# Promoting Childhood Immunizations 

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#### Abstract

Immunization was perhaps the single most beneficial public health measure of the 20th century. Vaccine manufacturers work in tandem with government, academic, and nongovernmental agencies to develop safe and effective vaccines that decrease health costs and improve compliance. Despite overwhelming evidence of vaccine safety, suspicion and misconception continues in small groups of hesitant or resistant parents, often leading to outbreaks of vaccine-preventable infections. On the front lines of vaccination, nurse practitioners can improve vaccination rates by developing a trusting relationship with parents and being armed with information based on sound clinical evidence.


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## INTRODUCTION

Immunization is perhaps the single most important public health measure of the 20th century. Infectious diseases were once the leading cause of death in the early 1900s, but, since the advent of vaccines, they currently rank eighth. ${ }^{1}$ Vaccination is also responsible for improving substantially the
number of children who reach their first birthday. ${ }^{1}$ At the turn of the 20th century, 100 of 1,000 babies born in the United States died before their first birthday, and today that rate has decreased dramatically to 7 in 1,000 babies. ${ }^{2}$ Table 1 demonstrates that introduction of vaccines has led to dramatic declines vaccine-preventable diseases (VPDs). ${ }^{3}$

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Table 1. Rates of Vaccine Preventable Diseases and Deaths ${ }^{\text {a }}$

| Diptheria |  |  |
| :---: | :---: | :---: |
| Year | Cases Reported | Deaths |
| 1950 | 5796 | 410 |
| 2011 | 0 | NA |
| Tetanus |  |  |
| Year | Cases Reported | Deaths |
| 1950 | 486 | 336 |
| 2011 | 9 | NA |
| Pertussis |  |  |
| Year | Cases Reported | Deaths |
| 1950 | 120,718 | 1,118 |
| 2011 | 15,216 | 0 |
| Polio |  |  |
| Year | Cases Reported | Deaths |
| 1950 | 33,300 | 1,904 |
| 2011 | 0 | NA |
| Measles |  |  |
| Year | Cases Reported | Deaths |
| 1950 | 319,124 | 468 |
| 2011 | 212 | NA |
| Rubella |  |  |
| Year | Cases Reported | Deaths |
| 1966 | 46,975 | 12 |
| 2011 | 4 | NA |
| Mumps |  |  |
| Year | Cases Reported | Deaths |
| 1968 | 152,209 | 25 |
| 2011 | 370 | 0 |
| Varicella |  |  |
| Year | Cases Reported | Deaths |
| 1972 | 164,114 | 122 |
| 2011 | 12,041 | NA |
| Haemophilus |  |  |
| Year | Cases Reported | Deaths |
| 1991 | 2764 | 17 |
| 2011 | 3184 | NA |

continued

Table1. (continued)

| Hepatitis A |  |  |
| :--- | :---: | :--- |
| Year | Cases Reported | Deaths |
| 1966 | 32859 | N/A |
| 2011 | 1139 | N/A |
| Hepatitis B |  |  |
| Year |  |  |
| 1966 | Cases Reported | Deaths |
| 2011 | 1497 | N/A |

$\overline{C D C}=$ Center for Disease Control and Prevention
NA = Not available
${ }^{\text {a }}$ Table adapted from reference 3
${ }^{\text {b }}$ A rapid rise in the number of cases was reported after 1966, following separation of Hepatitis B from all cases of Hepatitis and a peak of cases in 1986 of 26,107 is followed by a post vaccine fall in cases to 2,495 by 2011.

Despite clear benefit, many parents choose not to vaccinate their children, most often citing the fear of the unknown as their motive. In a time when the incidence of VPDs is very low to nonexistent, it is easy to see why parents would become distracted by stories of severe reactions to vaccination. Vaccination scares propagated by the media and self-serving clinicians have led many parents to choose the risk of infection over the risk of vaccination. This year, 592 cases of measles and 4 college campus mumps outbreaks have been reported across the nation, with the majority of these occurring in patients who were unvaccinated. ${ }^{4,5}$ Endemic in the US, pertussis cases still range from 20,000 to 40,000 cases yearly. However, these numbers are dwarfed by the prevaccine rates of 100,000 to 200,000 cases per year. ${ }^{6}$ Other than smallpox, vaccine-preventable diseases remain active across the globe. When an outbreak of a VPD occurs it is frequently due to one unvaccinated person. Exposure to infections is an inevitable consequence of our global economy, thus stressing the importance of vaccinations domestically and worldwide.

Understanding the fear some parents have as they contemplate vaccinating their child and addressing specific concerns for their child with scientific data is a reasonable approach to improve immunization rates in this subgroup. This article aims to characterize the vaccine-hesitant or -resistant parent and assess the

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[^0]:    This CE learning activity is designed to augment the knowledge, skills, and attitudes of nurse practitioners and assist in their understanding of immunizations and their impact on humans.
    At the conclusion of this activity, the participant will be able to:
    A. Describe the characteristics of a hesitant vs resistant parent
    B. Address parental concerns by explaining major immunization concepts
    C. Use current evidence to clarify the relationship between vaccines and autism

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