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Barriers to Complete Adult Vaccinations in Vermont

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Introduction/Background

• Child immunization is nearly universally accepted as an effective preventive measure against infectious diseases, yet adult immunization rates continue to lag behind recommended levels.
• Epidemiological trends suggest a correlation between vaccine administration and decreased rates of significant morbidity and mortality, hospitalization and emergency department visits, work absenteeism, and illness associated expenses.
• As of 2010, Vermont is failing to meet its adult immunization goals by 13.4%.
• This study aims to understand and identify specific barriers to adult immunization in Vermont.

Methods

• The survey group was health care practitioners involved in adult vaccination, a public database of licensed physicians from the Vermont Department of Health (VDH) website was compared against email addresses provided by the VDH of family medicine and internal medicine doctors (qualifying physicians) with Vermont mailing addresses.
• Five hundred and seventy-two emails were sent to doctors (qualifying physicians) with Vermont mailing addresses.
• Five hundred and seventy-two emails were sent to qualifying physicians with a web-link to the survey with a follow-up email reminder one week later.
• The survey consisted of 26 questions developed from the awareness-to-adherence model, and included questions about physician demographics, behaviors regarding recommendations to patients, sources of information, barriers to adult immunization, and opinions about possible interventions to improve adult vaccination rates.

Results

• A total of 88 people responded to the survey, giving us a response of 15.4%.
• Forty-four (50%) identified their specialty as internal medicine, 36 (40.9%) as family medicine, and one (1.1%) as pediatrics. An additional 7 (8.3%) identified other specialties.

References


Future Directions

• Improved use of the electronic medical record should help with reminders, so this is likely not an area that requires much in the way of future studies.
• Also significant is the lack of patient-perceived need, which necessitates the need for more education about vaccines.
• Future studies should address the patient population directly to assess reasons for not receiving vaccinations.