



MI Immunization Timely Tips

Michigan Department of Community Health (MDCH), January, 2014

CDC Childhood Immunization Champion Award 2014 Call for Nominations

We are pleased to announce that the Michigan Department of Community Health (MDCH) is now accepting nominations for the 2014 *CDC Childhood Immunization Champion Award*! The CDC and the CDC Foundation will honor up to one immunization *Champion* from each of the 50 states and the District of Columbia.



Deadline for nominations is February 28

This is an annual award that recognizes individuals who make a significant contribution toward improving public health through their work in childhood immunization. Awardees will be announced and recognized by the CDC during National Infant Immunization Week, April 26- May 3, 2014.

The *CDC Childhood Immunization Champion Award* is intended to recognize individuals who are working at the local level. It honors those who are doing an exemplary job or going above and beyond to promote or foster childhood immunizations in their communities.

Award Criteria

A *CDC Childhood Immunization Champion* is an individual who meets one or more of the following criteria:

- **Leadership:** The candidate is considered an authority on immunization in their community, medical system, or individual practice. Activities may include acting as a spokesperson, trainer, mentor, or educator.
- **Collaboration:** The candidate has worked to build support for and increase immunization rates in infants and young children. Activities may include establishing or strengthening partnerships, coalitions, committees, working groups, or other.
- **Innovation:** The candidate has used creative or innovative strategies to promote immunization or address challenges to immunization in their practice, community, state, or region. Activities may include either new strategies or adapting existing strategies in new ways such as for reaching under-immunized populations.
- **Advocacy:** The candidate is active in advancing policies and best practices to support immunization in infants and young children in their community, state, or region. Activities may include providing legislative testimony or promoting, analyzing, or evaluating policies.

Eligibility

Champions can include coalition members, parents, health care professionals (e.g., physicians, nurses, physicians' assistants, nurse practitioners, medical assistants, etc.), and other immunization leaders who meet the award criteria. Immunization program managers, state and federal government employees of health agencies, individuals who have been affiliated with and/or employed by pharmaceutical companies and those who have already received the award are not eligible to apply.

Self-nominations are welcome or you may submit an application for another individual. Please use the [CDC Nomination Packet](#). Complete pages 2-6 and submit to MDCH no later than February 28, 2014. Contact Stephanie Sanchez, MDCH, if you need assistance completing the nomination packet or if you have any questions or comments about this award. Stephanie may be reached at 517-335-9011 or sanchezs@michigan.gov.

More information: <http://www.cdc.gov/vaccines/events/niiw/champions/index.html#award>

Disease Investigation Guidelines Updated

The MDCH Vaccine-Preventable Disease Investigation Guidelines have been updated for 2014. They are posted at www.michigan.gov/immunize under the Provider Information Section.

Vaccine-preventable diseases are public health priorities and warrant timely reporting, investigation, and intervention. MDCH has developed investigation guidelines for surveillance, investigation, and public health follow-up of these diseases. This guidance is intended principally for local health department workers or other public health personnel but may be helpful to other health care providers as well.

The information is organized into separate sections for each disease; they may be viewed on-line or downloaded. Within each section there are numerous hyper-links to other areas within the document or to other Internet resources (the latter are navigable provided the user is connected to the Internet); these are indicated in colored, underscored text and can be accessed by placing the mouse cursor over the text and clicking the left mouse button simultaneously. Navigation back to the point of departure can be accomplished either by clicking the BACK button (if available) or by closing the linked browser page.

Here is a convenient way to find the guidelines:

1. Go to: www.michigan.gov/immunize
2. Hit 'Ctrl' and 'F'; this will bring up the search-this-page feature.
3. Type: 'Investigation Guidelines'

This will enable you to quickly find the MDCH Vaccine-Preventable Disease Investigation Guidelines link.

HealthMap Vaccine Finder Needs You

Flu season may be here, but it's not too late to provide data on your vaccine services to the [HealthMap Vaccine Finder](#). Last year, the free, online tool helped direct over 500,000 users to vaccine providers in their area- and the user base is growing in 2013-2014! We encourage you to take advantage of this free opportunity to promote your vaccination services.

HealthMap Vaccine Finder is a free, online service where users can search for locations offering a number of different vaccines. The Vaccine Finder team works with partners such as clinics, pharmacies, and health departments to provide accurate and up-to-date information about vaccination services. Our common goal is to make vaccination available to everyone, by making it simpler to find a vaccine provider.

