



# Immunezation Timely Tips

Michigan Department of Health and Human Services (MDHHS) May/June 2016



**KNOW  
MORE  
HEPATITIS**

**May is Hepatitis Awareness Month**

## Give the Hepatitis B Birth Dose Every Time

May is Hepatitis Awareness Month and a good time to remind ourselves why we give the hepatitis B birth dose. Hepatitis B can be transmitted from mother to child at birth. While all women should be tested for hepatitis B during pregnancy, sometimes testing is missed or results are misinterpreted. In fact, only half of Michigan's births to hepatitis B surface antigen (HBsAg)-positive women are being identified according to CDC estimates. It is crucial that prenatal care providers [test all pregnant women for HBsAg for every pregnancy](#) and that all HBsAg-positive results are reported even if the woman is chronically infected or previously vaccinated.

Infants born to hepatitis B positive women need the birth dose and hepatitis B immune globulin (HBIG) along with a completed hepatitis B vaccine series and post-vaccination serology by 9–12 months of age to help prevent mother to child transmission. If the mother is not identified as having hepatitis B and the birth dose is not given, the infant could leave the hospital with no protection against their exposure at birth. This could lead to chronic infection and serious health outcomes, such as liver cancer.

The birth dose acts as a safety net, ensuring that all infants born to hepatitis B positive mothers receive some protection at birth. Starting the hepatitis B vaccine series at birth also protects babies from possible future exposures.

For additional information, see the recently updated Perinatal Hepatitis B Prevention Program manual at [www.michigan.gov/hepatitisb](http://www.michigan.gov/hepatitisb).

## America's Silent Epidemic: Viral Hepatitis

Millions of Americans are living with chronic viral hepatitis, and many do not know they are infected. Hepatitis B and Hepatitis C can become chronic, life-long infections which can lead to liver cancer. Some people with hepatitis may never show any symptoms of having the disease and without a blood test, unknowingly spread the disease to others. MDHHS and the Centers for Disease Control and Prevention (CDC) are encouraging families to protect themselves from hepatitis disease by being informed.

For more information and additional resources:

- [www.cdc.gov/hepatitis/riskassessment](http://www.cdc.gov/hepatitis/riskassessment)
- [www.cdc.gov/hepatitis/hepawarenessmonth.htm](http://www.cdc.gov/hepatitis/hepawarenessmonth.htm)
- [www.cdc.gov/hepatitis/heppromoresources.htm](http://www.cdc.gov/hepatitis/heppromoresources.htm)
- [www.michigan.gov/hepatitis](http://www.michigan.gov/hepatitis)

## CDC's Know Hepatitis B Campaign Promotes Hepatitis B Testing among Asian Americans

*IAC Express, Issue 1238, March 30, 2016*

CDC has launched the third phase of its [Know Hepatitis B Campaign](#) designed to promote hepatitis B testing among Asian Americans. While Asian Americans make up about 5 percent of the total U.S. population, they account for half of the 2.2 million Americans living with chronic hepatitis B. In fact, one in 12 Asian Americans has hepatitis B.

Check out the following new campaign resources, most available in multiple languages:

- [30- and 60-second video PSAs](#). One video features a conversation between a daughter and her parents, with the daughter explaining why Asian Americans should be tested for hepatitis B. The other PSA is an animated video with several key facts about hepatitis B.

*Continued on page 2*

[Posted online 6/6/16](#)

Page 1 of 9

## CDC's Know Hepatitis B Campaign Promotes Hepatitis B Testing among Asian Americans

Campaign resources, continued from page 1:

- [Poster promoting hepatitis B testing](#) for Asian Americans which emphasizes that hepatitis B often has no symptoms
- [Hepatitis B infographic](#)
- [Customizable vaccine card](#) with information about the hepatitis B vaccination to help people keep track of their vaccine series
- [Interactive games](#) to engage potential clients in testing their hepatitis B knowledge
- [Customizable flyer templates](#) developed to allow tailored information about local screening events

Visit [CDC's Know Hepatitis B Campaign](#) web section.

## Winners Announced: 2015-2016 College and University Flu Challenge

MDHHS has [announced the winners](#) of the second annual [College and University Flu Vaccination Challenge](#). Seventeen colleges and universities stepped up to the challenge this flu season to see which school could get the highest flu vaccination rate on their campus.

