI at the 21-year assessment, 34 reported an STI at the 25-year assessment, and 6 reported an STI at both assessments.

The reported STIs were significantly greater among the uncircumcised subjects, compared with the circumcised subjects, at both the 21-year (3.4% vs. 1.3%) and 25-year (8.5% vs. 3.4%) assessments.

Chlamydia was the most common STI, reported in 22 cases (52.4%), followed by 13 (31.0%) cases of genital warts, 4 (9.5%) cases of genital herpes, 2 (4.8%) cases of gonorrhea, and 1 (2.4%) case described as concurrent genital herpes and genital warts. No cases of HIV, syphilis, or genital ulcerative disease were reported.

—Heidi Splete

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