This year, HealthMap Vaccine Finder is asking for information on any of the 7 types of influenza vaccines (trivalent, quadrivalent, high dose, intradermal, cell culture-based, recombinant, and nasal spray) and 10 other adult vaccines (hepatitis A, hepatitis B, HPV, MMR, Td, Tdap, meningococcal, pneumococcal, varicella, zoster).

Providers who participated last year can log in to their account at vaccine.healthmap.org/admin and update their information by following the directions on the Help tab.

New providers must first register for an account at vaccine.healthmap.org/admin/signup. Once you receive your password and login, you may then upload the required information to your account.

Please direct any questions to vaccine@healthmap.org.

Keep Vaccinating Your Patients against Flu

Influenza activity remains high in the U.S., with 38 states reporting 'widespread' activity. Michigan continues to experience widespread influenza activity, the highest activity level. There has been an increase in patients of all ages being admitted to hospitals for serious flu disease. To date, a larger proportion of these hospitalizations are in young and middle-age adults. In addition, one pediatric influenza-associated death has already been reported in Michigan during this flu season.

Currently, more than 90 percent of positive influenza specimens at the MDCH Bureau of Laboratories are the 2009 H1N1 influenza virus. During the 2009 H1N1 pandemic, severe disease was also seen in young and middle-age adults. Patients with underlying medical conditions or obesity have an increased risk for severe complications from this virus.

Any flu infection carries a risk of serious complications, hospitalization or death, even among healthy children and adults. During the 2012-13 flu season, national estimates showed only 40.8 percent of Michigan's residents were vaccinated against flu. According to Michigan's immunization registry, only 9 percent of residents ages 18-24 and 11 percent of residents between 25-49 received flu vaccine. Michigan lags behind U.S. estimates for flu vaccine coverage in every age group and ranks 42nd in the nation for flu vaccine coverage.

It's not too late to vaccinate, and there is still plenty of flu vaccine available. The flu vaccine is the single best way to protect against the flu, and everyone age 6 months and older should be vaccinated every year. Some children aged 6 months through 8 years may need two doses of flu vaccine during the 2013-14 flu season (for more details on this recommendation, see article on page 3).

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. For more information, visit www.michigan.gov/flu and www.cdc.gov/flu.

College/University Flu Toolkit

Health care providers serving young adults can utilize the materials found in the [College/University Flu Toolkit](#) to promote the importance of annual flu vaccination to students. This toolkit includes strategies to increase rates; key messages; e-mail templates; news release templates; social media messages; websites; other resources; and posters and flyers.

Please utilize the materials in this kit to drive demand for flu vaccine at your campus today! It's not too late to get vaccinated.

To view the kit online, visit www.michigan.gov/flu and click on [flu gallery](#) or [current flu season vaccination materials for health care professionals](#).

Flu Resources

Stay up-to-date with:

- MDCH: www.michigan.gov/flu
- CDC: www.cdc.gov/flu
- HHS: www.flu.gov

Check out the [MDCH Flu Gallery](#) for available posters. (See *sample poster on page 6.*)

Who Needs Two Doses of 2013-14 Seasonal Flu Vaccine?

MDCH encourages all Michigan residents age 6 months and up to get vaccinated against influenza. Some children aged 6 months through 8 years may need two doses of flu vaccine during the 2013-14 flu season. How do you figure out which children need one or two doses of flu vaccine? The Michigan Care Improvement Registry (MCIR) can help determine if two doses are needed.

You can also use the handout [Who Needs Two Doses of 2013-14 Seasonal Influenza Vaccine](#). The handout was clarified to ensure when assessing if a child needs one or two doses of influenza vaccine that the assessment reviews flu vaccine doses given prior to July 1, 2013. In other words, do not include doses received during the current 2013-14 flu season.

Which children will need 2 doses of 2013-14 flu vaccine?

- Any child (aged 6 months-8 years) receiving flu vaccine for the first time or whose flu vaccine history is unknown (no documented doses)
- Any child (aged 6 months-8 years) who does not have a documented history of receiving:
 - At least 2 doses of any seasonal flu vaccine (IIV or LAIV) prior to July 1, 2013
 - Doses could have been administered in the same or two different flu seasons
 - AND**
 - At least 1 dose of the seasonal flu vaccine was given between July 1, 2010, and June 30, 2013
 - OR**
 - At least 1 dose of monovalent 2009 H1N1 vaccine was given

It is important to continue to vaccinate against influenza. Flu is here and is in our communities. Be sure to assess children age 6 months through 8 years to determine if 2 doses of flu vaccine are needed to ensure protection. MDCH's materials for the 2013-14 influenza season, including the handout on "Who Needs two Doses of 2013-14 Seasonal Influenza Vaccine" can be found at www.michigan.gov/flu.

