

Idaho Immunization Coalition Newsletter

May 2016



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IDAHO GIVES

MAY 5, 2016

A program
of the Idaho
Nonprofit Center

Idaho Gives Day is May 5th, and we can't wait for the giving to start! We hope you'll join us in generously supporting the causes that make our community great. Last year, Idahoans raised \$1,082,365 for 660 nonprofit causes, one being the Idaho Immunization Coalition. This year, we're doing it again!

On May 5th, be a part of something big: visit www.IdahoGives.org to learn about causes, donate to your favorites, and show our nonprofits that we support them and appreciate their hard work at making Idaho a place we love to live.

It's almost summer, which means...we are getting closer to the Summit!

Registration is open for the 2016 Idaho Immunization Summit and the CDC Pink Book Course taking place this November. Reserve your spot today and get the Early Bird discount!

2016 Idaho Immunization Summit
Approach Vaccine Hesitancy with Confidence

Friday Nov 4
8am-noon
Boise Centre

You Are Invited!

- **Epidemiology and Prevention of Vaccine-Preventable Diseases (a.k.a. The Pink Book) Course**
- **Idaho Immunization Summit**

ABOUT THE SUMMIT

Join us for an **inspirational** and **interactive** day at the Idaho Immunization Summit 2016!

This year, the Summit takes place at the Boise Centre in Boise, ID.

The 2016 theme is **vaccine hesitancy** and how to approach immunization concerns with confidence.

ABOUT THE KEYNOTE SPEAKER

Tara Haelle is a scientific and health journalist with regular publications reaching the American public at Forbes, NPR, Slate, etc.

Tara Haelle helps others understand medical and health research topics such as vaccinations.

To get a preview, visit www.tarahaelle.net.



REGISTRATION

Early Bird \$25
Before July 15

Regular \$35
Before Oct 17

Same Day \$50
On Nov 4

Breakfast and educational credits included.

REGISTER AT
www.idahoimmune.org/events

Don't miss the **Pink Book Course (Nov 2-3)** -brought to you by the Idaho Immunization Coalition, Centers for Disease Control and Prevention, and Idaho Immunization Program!

Boise Centre | Boise, Idaho

The Course will focus on the principles of vaccination, general recommendations, immunization strategies for providers, and specific information about vaccine-preventable diseases and the vaccines that prevent them. The two-day Course will include presentations from immunization experts from the Centers for Disease Control and Prevention (CDC). A half-day Immunization Summit will take place on November 4th and will include national, state, and local updates on immunization practices.

For more information and to register visit:
www.idahoimmune.org/events

Brought to you by the CDC, the Idaho Immunization Program, and the Idaho Immunization Coalition.

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National Vaccine Advisory Committee - February Update: Zika, Polio, and More

Rebecca Coyle attended the National Vaccine Advisory Committee (NVAC) meeting in Washington, D.C., February 3-4, 2016. Established in 1987, NVAC recommends ways to achieve optimal prevention of human infectious diseases through vaccine development, and provides direction to prevent adverse reactions to vaccines. This advice is presented to the Assistant Secretary for Health who serves as the Director of National Vaccine Program on matters related to program responsibilities.

The meeting content for the first day was focused on vaccine research, innovation, and emerging trends. COL Nelson Michael presented on the contributions the Walter Reed Army Institute of Research (WRAIR) has made to the vaccine enterprise. WRAIR researchers have contributed to a number of U.S. licensed vaccines including influenza, hepatitis A, oral adenovirus, and others. Current research includes assisting with the development of several Ebola and MERS vaccines. Another hot topic presented and discussed was a report on the current status of the Zika Virus and vaccine development efforts. There currently is no vaccine available, but vaccines for other flaviviruses have been developed and used for over 70 years (Japanese encephalitis vaccine and Yellow Fever vaccine). The experiences gained and the vaccine platforms for other flaviviruses can hopefully be leveraged for a Zika vaccine. Other topics presented included: Refugee Enhanced Vaccination Program status, Drivers of Vaccine Innovation, Antimicrobial Resistance and the Role of Vaccines, and a Maternal Immunization Working Group Update.

The second day focused on adult immunizations and strategies for increasing adult vaccine coverage. The National Vaccine Program Office has developed the National Adult Immunization Plan that was approved by NVAC in 2015. The plan is intended to *facilitate coordinated action by federal and nonfederal partners to protect public health and achieve optimal prevention of infectious diseases and their consequences through vaccination of adults*. Currently, an implementation plan is being developed with stakeholder input on the priority strategies. The goal for implementation is that guide can be used by stakeholders to guide and increase the impact of their work. The plan is currently in the process of being rolled out and more information will be provided as it becomes available. Other adult topics included presentations on Issues related to vaccine financing for adult

immunizations and an overview of the 2016 National Adult Immunization and Influenza Summit. The meeting concluded with an update on the laboratory containment efforts of the Poliovirus Type 2. In September 2015, the Global Certification Commission-certified wild Poliovirus 2 (WPV2) was eradicated. Currently, there is an ongoing global effort to contain all WPV2 virus' currently being held in laboratories. In April of this year, a synchronized global switch will be made with all oral poliovirus vaccines from the trivalent OPV (tOPV) to a bivalent OPV (bOPV). No tOPV shall be given anywhere after April 2016! The b-OPV does not contain Poliovirus Type 2 and the switch supports polio eradication efforts.

