Pertussis Vaccine Messaging for Pregnant Women
Epidemic? What epidemic?

- **2010** over 9,000 cases
  10 infant deaths
- **2014** over 11,000 cases
  3 infant deaths
  > 400 hospitalizations
- **2015** already 1,674 cases
  1 infant death

Pertussis and Tdap Vaccine

Immunize pregnant patients with Tdap vaccine between 27 and 36 weeks gestation of each pregnancy, regardless of the number of doses of Tdap previously received.

- Safe
- Effective
- Counting on your recommendation


Vaccination in pregnant women is a two-for-one healthcare intervention because it protects expectant mothers and improves the chances of a healthy delivery while providing essential protection for babies during the first few months of life.

Maternal Tdap Coverage Rates in CA

- Uptake of Tdap among pregnant women in CA is improving but still low and many barriers are reported.
  
  - 22% in 2013
  - 44% in 2014
Give a STRONG recommendation

“Before I forget, here is a brochure on recommended vaccines you can take home and read.”

“Have you heard about the whooping cough vaccine? Would you consider getting the shot today?”

“If you can get to the pharmacy, you may want to get the whooping cough shot there.”
Give a STRONG recommendation

“I strongly recommend that you get the whooping cough shot today. Whooping cough is a dangerous disease that can make babies stop breathing. The vaccine is very safe for both moms and babies, and I recommend it to all of my patients, friends and family members who are pregnant. Getting vaccinated during your 3rd trimester helps maximize the protection that is passed on to your baby and protect your baby until she is old enough to get vaccinated at two months of age.”
How do we engage the community?

• Work closely with LHDs, child care centers, media outlets and other partners
• Distribute information to the general public, community organizations and public health partners
• Develop and test resources
• Provide information and tips to parents
CDPH Materials for Prenatal Care

Expecting?
Protect yourself and your baby against flu and whooping cough!

Is flu really dangerous?
Yes. If you get the flu, it is not the same as getting a common cold. You can still get the flu even if you are healthy and active. Flu can lead to serious complications such as high fever, pneumonia, and even death for both you and your baby. Pregnant women are about twice as likely to need hospital care if they get flu compared to women who are not pregnant. Flu can lead to pre-term birth, low birth weight, and stillbirth of the baby. Catching flu during pregnancy also increases your baby’s chances of developing schizophrenia and bipolar disorder later in life.1-4

How dangerous is whooping cough?
For adults, coughing fits can last for months and lead to worrying, trouble sleeping, and even broken ribs. Whooping cough is highly contagious and can easily spread to others, including babies.7

For babies, catching whooping cough can lead to trouble breathing (turning blue or gasping for air), pneumonia, hospitalization, and death.7

Babies most often get whooping cough from their caregivers, including their mothers.6

How common are these diseases?
Millions of Californians get flu each year, and about 1,300 babies under 6 months of age are hospitalized due to flu in California. In 2010, and again in 2016, nearly 10,000 people were hospitalized with whooping cough in California; 10 babies died in 2010. Tragically, more than 70% of cases hospitalized were babies younger than 6 months old.6

How can I protect my baby and myself?
The American College of Obstetricians and Gynecologists (ACOG), the American Academy of Pediatrics (AAP), and the Centers for Disease Control and Prevention (CDC) recommend that all pregnant women get:

- Flu Shot
  Get vaccinated as early as possible during the flu season (August–May) every year.6-8

- Whooping Cough (Tdap) Shot
  Get vaccinated during your third trimester—27 to 36 weeks of pregnancy—even if you got the shot before becoming pregnant. You will need to get the Tdap shot during every pregnancy.6-9

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IMM-1146
IMM-887
IMM-1145*
Focus Group Findings

**Expecting? flyer**

- ✓ Clear and persuasive
- ✓ Approachable
- ✓ High message comprehension
- ✓ Improves perceptions about safety
- ✓ Encourages information seeking