Flu Vaccines Required to be Entered into MCIR

As a reminder, providers are required to report ALL immunizations, including flu, administered to every child born after December 31, 1993 and less than 20 years of age within 72 hours of administration into the [Michigan Care Improvement Registry \(MCIR\)](#). Please ensure you are entering your doses for adults as well!

Recent Editorials on Vaccination

- Slate: [Growing up unvaccinated: a healthy lifestyle couldn't prevent many childhood illnesses](#)
- Slate: [Flu vaccine is safe for people with egg allergies: Why I vaccinated my child](#)

Influenza-Related Journal Articles

- [Study backs giving flu vaccine to working-age adults with diabetes](#)
- [Flu Vaccine Found to Lower Risk of Premature or Low-Weight Babies](#)
- [Sanofi's QIV found safe, immunogenic in young kids](#)

New Quick Look Handouts Available on Using Zoster and MMRV Vaccines

[Quick Look handouts](#) are concise summaries of ACIP recommendations, and are available for more than a dozen vaccines; most are one page in length. The Michigan Department of Community Health (MDCH) Division of Immunization recently created two new Quick Looks on herpes zoster and the MMRV vaccines.

The Quick Look handouts, along with a number of vaccine storage and handling resources, are posted at www.michigan.gov/immunize (look under "Quick Looks and Other Resources for Health Care Professionals".) Add this MDCH website page to your "Favorites" and check back weekly for further 2014 updates and additions.

Slight Rise in Risk of Intussusception Seen with Rotavirus Vaccine

CIDRAP, 1/14/14

Rotavirus vaccination in infants slightly raises the risk of a specific intestinal disorder, researchers reported in *The New England Journal of Medicine*.

U.S. investigators assessed the effect of both the pentavalent (five-strain) RotaTeq vaccine and Rotarix, a monovalent formulation, on the risk intussusception in infants 5 to 37 weeks old. Intussusception is an inversion or "telescoping" of one segment of the intestine within another segment, which can block the passage of food or fluid and cut off blood supply. It has been noted in other countries as a risk with both vaccines.

Their analyses included 507,874 first doses and 1,277,556 total doses of RotaTeq and 53,638 first doses and 103,098 total doses of Rotarix.

For RotaTeq, they found the risk of the disorder to be slightly elevated after the first dose, with an attributable risk of 1.1 excess cases per 100,000 vaccinees within 7 days and of 1.5 excess cases within 21 days in their primary analysis, and an attributable risk of 1.2 excess cases within 21 days in a secondary analysis. The primary analysis included only vaccinated children, while the secondary analysis included exposed and unexposed infants.

The secondary analysis of Rotarix suggested a potential risk, but the authors said the study of that vaccine was underpowered.

An accompanying editorial calls the risk low and says the harm prevented by the vaccine outweighs the risk: "In the US cohort of 4.5 million babies born each year, vaccination is estimated to prevent approximately 53,000 hospitalizations and 170,000 emergency department visits for diarrhea, at the expense of causing 45 to 213 cases of intussusception nationwide."

The study was funded by the U.S. Food and Drug Administration.

Jan 14 *N Engl J Med* [study](#)

Jan 14 *N Engl J Med* [editorial](#)

2014 Immunization Schedules Released

Every year, recommendations for routine use of vaccines in children, adolescents, and adults are developed by the Advisory Committee on Immunization Practices (ACIP) and, when adopted by the Director of CDC, become official CDC/HHS policy.

The 2014 [child and adolescent schedule](#) was released on January 31 and the [adult schedule](#) was released on February 3.

[Posted online 2/4/14](#)

Cervical Cancer is Preventable

Cervical cancer is highly preventable because screening tests for cervical cancer and vaccines to prevent human papillomavirus (HPV), which is the main cause of cervical cancer, are available. However, half of cervical cancers occur among women rarely or never screened for cancer, and another 10%–20% of cancers occur among women who were screened but did not receive adequate follow-up care. When cervical cancer is found early, it is highly treatable and associated with long survival and good quality of life.

In 2010, 344 Michigan women were diagnosed with invasive cervical cancer, and in 2011, 121 Michigan women died from this disease, a rate which is basically unchanged over the last decade. Yet cervical cancer is essentially preventable.

About 70% of cervical cancer in the U.S. could be prevented by the timely, extensive and consistent provision of the human papillomavirus (HPV) vaccination. Three doses of HPV vaccine are recommended for girls and boys at 11-12 years of age; the vaccine can be given up through age 26. The HPV vaccine is safe, effective, and produces better immunity when given at the recommended age of 11-12 years. However, as of October, 2013, statewide, only 30.1% of females and 7.5% of males, ages 13-17, had received the entire three-dose vaccine series, according to Michigan Care Improvement Registry data. Women who have received the HPV vaccine should still receive regular Pap tests.

