



Partnering for
Immunizations

VACCINE PREVENTABLE DISEASES



OBJECTIVES

- **Describe diseases, common symptoms, and modes of transmission**
- **Understand national and local disease burden**
- **Describe routine vaccine recommendations**
- **Identify vaccine resources**

Disease	Total Cases 2016	Total Cases 2017 (Provisional)
Congenital Rubella	0	0
Diphtheria	0	0
H. Influenzae Invasive <5 Years (Sterotype b)	18(0)	22(1)
Measles	1	2
Meningococcal Disease	6	6
Mumps	36	41
Pertussis	417	663
Poliomyelitis	0	0
Rubella	0	0
Tetanus	1	2
Varicella	556	508

HEPATITIS B

- **Caused by a virus that attacks the liver**
- **Spread through direct contact with infected body fluids**
- **Can cause lifelong infection, cirrhosis (scarring) of the liver, liver cancer, liver failure, death**
- **850 provisional cases in SE MI in 2017**

- **Jaundice (yellow skin)**
- **Abdominal Pain**
- **Nausea/Vomiting**
- **Joint Pain**
- **Loss of Appetite**
- **Fatigue**

- **Routinely given at birth, 1-2 months, and 6-12 months**
- **Those 19+ are recommended for Hep B vaccine based on risk group**



ROTAVIRUS

- **A virus that causes gastroenteritis**
(Inflammation of the stomach and intestines)
- **Leading cause of severe diarrhea in infants and toddlers worldwide**
- **Rotavirus was the top cause of severe diarrhea in U.S. infants and toddlers before the vaccine**
- **Responsible for more than 500,000 deaths each year in children under 5 around the world**

- **Watery Diarrhea**
- **Vomiting**
- **Severe Dehydration**
- **Abdominal Pain**
- **Fever**

- **An oral vaccine given in 2 or 3 doses between 6 weeks-8 months**
- **No need to repeat dosage if spit-up**
- **Food and fluids can be given before/after vaccine**



DIPHTHERIA

- **Bacterial infection affecting the nose and throat**
- **Spread person-to-person through direct respiratory and physical contact**
- **Once occurred in 100-200/100,000 people, now it is rarely seen in the U.S. thanks to the vaccine**
- **DTaP, Td, and Tdap vaccines prevent diphtheria**

TETANUS

- A disease of the nervous system caused by clostridium tetani bacteria
- Tetanus enters the body through a skin wound
- In 2015, there were 29 reported cases and 2 deaths in the U.S.
- Tetanus is very rare thanks to vaccination

- **Often begins with spasms in jaw muscles (lockjaw)**
- **Spasms in the respiratory system can also caused breathing problems**

PERTUSSIS

————— (Whooping Cough) —————

- **Highly contagious bacterial disease caused by *Bordetella pertussis***
- **Spread by direct contact with discharges from nose or airborne droplets released when infected person coughs or sneezes**
- **352 provisional cases in SE MI in 2017**

- **Begins like a common cold, then cough gets worse**
- **Severe coughing spells that end in a “whooping cough” sound – **
- **For infants younger than 18 months, this disease is very serious/deadly**

- **DTaP**
 - Routinely given 2, 4, 6, 15-18 months and 4-6 years of age
 - Not recommended after age 7
- **Tdap**
 - Routinely given at 11-12 years
 - Tdap is a booster dose. Can be given to kids 7-10 years only if incomplete DTaP series
- **Td (Tetanus Booster)**
 - Every 10 years

Note: Tetanus isn't spread person-person, EVERYONE needs a tetanus shot



HAEMOPHILUS INFLUENZAE TYPE B

(HIB)

- The Hib virus causes many diseases
- The most common diseases are pneumonia, bacteremia, meningitis, epiglottitis, septic arthritis, cellulitis, and otitis media
- Due to routine Hib vaccination, Hib in children has decreased by 99% since 1990
- In Michigan, there was 1 case of Hib among children < 5 years in 2017 (provisional data)

