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Influenza Vaccinations Among Pregnant Women in Georgia: The Provider Role

Pregnant Women and Influenza Vaccine

Pregnant women may experience more severe illness and higher mortality rates from seasonal influenza. This increased health risk could be due to physiologic changes in the cardiovascular, respiratory and immune systems.¹ Higher rates of hospitalizations of pregnant women with H1N1 infection have also been reported.²

Because of this increased risk, pregnant women are considered a priority group for receipt of influenza vaccine.³ The Advisory Committee on Immunization Practices (ACIP) and the American College of Obstetricians and Gynecologists both recommend that women who will be pregnant during the influenza season receive an influenza vaccination,⁴ including the H1N1 vaccine.² Although ACIP originally made this recommendation for women in the second and third trimesters, in 2004 the recommendation was expanded to include women in all trimesters.⁵

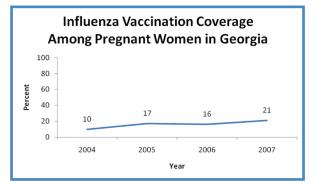
Influenza vaccination of the women during pregnancy may also provide protection for infants who are too young to be vaccinated (less than 6 months of age). A recent study in Bangladesh indicates that influenza vaccination during pregnancy may significantly reduce influenza illness among infants up to the age of 6 months.⁶ Despite these findings and recommendations, pregnant women have among the lowest rates of coverage among adult priority groups.

The Georgia Experience

Georgia is one of two states that used the Pregnancy Risk Assessment Monitoring System (PRAMS) from 2004 to 2007 to collect information on vaccination during pregnancy. Georgia's data reveal several reasons why women do not receive influenza vaccinations during pregnancy.⁷

Reasons for Not Receiving the Flu Vaccine	
I don't normally get a flu vaccination	69%
My physician did not mention anything about a flu vaccine during my pregnancy	45%
I was worried that the flu vaccination might harm my baby	28%
I was worried about side effects of the flu vaccination for me	27%
I was in my first trimester during the flu season (November-February)	25%
I wasn't pregnant during the flu season (November-February)	24%
Other reason	6%

Although overall influenza vaccination rates for pregnant women have remained low in Georgia and across the United States, an increase was observed from 2004 to 2007.



Pregnant women have the lowest rates of influenza vaccination among all adult priority groups. Forty-five percent of Georgia women who were surveyed about *their pregnancy* reported that they did not get the influenza vaccine during pregnancy because their provider did not mention it. Health care providers have a critical role to play in increasing rates of influenza vaccination among pregnant women.

The reasons for this increase have not been adequately studied, but could reflect provider responses to ACIP's 2004 recommendation to offer influenza vaccination to pregnant women in their first trimester.⁴ Another reason may be media attention to the influenza vaccine shortage during the 2004-2005 influenza season, increasing awareness among both pregnant women and their providers.⁸

The Provider's Role in Improving Vaccination Rates

These Georgia-specific PRAMS data regarding vaccination rate trends and women's reasons for not obtaining the flu vaccine suggest that providers play a critical role in increasing rates of influenza vaccination among pregnant women. The majority of reasons women reported for not receiving an influenza vaccination during their pregnancy could be addressed through patient education by the health care provider.

How Providers Can Help Their Patients?

Pregnant women

- Recommend vaccination as soon as possible (during any trimester) throughout flu season (October-April).
- Recommend vaccination for both seasonal and novel influenza, such as H1N1.
- Discuss the importance of treatment with antiviral medications if flu is suspected; delay of treatment while awaiting confirmation is not necessary.

Women who anticipate being pregnant during flu season

 Recommend vaccination for both seasonal and novel influenza, such as H1N1.

Postpartum women who did not get vaccinated during pregnancy

 Recommend vaccination before hospital discharge; breastfeeding is not a contraindication to vaccination.

Other Vaccinations

It is recommended that pregnant women be vaccinated against both seasonal and H1N1 influenza. Other vaccinations are also important to adult health and to that of pregnant women and their infants. For more information, go to:

- CDC's Web site on Guidelines for Vaccinating Pregnant Women http://www.cdc.gov/vaccines/pubs/preg-guide.htm
- Georgia Department of Community Health Immunization Section's Web site http://health.state.ga.us/programs/immunization/ index.asp
- Georgia Adult Immunization Coalition's Web site http://www.immunizeadultga.org

References

- 1 Jamieson D, Theiler R, Rasmussen S. Emerging infections and pregnancy. *Emerging Infectious Disease*. 2006;12:1638-1643.
- 2 CDC. Use of Influenza A (H1N1) 2009 Monovalent Vaccine: Recommendations of the Advisory Committee on Immunization Practices (ACIP), 2009. *MMWR*. 2009;58(Early Release):1-8.
- 3 Munoz FM, Greisinger AJ, Wehmanen OA, et al. Safety of influenza vaccination during pregnancy. *American Journal of Obstetrics and Gynecology*. 2005;192(4):1098-1106.
- 4 CDC. Prevention and Control of Influenza: Recommendations of the Advisory Committee on Immunization Practices (ACIP), 2008. *MMWR*. 2008;57(RR07):1-60.
- 5 CDC. Influenza Vaccination in Pregnancy: Practices Among Obstetrician-Gynecologists ----United States, 2003--04 Influenza Season.
 MMWR. 2005;54(41):1050-1052.
- 6 Zaman K, Roy E, Arifeen S, et al. Effectiveness of maternal influenza immunization in mothers and infants. *New England Journal of Medicine*. 2008;359:1555-1564.
- 7 CDC. Receipt of Influenza Vaccine During Pregnancy Among Women With Live Births ----Georgia and Rhode Island, 2004—2007. *MMWR*. 2009;58(35):972-975.
- 8 Brewer N, Hallman W. Subjective and objective risk as predictors of influenza vaccination during the vaccine shortage of 2004--2005. *Clinical Infectious Diseases.* 2006;43:1379-1386.