We are excited to announce the 2015-2016 Flu Challenge Winners:

- Calvin College won in the Small School category (less than 10,000 undergrad students)
- Wayne State University won in the Medium School category (10,000-25,000 undergrad students)
- Michigan State University won in the Large School category (more than 25,000 undergrad students)



### Congratulations to this year's winners!

This represents the first win for Calvin College and back-to-back wins for Wayne State University and MSU! We also applaud all of the colleges and universities that partnered with us to raise awareness and flu vaccination rates on their campuses.

## Maternal Flu Shot Lowers Risk of Infant Flu Infection, Hospitalization

CIDRAP 5/3/16

Infants born to women who received a flu vaccination during pregnancy were 81 percent less likely to be hospitalized with influenza during the first 6 months of life, according to a study published in the May issue of *Pediatrics*.

Researchers from the University of Utah School of Medicine analyzed medical records of 249,387 infants born to 245,386 women from December 2005 to March 2014. Approximately 10 percent of women (23,383) reported receiving the flu vaccine during pregnancy.

Maternal vaccination was associated with a 70 percent lower risk of an infant 6 months or younger having laboratory-confirmed influenza. A total of 658 infants had laboratory-confirmed flu during the study period, only 20 of whom were born to women vaccinated during pregnancy.

Immunization during pregnancy was also associated with an 81 percent lower risk of young infants requiring flu-related hospitalization. Among infants with lab-confirmed flu, 151 (23 percent) were hospitalized, and all but 3 were born to women who did not receive a flu vaccine while pregnant.

Women who received the flu vaccine while pregnant were slightly more likely to have an underlying medical condition (6,317, or 26.5 percent) when compared with unvaccinated women who had chronic disease (51,965, 23 percent). Factors associated with lack of vaccination during pregnancy included having government health insurance or lack of insurance and residence in a rural, frontier, urban South, or southwestern locality.

Maternal flu vaccination appeared to have little effect on rates of respiratory syncytial virus (RSV) in young infants during the study, which strengthened its association with preventing flu cases and hospitalizations.

Though the authors were unable to account for other lifestyle or exposure factors that may have influenced flu rates in young infants, the study was one of the largest retrospective analyses of linked maternal and infant vaccination effects. "Protecting young infants from influenza through maternal immunization during pregnancy is a public health priority," the authors said.

[May 3 Pediatrics study](#)



## Improving Infant Immunization Rates Starts in Pregnancy

*Got Your Shots? News, Minnesota Department of Health Immunization Program, Special Edition - National Infant Immunization Week, April, 2016*

Protecting infants from vaccine-preventable diseases starts before they're even born. Providers who care for pregnant women have a unique opportunity to make sure mom is fully vaccinated, and to start the conversation about what vaccines the baby will need after they're born.

### Immunize mom to protect her baby

Pregnant women are recommended to get flu and pertussis vaccines. Flu vaccine can be given anytime during pregnancy and pertussis vaccine (Tdap) is recommended to be given in the third trimester. Getting vaccinated while pregnant protects mom and allows her to produce antibodies that are passed to her baby protecting the baby until they are old enough to get vaccinated.

A key factor in making sure pregnant women get these vaccines is a strong provider recommendation. A recent national survey of pregnant women conducted by CDC showed an eight-fold increase in flu vaccination rates when a clinician offered and gave the vaccine. An expectant parent is typically doing everything she can to keep herself and her unborn child healthy, like avoiding certain foods and drugs. Let her know that getting her flu and Tdap vaccines is just another step towards keeping herself and her baby healthy.

### It's never too early to think about immunizations for your baby

A 2006 qualitative study in *Pediatrics* by Benin et al., found that many mothers immediately post-partum had already decided whether or not to immunize their infants or delay immunizations. Social networks and information on the Internet are key sources of immunization information, but providers are an important and influential part of an expectant parent's social network.

Have some immunization materials and websites at your fingertips that you can give to expectant parents. Organizations like these are a great place to start:

- [CDC - Vaccines & Immunizations](#)
- [American Academy of Pediatrics](#)
- [Vaccine Education Center at the Children's Hospital of Philadelphia](#)

*Continued, see column to the right*

*Continued from column on the left*

### Take time to answer questions

Discussing vaccines may raise questions or concerns. Your responses don't have to be long. You should acknowledge the parents' concerns, provide accurate information, and encourage them to keep exploring reliable information.