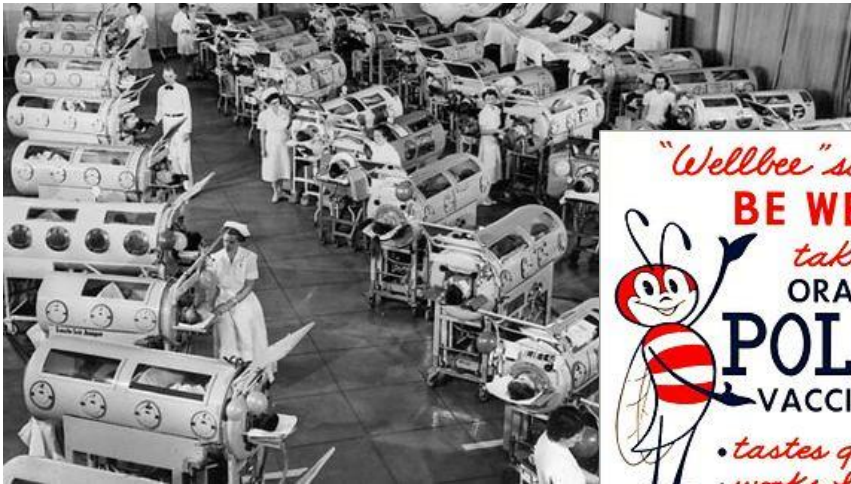
- **ActHIB, Hiberix, or Pentacel (DTaP-IPV-Hib)**
 - 3-dose Primary Series at 2, 4, 6 months
 - Booster dose at 12-15 months
- **PedvaxHib**
 - 2-dose Primary Series at 2, 4 months
 - Booster dose at 12-15 months
- **Any Hib vaccine can be used for the booster dose after 12 months**
- **Hib is not routinely given after a child turns 5 years of age**



POLIO

- An infectious disease caused by a virus
- Most often spread through person-to-person contact via stool of an infected person
- May be spread through oral/nasal secretions
- Polio was very common in U.S. before vaccine was introduced in 1955. It has been eradicated and most of the world
 - *Still a plane ride away*

- Can cause severe paralysis resulting in permanent disability, or even death



- Routinely given 2, 4, 6-18 months and 4-6 years of age
- Last dose recommended on/after 4th birthday



PNEUMOCOCCAL DISEASE

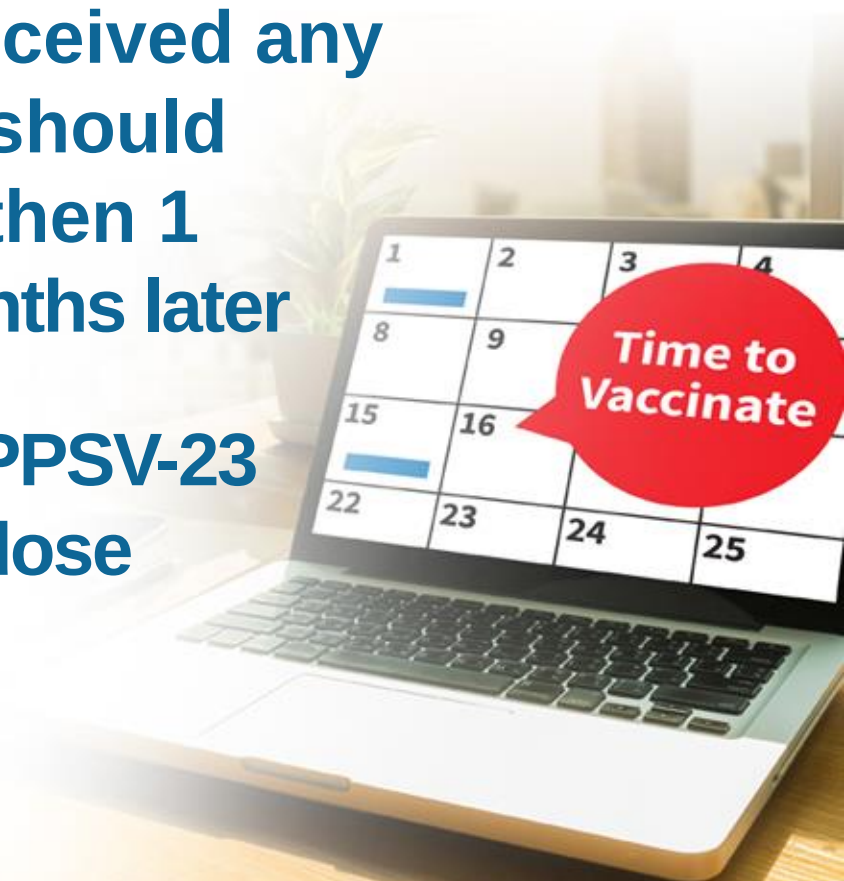
- Caused by *Streptococcus pneumoniae* pneumococcus bacteria
- Different diseases include pneumococcal pneumonia, bacteremia, meningitis, otitis media
- Can cause brain damage, hearing loss, or death
- 94 deaths from 2012-2014 and 204 hospitalizations in SE MI