**Your baby may be at risk** poster

- ✓ Conveys seriousness
- ✓ Risks and timing are clear
- ✓ High message comprehension
Materials for Prenatal Care

Prescriber Name, Address, Phone Number:

Patient Name: _______________________________ Date: ________________

Vaccines recommended during pregnancy:

☐ **Tdap** (tetanus, diphtheria, pertussis [whooping cough]) during 3rd trimester
   0.5 mL IM x 1

☐ **Inactivated Influenza**
   0.5 mL IM x 1

Prescriber’s Signature: __________________________ License #: ________________

These vaccines may be available from your primary care physician, local health department, or pharmacy. To find a nearby location, please visit www.vaccine.healthmap.org.

*Your baby is counting on you for protection. Get vaccinated.*

IMM-1143
Materials for New Parents

Protect your little one with immunizations.

IMM-234
Materials on Safety

Vaccine Safety:
10 Facts for Medical Assistants

Talking with Parents About Vaccine Safety

Vaccine Safety: Answers to Parents’ Top Questions

Vaccines for Teens and Preteens: Answers to Your Top Questions

1. Take time to listen. Don’t rush to judge or dismiss them. Many parents want to know about the risks of vaccines safety and how to answer their children’s questions.

2. Validate their concerns. If a parent is worried about their child’s safety, it’s their job to let you know. Sensitivity and reassurance can make parents feel secure and can help them understand the importance of vaccines.

3. Use a “heart-and-head” approach. Statistics and research can’t replace the emotional connection parents have with their children. Personal stories can be powerful in helping parents understand the risks and benefits of vaccines.

4. Balance risks and benefits. Help parents understand that, while vaccines can prevent serious diseases, they also have side effects and risks. It’s important for parents to make an informed decision based on both the benefits and risks.

As a parent, you want to make sure your child is protected against the diseases that could make them sick. Here’s what you need to know about vaccines:

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On the EZIZ.org home page under *Popular Links*, select *Pertussis Materials*. 
Resources

• Contact your local health department at http://bit.do/immunization to order FREE materials

• View archived webinars at EZIZ.org

• Visit CDC at www.cdc.gov/pertussis/pregnant/
Strategies to Improve

- Identify all opportunities
- Assess immunization status
- Recommend vaccine(s)
- Administer or refer
- Document
All HCPs

• Adopt proven strategies to improve vaccination rates
• Adapt the materials suited to particular needs
• Advise expecting parents about recommended vaccines for themselves and their families
Adult Pneumococcal Vaccine Informing
Pneumococcal Disease

The highest incidence of invasive pneumococcal disease occurs in children <2 years of age, persons who have certain underlying conditions and those ≥65 years
Mark’s Story
# Adult Pneumococcal Vaccination

## TABLE 1. Estimated proportion of adults aged ≥19 years who received selected vaccinations, by age group, high-risk status, race/ethnicity, and other selected characteristics — National Health Interview Survey, United States, 2012