We all have a role in improving immunization rates among infants in our state. The conversation needs to start before the baby is born and continue through childhood. Childhood diseases that were once common are rarely seen in the U.S. because of the success of immunizations. We have the power to protect children from these dangerous diseases!

### Focused Packets Replace the AIM Kits

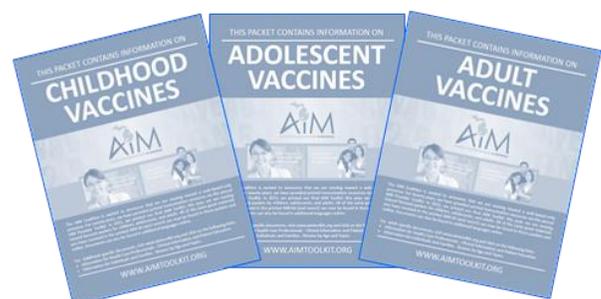
The Alliance for Immunization in Michigan (AIM) Coalition is moving toward a primarily web-based presence. For twenty years, AIM has provided printed immunization resources via the annual AIM Provider Toolkit. In 2015, the final AIM Toolkit was printed. This year, AIM is moving toward focused packets for children, adolescents, and adults. All of the same great materials you have received in the printed AIM kit (and more!) can now be found in these packets and online.

The Childhood, Adolescent, and Adult Packets include similar types of materials, but each packet focuses on only one age group. A wider selection of materials is available at [www.aimtoolkit.org](http://www.aimtoolkit.org), where you will also find many translated resources.

To order packets for children, adolescents, or adults, go to [www.healthymichigan.com](http://www.healthymichigan.com).

### Are you a VFC Provider?

If you are a Vaccines for Children (VFC) provider, please check with your local health department (LHD) before placing an order for AIM Packets. Most of the LHDs have already ordered extra packets for their VFC providers.



## How Many Adults Are Getting Vaccinated with Td and Tdap Vaccines?

A new study assessing national and state-specific Td and Tdap vaccination of adult populations from the 2013 Behavioral Risk Factor Surveillance System (BRFSS) was published in the May 2016 issue of the [American Journal of Preventive Medicine](#). This study provides a baseline for state level Td and Tdap vaccination coverage in the U.S.

### Major findings

- In Michigan, vaccination coverage among adults ≥18 years was 60.0 percent for Td vaccination (18<sup>th</sup> highest coverage compared to other states) and 27.6 percent for Tdap vaccination (28<sup>th</sup> compared to other states).
- Overall, national vaccination coverage among adults ≥18 years was 57.5 percent for Td vaccination and 28.9 percent for Tdap vaccination.
- Adults who reported having health insurance, a personal healthcare provider, and a routine checkup in the previous year were independently associated with higher vaccination coverage.
- Reported receipt of influenza and pneumococcal vaccination was also associated with Td or Tdap vaccination.
- Being African American, Hispanic, widowed, divorced, or separated were independently associated with a *decreased* likelihood of Td or Tdap vaccination among adults.

### Recommendations

As indicated by the [Standards for Adult Immunization Practice](#), healthcare providers should assess vaccination status during each visit and should strongly recommend Td or Tdap vaccination, as appropriate, to their clients or provide referrals in situations where Td and Tdap vaccination is not available during the visit. Including this action as a routine practice will help improve Td and Tdap vaccination coverage.

### Resources

Td/Tdap

<http://www.cdc.gov/vaccines/hcp/adults/downloads/fs-tdap-hcp.pdf>

Pertussis

<http://www.cdc.gov/pertussis/materials/index.html>  
<http://www.cdc.gov/features/pertussis/>

Tetanus

<http://www.cdc.gov/tetanus/pubs-tools/multimedia.html>

## Give VIS before Vaccinating, Every Time

The National Childhood Vaccine Injury Act requires a health care provider to give a copy of the current Vaccine Information Statement (VIS) to an adult patient or to a child's parent/legal representative before vaccinating an adult or child with a dose of the following vaccines: diphtheria, tetanus, pertussis, measles, mumps, rubella, polio, hepatitis A, hepatitis B, *Haemophilus influenzae* type b (Hib), influenza, pneumococcal conjugate, meningococcal, rotavirus, human papillomavirus (HPV), or varicella (chickenpox only).