- **Vaccine is very effective at preventing disease**
- **Protects from 13 strains of pneumococcal disease**
- **Routinely given at 2, 4, 6, and 12-15 months**
 - High-risk children under 6 who did not get 4 doses may need 2 more doses
 - High-risk children and adults aged 6-64 years can get one dose of PCV13 if no prior dose

- **One dose to adults 65 and older**
- **High-risk groups may need vaccine:**
 - Immunosuppressed by disease or medications
 - 19+ with asthma or smoker
 - 2-64 with certain conditions



- **Adults 65+ who never received any pneumococcal vaccine should receive 1 PCV-13 dose, then 1 dose of PPSV-23, 6-12 months later**
- **Adults 65+ who received PPSV-23 should receive 1 PCV-13 dose one year later**



INFLUENZA (FLU)

- **Caused by a virus**
- **Kills an average of 36,000 people in the U.S. per year**
- **Our deadliest vaccine-preventable disease**

- **Causes a high fever, body aches, chills, headache, and cough**
- **Symptoms can last up to 3 weeks**
- **Young and elderly at highest risk for severe outcomes**



- **Given to those 6 months and older**
 - 2 doses needed with 4 week min. interval if first dose given between 6 mo. – 8 yrs.
- **Recommended annually every fall due to virus changes**



MEASLES

- **Extremely contagious, caused by a virus**
- **Spread by contact with droplets from nose, mouth, or throat of infected person**
- **Common childhood illness before vaccines**
- **There were 2 provisional cases in 2017 in Michigan; both were in SE MI**

- **Bloodshot eyes**
- **Light sensitivity**
- **Cough**
- **Muscle pain**
- **Fever**
- **Rash**

(Appears 3-5 days after the first signs of illness, lasts 4-7 days)



MUMPS

- **Caused by a virus**
- **Spread through saliva. Can infect many parts of the body, especially the parotid salivary glands**
- **18 suspected cases (3 confirmed, 10 probable, 5 suspected) of mumps in SE MI in 2017**

- Face pain
- Fever
- Headache
- Sore throat
- Parotid glands swelling
- Swelling of temples or jaw
- Boys/men
 - genital inflammation



RUBELLA

German Measles

- **Contagious skin rash caused by a virus**
- **Can pass through a pregnant woman's bloodstream to infect her child**
- **Congenital rubella can cause deafness, developmental delay, or mental retardation**

- **Children generally have few symptoms**
- **Adults may experience a fever, headache, general discomfort (malaise), and a runny nose before the rash appears**
- **Can spread from 1 week before rash develops, through 1-2 weeks after rash disappears**



- **Before vaccine**
 - Measles: >500,000 cases reported yearly
 - Mumps: >200,000 cases reported yearly
 - Rubella: epidemics occurred every 6-9 years
- **Routinely given to children at 12-15 months and a second dose given at 4-6 years of age**
- **No link to autism: original study retracted and physician lost medical license**



VARICELLA

Chickenpox

- **Caused by the varicella-zoster virus (VZV)**
 - Less common today, but on the rise due to reduced herd immunity
- **Can pass through a pregnant woman's bloodstream to infect her child**
- **In 2015, Michigan had 6% of all reported chickenpox cases in the U.S.**
 - 549 MI cases

- **Itchy rash of blistering spots – may occur anywhere on the body, with flu-like symptoms**
- **Symptoms often mild and end without treatment**
 - Can cause serious bacterial infections
- **A person usually has only 1 chickenpox episode**
- **VZV can lie dormant in the body and cause shingles (herpes zoster) later in life**