<table>
<thead>
<tr>
<th>Vaccination, age group, high-risk status, and race/ethnicity</th>
<th>Sample size</th>
<th>%</th>
<th>(95% CI)</th>
<th>Difference from 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pneumococcal vaccination, ever</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19–64 yrs, high risk</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>9,333</td>
<td>20.0</td>
<td>(18.9–21.1)</td>
<td>-0.1</td>
</tr>
<tr>
<td>White</td>
<td>5,736</td>
<td>21.4</td>
<td>(20.1–22.9)</td>
<td>1.3</td>
</tr>
<tr>
<td>Black</td>
<td>1,605</td>
<td>19.7</td>
<td>(17.4–22.2)</td>
<td>-3.1</td>
</tr>
<tr>
<td>Hispanic</td>
<td>1,326</td>
<td>13.8</td>
<td>(11.5–16.4)</td>
<td>-4.6*</td>
</tr>
<tr>
<td>Asian</td>
<td>350</td>
<td>13.2</td>
<td>(9.5–18.1)</td>
<td>1.2</td>
</tr>
<tr>
<td>Others</td>
<td>316</td>
<td>20.2</td>
<td>(15.2–26.2)</td>
<td>-1.5</td>
</tr>
<tr>
<td>≥65 yrs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>7,076</td>
<td>59.9</td>
<td>(58.4–61.4)</td>
<td>-2.4</td>
</tr>
<tr>
<td>White</td>
<td>4,993</td>
<td>68.3</td>
<td>(62.3–65.7)</td>
<td>-2.5</td>
</tr>
<tr>
<td>Black</td>
<td>919</td>
<td>46.1</td>
<td>(41.7–50.6)</td>
<td>-1.5</td>
</tr>
<tr>
<td>Hispanic or Latino</td>
<td>698</td>
<td>43.4</td>
<td>(39.0–48.0)</td>
<td>0.3</td>
</tr>
<tr>
<td>Asian</td>
<td>373</td>
<td>41.3</td>
<td>(35.4–47.5)</td>
<td>1.0</td>
</tr>
<tr>
<td>Others</td>
<td>93</td>
<td>44.7</td>
<td>(32.6–57.5)</td>
<td>-22.7**</td>
</tr>
</tbody>
</table>

MMWR Feb 7, 2014
New Recommendations in 2014

Beginning 2014:
• PCV13 and PPSV23 for adults 65+ years
• Medicare covers both 1\textsuperscript{st} & 2\textsuperscript{nd} pneumo vaccination
• PCV13 for high-risk adults; \textit{sometimes} PPSV23 for certain high-risk adults.

• How many are up-to-date?
  – ?????????????
New Schedules: Confused Yet?

The charts below provide details on timing of PCV13 and PPSV23 doses for all others.

**Figure 1:** People who are age 19 to 64 years and have conditions, e.g., chronic lung disease, heart disease, or diabetes, or chronic kidney disease, or chronic liver disease, or cerebrospinal fluid leak or a condition that affects the immune system, or are pregnant, should receive 2 doses of PCV13 and 1 dose of PPSV23.

- PCV13: 6 months to 5 years
- PPSV23: ≥65 years

Persons who pre-existing conditions, and are age 65 years or older, should:

1. PPSV23
2. PCV13

Persons who pre-existing conditions, and are age 65 years or older, should:

1. PPSV23
2. PCV13

Abbreviations: PCV, 13-valent pneumococcal conjugate vaccine; PPSV, 23-valent pneumococcal polysaccharide vaccine.

* Minimum interval between PCV23 and PPSV23 is 6 weeks.

**Note:**
- This dose is not included in the pneumococcal vaccine schedule for persons who are age 65 years or older and who received PCV13 as part of the childhood schedule.
- PPSV23 is recommended for persons who are age 65 years or older and who have pre-existing conditions, as it provides additional protection against pneumococcal disease.
- For persons who are age 65 years or older and who received PCV13 as part of the childhood schedule, PPSV23 is not recommended.

*See Table for additional details.*
Our Solution

Download at www.EZIZ.org

“Resources” > “Immunizations by age”

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**Pneumococcal Vaccine Timing**

**Age 65 Years or Older – Everyone**
- If PCV13 was given before age 65 years, no additional PCV13 is needed.

<table>
<thead>
<tr>
<th>No history of pneumococcal vaccine</th>
<th>PCV 13 Prevnar 13</th>
<th>6-12 month interval</th>
<th>PPSV 23 Pneumovax 23</th>
</tr>
</thead>
<tbody>
<tr>
<td>Received PPSV23 before age 65</td>
<td>1 year interval</td>
<td>PCV 13</td>
<td>PPSV 23</td>
</tr>
<tr>
<td>Received PPSV23 at age 65 or older</td>
<td>1 year interval</td>
<td>PCV 13</td>
<td>PPSV 23</td>
</tr>
</tbody>
</table>

**Age 19-64 Years – Underlying Conditions**
- Prior doses count towards doses recommended below and do not need to be repeated.
- If PPSV23 given previously – wait one year before giving PCV13 when dose indicated, wait at least five years before giving a second dose of PPSV23.