The appropriate VIS must be given:

- Prior to the vaccination (and prior to each dose of a multi-dose series);
- Regardless of the age of the vaccinee;
- Regardless of whether the vaccine is given in a public or private health care setting.

For the vaccines not covered under the National Childhood Vaccine Injury Act (i.e., adenovirus, anthrax, Japanese encephalitis, pneumococcal polysaccharide, rabies, shingles, typhoid, and yellow fever), providers are not required by federal law to use VIS unless they have been purchased under CDC contract. However, CDC recommends that VIS be used whenever these vaccines are given.

In Michigan, it is important that patients, or their parents or legal guardians, be given the Michigan versions of VIS because they include information about the Michigan Care Improvement Registry (MCIR). By state law in Michigan, parents must be informed about MCIR. Vaccine Information Statements that are obtained from other sources (e.g., from the CDC or IAC websites) do not contain information about MCIR.

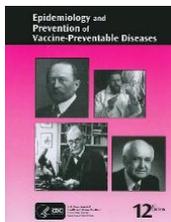
Many translations are available. When new VIS are published, there is always a lag time before translations are published. Once the translated VIS become available, MDHHS adds the MCIR language onto the documents and posts them on the MDHHS website as soon as we are able to do so.

The [Important VIS Facts handout](#) includes all the current VIS dates and is posted on the MDHHS website.

These documents are posted on our website at [www.michigan.gov/immunize](http://www.michigan.gov/immunize) under [Vaccine Information Statements](#).

## Pink Book Webinar Series Begins June 1

Each Wednesday for 15 weeks, CDC experts will discuss a new chapter of the Epidemiology and Prevention of Vaccine-Preventable Diseases (commonly known as the Pink Book) and answer viewers' questions. Webinars will be archived and posted within two weeks following each live event.



The webinar series will provide an overview of vaccines and the diseases they prevent, general recommendations for vaccines, vaccination principles, and immunization strategies for providers. Continuing education will be available for each event.

[Advance registration is required.](#)

The 13<sup>th</sup> edition of the Pink Book is available for free online or for purchase as a bound paperback book.

Printed copies can be ordered online through the [Public Health Foundation](#) at a cost of \$40 plus shipping and handling.

You can view it online and download a PDF of the Pink Book at:

<http://www.cdc.gov/vaccines/pubs/pinkbook/index.html>.

## Live Pink Book Course coming soon to Indiana

CDC also offers the Pink Book class as a live, two-day course which is held in a few states every year. In June 2015, the class was held in Lansing, Michigan. It will probably not be offered in Michigan again for several years.

However, the class will be held in Carmel, Indiana, on October 12-13, 2016. Health care professionals in Michigan who would like to take the live course may want to consider making the drive to Carmel for the class (it's a suburb of Indianapolis).

For more information, please visit [Indiana's Pink Book Class website](#).

## Chickenpox cases are increasing in Michigan

MDHHS is advising parents to make sure their children are up to date on chickenpox vaccination following reports of increased cases and outbreaks in the state. Preliminary numbers for 2016 indicate there have been 239 chickenpox cases through April, which is about 57 percent more than that time last year. The Department issued a press release on May 11:

<http://1.usa.gov/1T8mq3G>

## Recommendations vs. Requirements: What's the Difference?

The Michigan Department of Health and Human Services (MDHHS) urges immunization providers to give the most comprehensive protection to patients by following the ACIP-recommended immunization schedules.

The [Recommended Immunization Schedules for Persons Aged 0 through 18 Years](#) are published annually. They are approved by the Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics (AAP) and the American Academy of Family Physicians (AAFP). The [Recommended Adult Immunization Schedule](#), also published annually, is approved by the ACIP, AAFP, American College of Physicians (ACP), American College of Obstetricians and Gynecologists (ACOG), and the American College of Nurse-Midwives (ACNM). [The Michigan Advisory Committee on Immunization \(MACI\) also endorses the ACIP-recommended vaccination schedules.](#)

Requirements are usually related to state mandates for day care and school entry. Many colleges, universities, and healthcare institutions also have immunization requirements. Finally, the federal government has immunization requirements for immigrants and refugees entering the United States. [Requirements for school and childcare attendance in Michigan](#) may differ from the Recommended Immunization Schedule. MDHHS recommends that providers vaccinate based on current ACIP recommendations. In doing so, Michigan's school immunization requirements will be met. More importantly, patients will receive the maximum protection from vaccine preventable diseases.