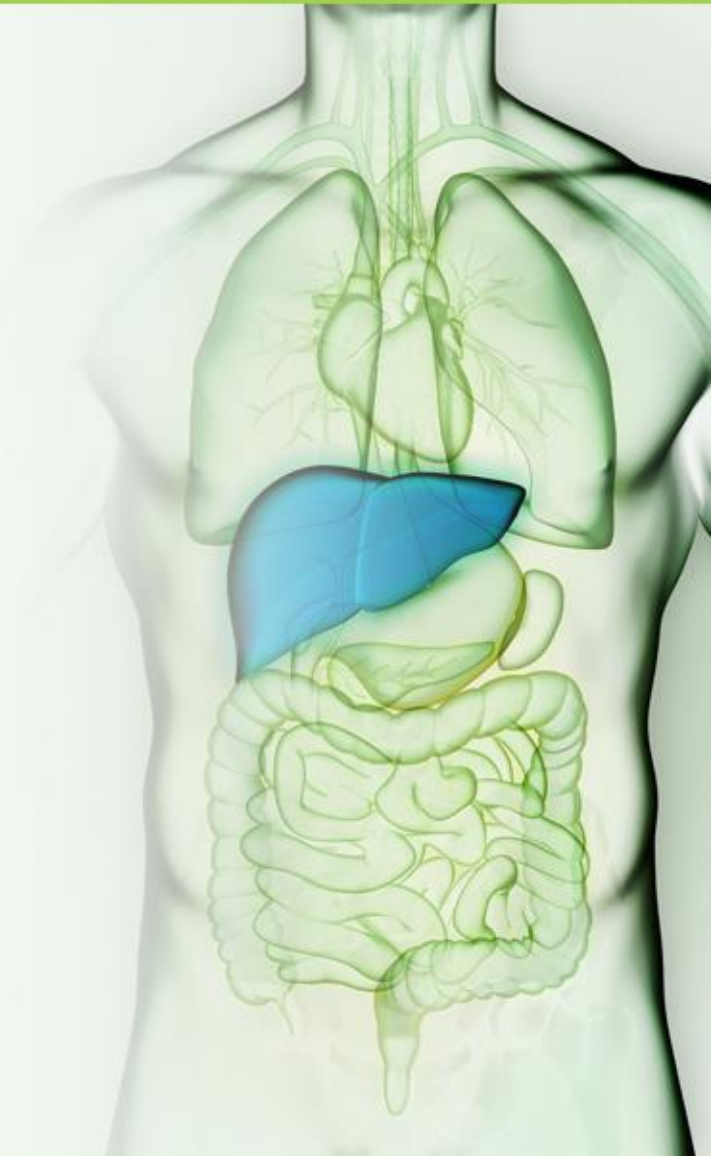
- **Vaccine recommended between 12-15 months**
- **Second dose recommended 4-6 years**
 - Provides further protection



HEPATITIS A

- Virus found in stools of those infected causing swelling of the liver
- Transmitted through touching/consuming infected items or touching infected people
- 513 reported cases in SE MI in 2017
(provisional data)
- SE MI is currently experiencing one of the largest outbreaks in the United States in the post hepatitis A vaccination era

- **Jaundice (yellow skin)**
- **Nausea and vomiting**
- **Fatigue**
- **Loss of appetite**
- **Low-grade fever**

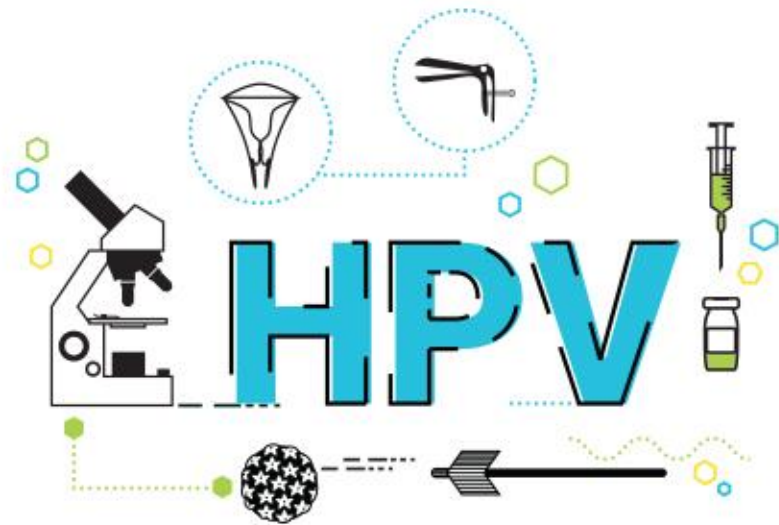


- **Routinely give 2 doses, starting at 12-23 mo.**
 - Separate doses by 6 calendar months
- **Catch-up all children ages 2-18 years**
- **High-risk individuals in need of vaccination:**
 - Travelers to countries with high rates
 - Men who have sex with men
 - Injection drug users
 - Persons with clotting factor disorders
 - Persons working with nonhuman primates

