



Vaccines and Immunizations

News and Media Resources:

Immunization Works! September 2008 issue

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September 2008

Immunization Update

immunization works!



The Centers for Disease Control and Prevention's (CDC) Immunization Works Monthly Update is provided to national health care provider and consumer groups for distribution to their members and constituencies. The immunization information provided is non-proprietary and is encouraged to be widely disseminated.

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Front Page News

Vaccine Coverage Rates Remain High: At a press conference earlier this month, CDC announced that the vast majority of the nation's parents are having their children get recommended vaccinations, according to 2007 vaccine coverage estimates.

Childhood immunization rates remain at or near record levels, with at least 90 percent coverage for all but one of the individual vaccines in the recommended series for your children according to CDC's **CDC's 2007 National Immunization Survey (NIS)**.

More than 77 percent of children were fully vaccinated for all vaccines in the series of recommended vaccines, and there were no difference in coverage among any racial or ethnic group for the complete series. Importantly, less than 1 percent of children had received no vaccines by age 19 months to 35 months.

The recommended vaccine series measured by NIS consists of four doses of diphtheria, tetanus and pertussis vaccine (DTaP); three doses of polio vaccine, one or more doses of measles, mumps and rubella vaccine (MMR); three doses of Haemophilus influenzae type b vaccine (Hib); three doses of hepatitis B vaccine; and one or more doses of varicella or chickenpox vaccine. This set of immunizations begins shortly after a child is born and continues through age 2. The fourth dose of DTaP vaccine is the only vaccine of the recommended series that has not reached 90 percent coverage (84.5 percent).

The NIS coverage data includes children born between January 2004 and July 2006. There were no statistically significant decreases in nationwide individual vaccine coverage from 2006 to 2007.

In 2007, for the first time, there was 90 percent coverage for varicella vaccine and for the third dose of PCV. One dose of varicella vaccine increased in 2007 to 90 percent, compared to 89.2 percent in 2006.

There were also significant increases for pneumococcal conjugate vaccine. Coverage of three or more doses increased from 86.9 percent in 2006 to 90.0 percent in 2007 and coverage with four or more doses rose from 68.4 percent in 2006 to 75.3 percent in 2007.

As in previous years, estimated vaccination coverage levels varied substantially among states. Estimated coverage with the complete vaccine series ranged from 91.3 percent in Maryland to 63.1 percent in Nevada. Among the 6 urban area immunization program grantees supported directly by CDC, Philadelphia had the highest coverage rate at 82.2 percent.

For each group of vaccinated children born during a given year, an estimated 14.3 million cases of vaccine-preventable diseases and 33,500 premature deaths are prevented over the course of a lifetime. In addition, vaccination results in a total savings of \$43.3 billion, including \$9.9 billion in direct medical costs.



Other News & Summaries

Vaccine Information Statement Update: An interim version of the **rotavirus VIS**, containing information about Rotarix, has been posted on the CDC website. Health care providers should use their discretion about retaining stocks of the previous rotavirus VIS. The new VIS is preferred, but parents of infants receiving RotaTeq may be given the older VIS while stocks remain.

Several VISs have also received minor updates. Changes could include correcting the web addresses of VAERS or the Vaccine Injury Compensation Program or some of the older VISs, adding the new statement about the availability of translations, cleaning up fonts that don't print properly, etc. None of these changes affect the mandated purpose of VISs. Edition dates on these **VISs** have not changed, and it is not necessary to replace existing stocks. (Affected VISs are anthrax, DTaP, hepatitis A, hepatitis B, Hib, HPV, Japanese encephalitis, pneumococcal conjugate, pneumococcal polysaccharide, polio, rabies, rotavirus, shingles, Tdap, typhoid and yellow fever.)

Cost-Effectiveness of HPV Vaccine: There has been recent media attention related to a study of the Cost effectiveness of human papillomavirus (HPV) vaccination in the United States published in the New England Journal of Medicine on August 21, 2008. This study confirms the **cost-effectiveness of HPV vaccination** of 11 and 12 year old girls and is consistent with the main focus of the CDC's recommendations which call for routine HPV vaccination of 11 and 12 year old girls in the United States. The HPV vaccine is highly effective in preventing four types of HPV in young women who have not been previously exposed to HPV. The vaccine targets HPV types that cause up to 70% of all cervical cancers and about 90% of genital warts. It is clear that vaccinating women in their mid-to-late twenties is not as cost-effective as vaccinating 11 and 12-year old girls. However, the majority of girls and

women 13 through 26 years of age can benefit from vaccination.

Immunization Scheduler Makes it Simple for Parents and Providers to Catch-up on Kids'

Immunizations: To assist parents and providers in the task of deciding the best strategy for getting a child back on track after not getting some or all vaccines at the recommended ages, CDC has released a cutting-edge web-based Catch-up immunization Scheduler. The Scheduler is a downloadable, easy-to-use tool to quickly find out what vaccines are needed and when to give them to bring children up-to-date according to the currently recommended schedule. The Catch-up Immunization Scheduler is now available for download from the CDC website at <http://www.cdc.gov/vaccines/scheduler/catchup.htm>.