- Smokers,
- Long-term facility resident, or
- Chronic conditions:
  - heart disease (including hypertension)
  - lung disease (including asthma)
  - liver disease (including cirrhosis)
  - diabetes
  - alcoholism

- Immuno-compromised (including HIV infection),
- Chronic renal failure,
- Nephrotic syndrome, or
- Asplenia

- CSF leaks or Cochlear Implants

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*DO NOT administer PCV13 and PPSV23 at the same visit.*

California Department of Public Health, Immunization Branch www.EZIZ.org
This publication was supported by Grant Number 1U2B/CCU203967 from the Centers for Disease Control and Prevention (CDC)
Adults 65+ Pneumococcal Vaccine Focus-Testing

- They respect the severity of the disease.
- Understand they could be at-risk.
- Did not understand “pneumococcal”; everyone understood “pneumonia shot.”
- All knew where to go for shots.
- All liked the flyer’s important message.
Pneumococcal Flyer for 65+

Download at www.EZIZ.org

“Resources” >

“Immunizations by age”

If you are 65+
YOU NEED 2 PNEUMONIA SHOTS

Pneumonia can be life-threatening. Pneumonia is a serious lung infection that can lead to hospitalization and death.

Older adults are at high risk for getting pneumonia. Vaccines can help prevent a leading cause of pneumonia.

Talk to your doctor about when to get the shots. Two different pneumonia shots are now recommended if you’re 65 or older. Even if you already got one, you need both for best protection. It could save your life.

Learn more at www.cdc.gov or call 1-800-CDC-INFO

This publication was supported by Grant Number H275CH023697 from the Centers for Disease Control and Prevention (CDC).
Distribution to Date

- 100,000+ California Dept of Aging/ AAAs
- Family practice physicians
- Geriatricians
- Gerontologists
- LHDs
- Coalitions
- Co-promote with flu vaccine
Adults 19-64 High Risk Focus-Testing

• Don’t necessarily recognize themselves “at-risk” for pneumonia.
• Wanted to better understand risk of disease.
• Don’t know there is a vaccine or that they would need it.
• Most knew where to get shots; not all.
• Some unsure about insurance coverage for vaccines.
• After reading, more would consider getting vaccinated/seeking medical advice.
High-Risk Adult Flyer

Download at www.EZIZ.org

“Resources” >

“Immunizations by age”

Do you smoke? Have asthma, diabetes, or a weakened immune system?

You may be at high risk for pneumonia—a serious lung infection

Pneumonia can be life-threatening!

- 900,000 Americans get pneumonia every year.
- Nearly half a million are hospitalized.
- About 1 in 20 dies.

If you are 19 or older with any of these conditions, ask your doctor about getting a pneumonia shot.

- Cigarette smoker
- Asthma
- Diabetes
- Certain cancers or having chemotherapy
- Heart, kidney, and liver diseases
- Sickle cell disease
- Cerebrospinal fluid leaks
- A cochlear implant
- HIV/AIDS
- A bone marrow or organ transplant

Get a pneumonia shot. It may save your life. Learn more at cdc.gov or call 1-800-CDC-INFO.

If you smoke, call 1-800-NO-BUTTS

This publication was supported by Grant Number H23AC003285 from the Centers for Disease Control and Prevention (CDC).
Distribution: Maximize Potential

- Disease-specific groups: Diabetes, Asthma, Cancer Society, Heart Assoc, Lung Assoc, HIV/AIDS, Sickle Cell, Smoking Cessation, Audiologists, Oncologists...
- Young adults 19+, middle-age up to 64
- Community Colleges, community centers, CHCs...
Thank you!

Questions? CDPH Immunization Branch would like to help!

- Tammy.Pilisuk@cdph.ca.gov
- Jane.Pezua@cdph.ca.gov
- EZIZ.org: sign up for our immunization listserv.
- ShotbyShot.org for personal stories