Vaccines for Children (VFC), Medicaid, MI-Child, and most health insurances pay for the HPV vaccine. If your child does not have health insurance, or does not have insurance that covers these vaccines, ask your health care provider or local health department about the VFC program. VFC provides no- or low-cost vaccines to eligible children, 18 years of age and younger.

For more information:

- www.michigan.gov/hpv
- www.michigan.gov/teenvaccines
- www.michigan.gov/cancer

HPV Vaccine: The Earlier, the Better

A study published in the *Journal of Clinical Oncology* reveals that rates of cervical dysplasia among women age 18 and older with abnormal cervical cytology when they received the human papillomavirus (HPV) vaccine were similar to unvaccinated women, but women age 18 and older without cervical abnormalities at the time of vaccination had a 23 percent reduced risk of high-grade squamous intraepithelial lesions (HSIL). Researchers led by Dr. Salaheddin Mahmud of the University of Manitoba wrote, "A significant percentage of vaccinated women may not be protected against HSIL or lesser dysplasia especially if they were vaccinated at older age or had abnormal cytology before vaccination. These findings affirm the importance of vaccination before any significant exposure to HPV occurs and underscore the need for screening programs that cover all sexually active women, even if they were vaccinated." The study involved 3,541 women who were 15 or older when they were vaccinated, each of whom was matched with three unvaccinated patients.

From "[HPV Vaccine: The Earlier, the Better](#)"
MedPage Today (01/06/14) Bankhead, Charles

HPV Vaccine: A Strong Provider Recommendation Matters

CHOP Vaccine Education Center, Vaccine Update for Healthcare Providers, 1/28/14; Contributed by Deborah L. Wexler, MD, Executive Director, Immunization Action Coalition

Since human papillomavirus (HPV) vaccine was licensed for use in the U.S. in 2006, vaccine-type HPV prevalence has declined 56 percent among females 14 through 19 years of age.

However, according to the CDC's most recent National Immunization Survey for teens, HPV vaccination rates did not increase at all from 2011 to 2012 in 13- to 17-year-old girls. Only half of these teens received the first dose of this anticancer vaccine, and only one-third received the full three-dose series.

Research consistently shows that a provider's recommendation to vaccinate is the single most influential factor in convincing parents to vaccinate their children. Your approach to discussing HPV vaccination with a parent strongly influences whether they have their child vaccinated. When you only *ask* parents if they'd like to vaccinate their child, rather than *recommending* it, vaccine acceptance drops significantly. Your strong recommendation is what is needed to protect our nation's children from HPV.

Here are some important points to remember and statements you can make to parents when recommending HPV vaccine:

Rather than just *asking* parents if they're *interested* in getting HPV vaccine for their child, you could say: "HPV vaccine is very important because it prevents cancer. That's why I'm recommending that your daughter/son receive the first dose of HPV vaccine today."

[Read more about why providers' recommendations matter»](#)

Additional Resources

- CDC Provider Portal: <http://www.cdc.gov/hpv/>
- Webinar: *HPV Vaccine is Cancer Prevention... So what's the hold up?* This webinar was held on January 28. To see the archived webinar, go to: <http://www.vicnetwork.org/category/events/archived-webinars/>

How a Pediatrician Discusses Vaccines Impacts a Parent's Decision to Vaccinate

Vaccine Top 5: Nov. 2013 Media Coverage, Every Child by Two

A [study](#) examining how pediatricians talk to parents about vaccines was published in the November issue of *Pediatrics*, revealing that pediatricians who told parents their child needed a vaccination (rather than asked if they wanted one) met less resistance from parents.

Three-quarters of pediatricians brought up the issue of vaccination by using a "presumptive" approach, which assumes parents will immunize their child. Only 26 percent of parents were resistant to vaccine recommendations when pediatricians used this approach. However, 83 percent resisted when pediatricians used a "participatory" approach, which invites parental involvement (e.g. "What do you want to do about shots?").

"The participatory language suggests shared-decision making, and this isn't necessarily a time to share a decision with parents. There isn't a choice here. There's no other medically accepted option," said study author [Dr. Douglas Opel](#). Read more about the study on [Shot of Prevention](#) and be sure to encourage parents to have their children immunized on time, every time!

[Posted online 2/4/14](#)

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Hep B Birth Dose Provides Safety Net for Newborns; New Educational Posters are Available

Nearly one in three babies born in the U.S. leaves the hospital unprotected against hepatitis B infection. As a result, approximately 800 U.S. newborns are chronically infected each year through perinatal exposure.