The MDHHS Division of Immunization recently created a new handout called *Vaccine Recommendations and School or Daycare Rules: What is the difference?* (see page 8). Health care providers can use this handout to educate parents on recommended versus required vaccines. We hope you will find this handout useful. [Vaccine Recommendations and School or Daycare Rules: What is the difference?](#) is also posted on our website.

Looking for strategies to discuss vaccines with parents?

See tips on creating a successful dialogue!

#NIIW <http://go.usa.gov/4EKp>

## Two Brochures are Updated

Two of the MDHHS immunization brochures were updated in April and are now available to order. There were significant changes to the *Adult Immunizations: Are you protected* brochure and the *HPV Vaccination* brochure. Because the changes were significant, we are recommending that you recycle older versions of the brochures and replace them with the most up-to-date version.



These brochures can be ordered online at [www.healthymichigan.com](http://www.healthymichigan.com) > Enter Site > Immunizations.

## CDC Launches New Immunization Website for Parents

*IAC Express, Issue 1243, April 27, 2016*

CDC recently launched a redesigned website that offers a variety of resources for parents seeking to learn more about childhood immunization and the diseases that can be prevented with vaccines.

Parents can learn about vaccines needed for their child's age, how to make vaccine visits less stressful, immunization records and requirements, and the 16 diseases that vaccines prevent in children and teenagers. They can also download easy-to-read immunization schedules in both English and Spanish, use an interactive immunization scheduler, and view CDC educational resources. The new website also contains specialized immunization information related to adoption, travel, and pregnancy.

Please visit [www.cdc.gov/vaccines/parents](http://www.cdc.gov/vaccines/parents) and recommend it to the parents in your practice.

## Related Links

- IAC's website for patients and parents, [www.vaccineinformation.org](http://www.vaccineinformation.org)
- [Responding to Parents](#) web page on [immunize.org](http://immunize.org)
- Vaccine Education Center's [Parent PACK](#) program
- [American Academy of Pediatrics immunization website](#)
- Every Child By Two's [Vaccinate Your Baby](#) and [Vaccinate Your Family](#) websites
- [PKIDs website](#)
- [Voices for Vaccines](#)

## Michigan's Annual Immunization Conferences Set for Oct/Nov

The dates and locations of the 2016 MDHHS Fall Regional Immunization Conferences are: Oct. 11 (Marquette), Oct. 13 (Gaylord), Oct. 25 (Flint Township), Oct. 27 (Troy), Oct. 28 (Dearborn), Nov. 15 (Kalamazoo), Nov. 16 (Grand Rapids), and Nov. 18 (Lansing).

The conferences are appropriate for nurses, nurse practitioners, medical assistants, public health staff, pharmacists, physicians, physician assistants, medical and nursing students, and anyone interested in learning more about current immunization practice in Michigan.

While the conferences are intended for all immunizing providers representing diverse health care settings, physicians' offices, in particular, may benefit from this immunization update and networking opportunity. However, everyone is welcome to attend this conference, and health care professionals from a variety of settings will find this training opportunity beneficial.

Immunization Quality Improvement AFIX Awards will be presented at each of the conferences. Find out if your practice may be eligible for an award by reviewing the [2016 Immunization Quality Improvement AFIX Award Criteria](#).

We are in the early planning stages for these conferences. MDHHS will apply for continuing education credits. Registration will begin on September 7.

As more conference details become available, they will be posted on the conference website at <http://1.usa.gov/1RzZSkW>

A Save-the-Date flyer is on page 9. Stay tuned!

## Michigan Immunization Timely Tips (MITT)

To subscribe to the [Michigan Immunization Timely Tips](#) (MITT) newsletter, send an email to [cmarkzon@msms.org](mailto:cmarkzon@msms.org) and enter the word SUBSCRIBE in the subject line. You will receive this newsletter, as well as additional immunization updates on a periodic basis. MITT is posted at [www.michigan.gov/immunize](http://www.michigan.gov/immunize); Health Care Professionals/Providers > Provider Education Resources. For more information, contact Rosemary Franklin at [franklinr@michigan.gov](mailto:franklinr@michigan.gov).