HUMAN PAPILLOMAVIRUS (HPV)

- **Most common sexually-transmitted infection**
- **Spreads easily with minimal physical contact**
- **More than 90% of people will carry at least one HPV strain in their lifetime**
- **Most people clear the virus without treatment, but about 1 in 10 cases are pre-cancerous in women (CDC)**

- **Abnormal pap/pre-cancerous cells in cervix**
- **High-risk individuals in need of vaccination:**
 - Cervical cancer in women
 - Oropharyngeal (head/neck) in men and women
 - Anal cancers in men and women
 - Penile cancer in men
- **Can cause genital warts in men and women**



- **Best protection against HPV is the vaccine**
- **Vaccinate all preteens at 11-12 years**
- **Vaccine can be given from 9-26 years**
 - Children who start series before age 15 only need 2 doses with a 6-month minimum interval
- **At/after 15 or if immunocompromised, a 3-dose series is given at 0, 1-2, 6 months**

BACTERIAL MENINGITIS

- **Caused by *Neisseria meningitis* bacteria**
- **Most common forms are meningitis and blood infections**
- **Spread through close contact with infected individuals**
 - People living in close quarters at high risk
- **39 provisional cases in SE MI in 2017**

- Neck and/or back pain
- Headache
- Nausea/vomiting
- Bacterial meningitis rash
- Progresses quickly with high fatality rates