Giving hepatitis B vaccine to all newborns, prior to hospital discharge, will ensure that babies born to mothers with unknown or unreported hepatitis B surface antigen (HBsAg) will be 70-95% protected from perinatal hepatitis B transmission.

We need to do everything we can to protect babies from vaccine preventable diseases. The hepatitis B birth dose will also protect babies if they are being cared for or living with someone who has the hepatitis B virus.

The American Academy of Family Physicians (AAFP), American Academy of Pediatrics (AAP), American College of Obstetricians and Gynecologists (ACOG), Centers for Disease Control and Prevention (CDC) and the Michigan Department of Community Health (MDCH) recommend all babies receive hepatitis B vaccine prior to hospital discharge.

To emphasize the importance of providing the hepatitis B birth dose to all babies and the importance of follow-up care for the mothers, MDCH has created three new posters: *Do Your Part to Prevent Hepatitis*; *Your Baby Needs Hepatitis B Vaccine at Birth*; and *Protect You and Your Baby*.

These posters are online at: www.michigan.gov/hepatitisb. The first two posters are in the Hospital Section – (under Resources). The *Protect You and Your Baby* poster, which emphasizes the importance of follow-up care for the mothers, is in the OB/GYN section (under Resources).

To download a copy of the Immunization Action Coalition (IAC)'s resource guide, *Hepatitis B: What Hospitals Need to Do to Protect Newborns*, go to: www.immunize.org/protect-newborns/guide.

Thank you for your continued efforts to prevent the perinatal transmission of hepatitis B.

Hepatitis A and B Vaccine Available for Those at Risk

Hepatitis A and B vaccine is available for those who are at risk of infection or who want to be protected from getting the hepatitis A virus (HAV) or hepatitis B virus (HBV). Language in the Vaccines for Children (VFC) program resource book has been updated to assure we are fully assessing and including individuals with HBV and/or hepatitis C virus (HCV).

These changes can be found in the [VFC Resource Book](#), Section II, under High-Risk Hepatitis A & B (page 5) and Michigan Vaccine Replacement Program (MI-VRP) (page 6).

Perinatal Hepatitis B Prevention Program Reporting Forms Now Include Tdap and Flu Vaccines

The Perinatal Hepatitis B Prevention Program (PHBPP) reporting forms have been updated to include the date of administration for Tdap and Flu vaccines and whether the doses were entered into the Michigan Care Improvement Registry (MCIR). The *Perinatal Hepatitis B Intake form* (to be completed by local health departments) and the *Hepatitis B Perinatal Case Report Infant/Contact form* (to be completed by hospitals and providers) were updated to reflect these changes.

It's critical that pregnant women receive Tdap and Flu vaccine to protect their newborns and themselves.

It is also very important to enter those doses into MCIR.

The PHBPP manual is at: www.michigan.gov/hepatitisB

New Viral Hepatitis Website Launched

MDCH has launched the new viral hepatitis website for easier access to hepatitis A, B and C information. This site has information for medical and public health professionals including reporting requirements, prevention methods, training opportunities, data and statistics and hepatitis resources. This site also has information for the public explaining hepatitis, methods of transmission, best ways to prevent hepatitis infection, care for those living with hepatitis and hepatitis resources. Visit the website at: www.michigan.gov/hepatitis

Free Immunization Materials Available

Free Michigan Department of Community Health brochures are available at www.healthymichigan.com. These materials are free of charge and are intended for Michigan residents.

Michigan Immunization Timely Tips (MITT)

To subscribe to the [Michigan Immunization Timely Tips](#) newsletter, send an email to cmarkzon@msms.org and enter the word SUBSCRIBE in the subject line. Subscribers will receive the Michigan Immunization Timely Tips (MITT) newsletter, as well as additional immunization-related updates on a periodic basis. MITT is posted at www.michigan.gov/immunize under the Provider Information section. For more information, contact Rosemary Franklin at franklinr@michigan.gov.

Put Your Clinic/Practice in this Newsletter

Have you adopted a new best practice that is working well in your clinic? Would you like to share your success story with *Michigan Immunization Timely Tips (MITT)* readers? We would love to hear from you!

For more information, please contact Rosemary Franklin at franklinr@michigan.gov.

The Holidays May Be Over But Flu Season Is Not.



Don't Spread the Flu to Your Loved Ones.

It's Not Too Late To Get Vaccinated Today.



This poster and others are posted at:
<http://www.michigan.gov/flu> Click on "Flu Gallery"