## Protect You and Your Baby

- Know your hepatitis B surface antigen (HBsAg) result
  - If negative,
    - Make sure your baby has hepatitis B (hepB) vaccine
      - At birth; before hospital discharge
      - At 1 – 2 months of age
      - At 6 months of age
  - If negative, but you are at risk
    - Get hepB vaccine
      - At 0, 1 & 6 months
  - If positive,
    - Make sure your baby has hepB vaccine
      - Within 12 hours of birth (with hepB immune globulin [HBIG])
      - At 1 – 2 months of age
      - At 6 months of age
    - Make sure your baby has a follow-up blood test
      - At 3 – 6 months after last shot
      - To ensure they are safe from getting hepB virus
    - Make sure you get follow-up care and/or treatment
- Get a flu shot
  - During any stage of pregnancy
- Get a Tdap shot
  - During each pregnancy between 27 and 36 weeks gestation



[www.michigan.gov/hepatitisb](http://www.michigan.gov/hepatitisb)



This poster and additional resources are posted at:  
[www.michigan.gov/hepatitisb](http://www.michigan.gov/hepatitisb)

# Vaccine Recommendations and School or Daycare Rules: What is the difference?

There are a number of vaccines available to best protect an individual child and these should be given at certain ages and are, in general, referred to as the “recommended vaccines”. These are listed on the “Recommended Immunization Schedules for Persons Birth through 18 Years” at [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines).

Since many vaccine preventable diseases are easily spread among children (like measles and chickenpox), there are Communicable Disease (CD) rules in place to best protect children when in close contact with others. These are commonly referred to as the “required” vaccines for daycare and school. These rules are state law and can be different in each state.

## **Recommended Vaccines (A Standard of Care)**

- Healthcare providers follow the recommended immunization schedule because it provides the best and most complete protection against disease
- All recommended vaccines should be given to everyone at the indicated age, unless a medical condition that prevents vaccination is present
- Recommendations are based on health and safety considerations for the entire population
- Recommended vaccines prevent diseases that can be serious or potentially cause long-term health problems or death

## **Required Vaccines**

### **(Mandated by each state government)**

- These rules protect healthy children from some serious diseases and also protect children who can't be vaccinated (for instance, a child with cancer).
- Michigan requires certain vaccines for entry into childcare, preschool and school, but strongly encourages parents and providers to follow the recommended schedule for vaccination
- By following the recommended schedule, Michigan's school immunization requirements will be met

## **Why are certain vaccines required?**

Vaccines provide protection against serious disease for the person receiving them. They also provide protection to classmates and teachers by reducing the number of people who are at risk of disease. When enough people are vaccinated, the diseases tend to stop circulating. Children are particularly at risk for disease in a school, preschool or childcare setting, due to outbreaks of disease that may occur more frequently in these settings.

There are other vaccine-preventable diseases that can also harm your child—like hepatitis A, HPV (which causes cancer), and influenza. These are not part of the rules for different reasons. For example, flu vaccine is not given all year round and may not be available at the start of a school year. However, these diseases do cause harm and vaccine should be received.

## **What will provide the best protection from disease?**

By following the recommended immunization schedule you are receiving the best protection from all vaccine-preventable diseases. It will also provide the most complete protection for the community, which will help ensure schools, preschools and childcare settings are protected.

# Save the Date!

# Michigan's Annual Immunization Conferences Fall 2016

## Dates & Locations

Oct. 11	Marquette
Oct. 13	Gaylord
Oct. 25	Flint Twp.
Oct. 27	Troy
Oct. 28	Dearborn
Nov. 15	Kalamazoo
Nov. 16	Grand Rapids
Nov. 18	Lansing



## Who Should Attend

Physicians, physician assistants, nurses, nurse practitioners, medical assistants, public health staff, pharmacists, physicians, physician assistants, medical and nursing students, practice managers, and other health care professionals who are interested in learning more about current immunization practice in Michigan.

## About the Conferences

Immunization Quality Improvement AFIX Awards will be distributed at the conferences. Find out if your practice may be eligible for an award by reviewing the award criteria on the [MDHHS Immunization Conferences website](#).

When more conference details become available, they will be posted on the conference website at <http://1.usa.gov/1RzZSkW>

The Michigan Department of Health and Human Services (MDHHS) has sponsored the fall regional immunization conferences annually since 1994.