Once the user has downloaded and entered information such as the child's birthday and the vaccines the child has already received, the scheduler immediately provides a printable schedule. There are two options. You can select the "routine" schedule option that aims to keep dates for needed vaccinations as close the recommended ages as possible, or you can select the "accelerated" schedule option in which doses are scheduled as soon as possible according to current recommendations.



Meetings, Conferences & Resources

National Immunization Conference: Make plans now to attend the **National Immunization Conference** scheduled March 30 – April 2, 2009 at the Sheraton Dallas, Texas. **Abstracts** (exit) will be accepted through November 14, 2008. Early bird **on-line registration** is available. The deadline for early-bird registration is January 30, 2009.

Manual for the Surveillance of Vaccine-Preventable Diseases: The **Manual for the Surveillance of Vaccine-Preventable Diseases** has been updated. The 4th Edition provides current guidelines for those directly involved in surveillance of vaccine-preventable diseases, especially personnel at the local health departments. For each of the vaccine-preventable diseases, the manual includes a chapter describing the importance of rapid case identification; the importance of surveillance; disease reduction goals; case definitions; epidemiologically important data to be collected during case investigation; activities for enhancing surveillance; activities for case investigation; and activities for outbreak control.

It's Their Turn! Initiative: Supporting Adolescent Immunization in your Health Department:

CDC has recently launched the It's Their Turn! Initiative. This initiative provides state and local health departments with a comprehensive set of tools and materials to assist them in implementing educational and awareness campaigns to promote adolescent immunization, with particular focus on pertussis and meningitis vaccination. **It's Their Turn!** offers an array of materials from letters to multiple audiences, press releases, and posters and flyers, to cutting edge e-materials such as podcasts and e-cards. The initiative also provides mechanisms to obtain public and media attention for adolescent immunization efforts. States can utilize these materials to reach key target audiences, including parents, health care providers and adolescents. All materials can be easily adapted to each state's needs. This initiative provides health departments with the flexibility to tailor their messages and focus on specific aspects of adolescent immunization including responding to communication/education needs around outbreaks. A few states are already using **It's Their Turn!** with great success. To consult with the **It's Their Turn!** initiative team on how best to optimize these tools to your needs please contact 404-639-2761.

2008 Congenital Cytomegalovirus Conference: The CDC and the Congenital CMV Foundation are pleased to sponsor the **2008 Congenital CMV Conference**, (exit) to be held November 5-7 at the CDC in Atlanta, Georgia. Join an international community of scientists, academics, practitioners, and families to discuss congenital CMV research findings and how they can translate into public health action. Conference topics include: raising awareness of congenital CMV, establishing testing and screening standards, advancing treatment options, proposing preventive guidelines, and promoting vaccine initiatives. Emphasis will be placed on identifying obstacles to awareness, prevention and treatment efforts and proposing practical solutions that will help alleviate the disease burden of congenital CMV. Continuing education credits will be provided.

Clinical Vaccinology Course: The National Foundation for Infectious Diseases, the Emory Department of Medicine – Division of Infectious Diseases and the Emory Vaccine Center are sponsoring a clinical vaccinology course. This course focuses on new developments and issues related to the use of vaccines. Presentations will provide the latest information on both current and prospective vaccines. This course is specifically designed for physicians, nurses, physician assistants, pharmacists, vaccine program administrators, and other health professionals involved with or interested in the clinical use of vaccines. The **Clinical Vaccinology Course** (exit) will be held November 14-16, 2008 in Bethesda, Maryland and again March 6-8, 2009 in San Diego, California.

Epidemiology and Prevention of Vaccine-Preventable Diseases 2008: This four-part self-study series provides the most current information available in the constantly changing field of immunization. Together, the four sessions offer a comprehensive overview on immunization today. Session ONE discusses principles and general recommendations on vaccination. Sessions TWO, THREE and FOUR discuss specific vaccine-preventable diseases and their respective vaccines. Each of the four sessions is three hours in duration. Continuing Education credits will be provided. This **Epidemiology and**

Prevention of Vaccine-Preventable Diseases self-study program is offered free of charge in DVD and web-on-demand formats.

Pink Book, New Printing: The second printing of the 10th Edition of CDC's immunization textbook, **Epidemiology and Prevention of Vaccine-Preventable Diseases, "The Pink Book,"** has been completed and is now available online. "The Pink Book" provides comprehensive information about routinely recommended vaccines, vaccine-preventable diseases and much more. A hard copy of the "Pink Book" can be purchased for \$35 by contacting <http://www.bookstore.phf.org>. (exit)

CDC Training Opportunities: Through established programs, CDC offers many unique training opportunities in infectious disease, including international opportunities. For a current listing of CDC training opportunities, please visit the **CDC Public Health Training website**.

CDC Job Openings: CDC is committed to recruiting and hiring qualified candidates for a wide range of immunization positions. Researchers, Medical Officers and Epidemiologists and other specialties are often needed to fill positions within CDC. For a current listing of positions available at CDC, including international opportunities, please visit the **CDC Employment website**.



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