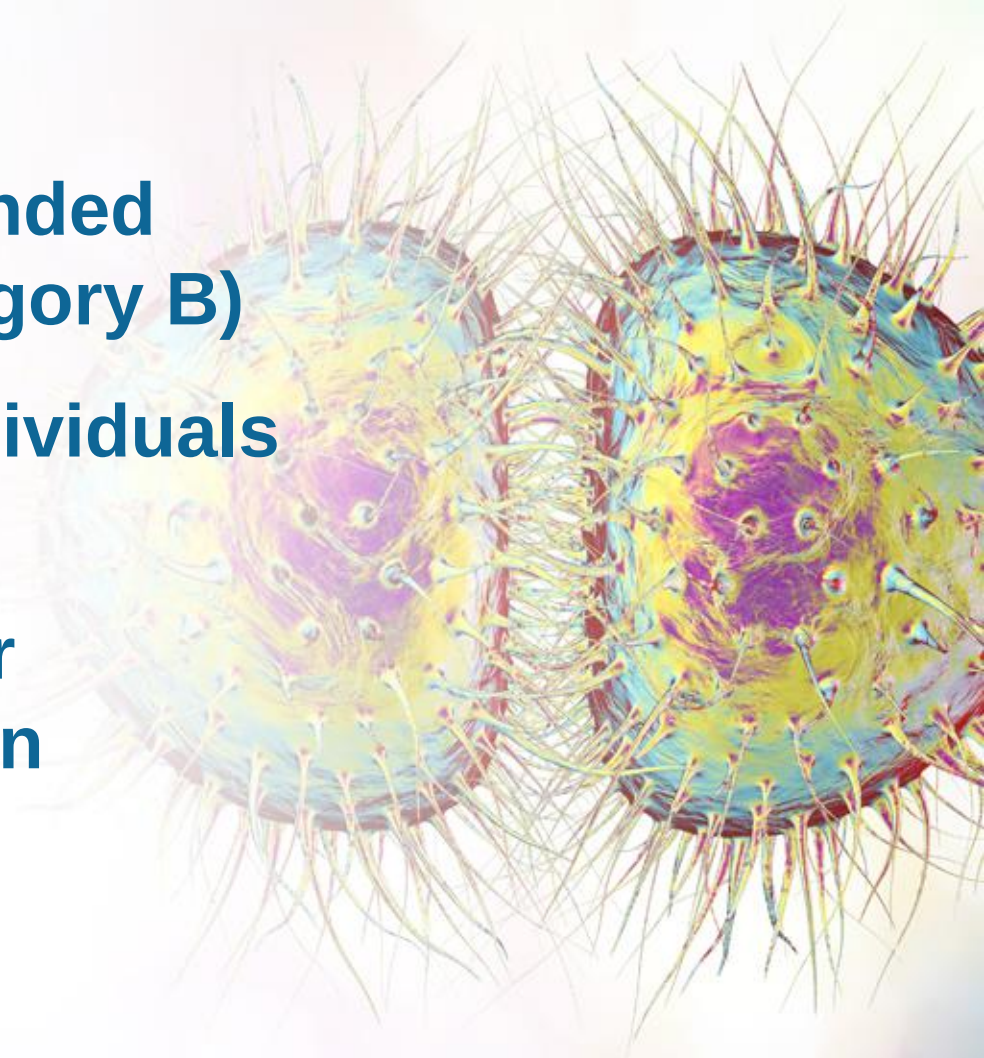


Diagnosis
Meningitis

- **1 dose at age 11-12 years,
with second dose at 16 years**
- **Catch-up all adolescents
13-18 years who have not
been vaccinated**
- **Vaccinate high risk people,
2-55 years**



- **2-3 doses recommended for ages 16-18 (category B)**
- **Give to high-risk individuals age 10 years +**
- **Give to age 16-23 for short-term protection (category B)**



ZOSTER

Shingles

- **Caused by same virus that causes chickenpox**
- **Virus remains inactive in the body for years once a person has had chickenpox**
- **Stress or other infection may activate the virus and cause shingles**

- **Rash**
 - Begins as cluster of small red spots
 - Often blister and painful
 - Usually on one side of body
- **May cause blindness if contracted in the eye**
- **Rash/post-herpetic pain can last for weeks**



Shingrix

- ACIP's preferred shingles vaccine
- 2 doses to people 50 years and older at 0, 2-6 mos.
- Recommended even if had shingles, had Zostavax vaccine, or uncertain whether had chickenpox
- Not for treatment of shingles or post herpetic neuralgia

Zostavax

- 1 dose to people 60 years and older
- Live, attenuated vaccine
- Not for treatment of shingles or post herpetic neuralgia



- E.g. MMR, Varicella, Zoster (zostavax)
- Cannot be given to immunosuppressed individuals or pregnant women
- Must be given on the same day as other live vaccines or separated by at least 28 days



- Assess immunization record
- Check current ACIP recommended schedule
- Ask screening questions
- Educate the parent/client
- Administer vaccine(s)
- Document what you did



VACCINE SUMMARY

- **Responsible for the control of many infectious diseases once common in the U.S.**
- **Save lives and prevent disease in people who receive them, AND those who are not vaccinated**

KEY NATIONAL ORGANIZATIONS

- **Centers for Disease Control & Prevention (CDC): Administers Vaccines for Children (VFC) Program**
- **Advisory Committee on Immunization Practices (ACIP): A CDC group of clinicians and researchers that develops vaccine scheduling guidelines**
- **Immunization Action Coalition (IAC)**

KEY MICHIGAN ORGANIZATIONS

- **Michigan Department of Health and Human Services (MDHHS)** provides guidance to LHDs about vaccines and educational training for providers
- **Michigan Care Improvement Registry (MCIR)** hosts state vaccine database, and provides educational training
- **Local Health Department (LHDs)** provide guidance and training to practices about vaccines, and administer VFC program

KEY MICHIGAN ORGANIZATIONS

- **MCIR Region 1 LHDs include:**
 - _ **City of Detroit**
 - _ **Macomb County**
 - _ **Oakland County**
 - _ **Washtenaw County**
 - _ **Livingston County**
 - _ **Monroe County**
 - _ **St. Clair County**
 - _ **Wayne County**

RESOURCES

- **Centers for Disease Control and Prevention**
www.cdc.gov
- **Alliance for Immunizations in Michigan:**
www.aimtoolkit.org
- **Children's Hospital of Philadelphia:**
www.chop.edu
- www.kidshealth.org