For more information about NVAC, visit <http://www.hhs.gov/nvpo/nvac/index.html>. The next NVAC meeting is scheduled for June 7-8, 2016.

NVAC Quick Facts

- **Established in 1987**
- **Working groups to address topical issues**
- **Meets 3x a year in Washington DC**
- **Registration open to public attendance**
- **Upcoming 2016 meetings:**
 - * **June 7-8,**
 - * **September 13-14**



Written by Rebecca Coyle, MEd, Executive Director, American Immunization Registry Association (AIRA)

Adolescent Immunization Spotlight

A Push to Improve Adolescent Immunization Rates in Idaho

Written by Lisa Barker, MD, FAAP

Picture on left with son



I am excited to be among numerous medical providers across the state that have recently launched into a new learning collaborative focused on improving immunization rates among adolescents in Idaho. This is a quality improvement project presented by IHAWCC (Idaho Health and Wellness Collaborative for Children) in partnership with the

Central District Health Department. Through data collection and analysis, quality improvement coaching, and educational sessions, we hope to increase the rates of vaccination among our adolescent patients.

While we have room to improve the rates of all adolescent immunizations in Idaho, we should be particularly focused on increasing rates of vaccination against human papillomavirus (HPV). In 2014, 60% of adolescent females in Idaho received at least one dose of HPV vaccine. However, only 38% completed the 3-dose series. For males, 32% received at least one dose of HPV vaccine and 17% completed the series. Although these numbers are comparable to national rates, they lag far behind the *Healthy People 2020* goal of 80% vaccine coverage.

A new study, published in the February issue of *Pediatrics*, offers optimistic insight about the relationship between HPV vaccination and declining rates of human papilloma virus (HPV) infections in both teenage girls and young women. In the United States, routine vaccination against HPV has been recommended since mid-2006. Through 2014, almost all vaccinated individuals in the U.S. received quadrivalent vaccine, protecting against infections with HPV types 6, 11, 16, and 18. The study reports on data that comes from 14 to 34-year-old females who participated in NHANES, a national health assessment survey. Specifically, they compared HPV prevalence during a pre-vaccine era (2003-2006) and a post-vaccine era (2009-2012).

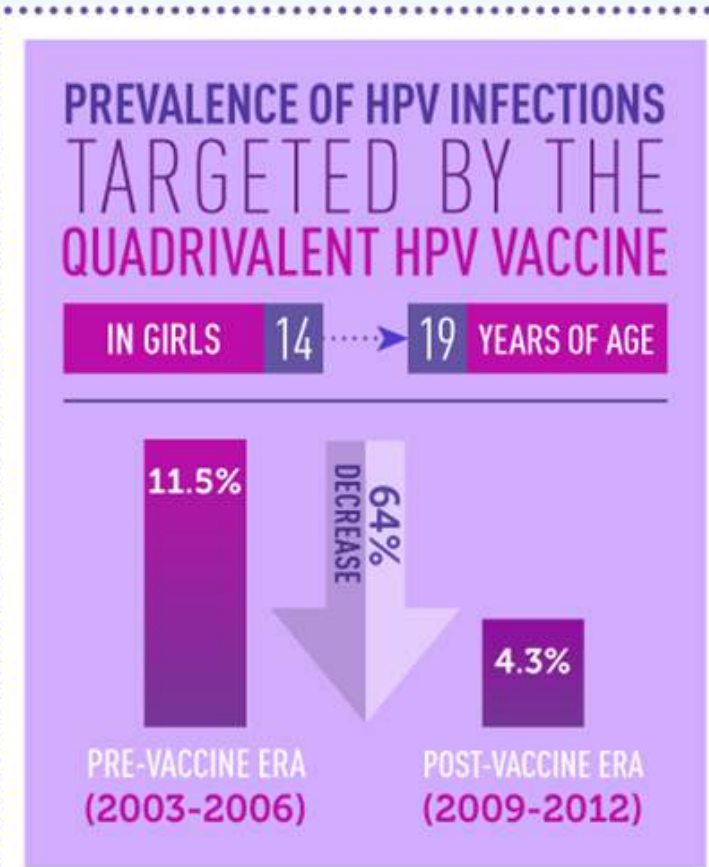
- Among girls 14 to 19 years old, the prevalence of the four HPV types targeted by the quadrivalent vaccine dropped from 11.5% to 4.3%.
- Among women 20 to 24 years old, the prevalence fell from 18.5% to 12.1%.

According to lead researcher Lauri Markowitz, MD, the analysis showed “a decline in HPV prevalence in the age groups in which we would first expect to see an impact of vaccination.” She adds, “While it’s really encouraging that we’ve seen this impact, our vaccine coverage is not as high as we’d like it to be in the United States. If we could get that coverage higher we could have a larger impact.”

Armed with this important data, confirming a positive population impact from HPV vaccination, we can continue to tackle vaccine hesitancy. Through ongoing education, learning collaborative, and a dedication to quality improvement, I am confident that we will continue to see rising rates of adolescent immunizations in Idaho.

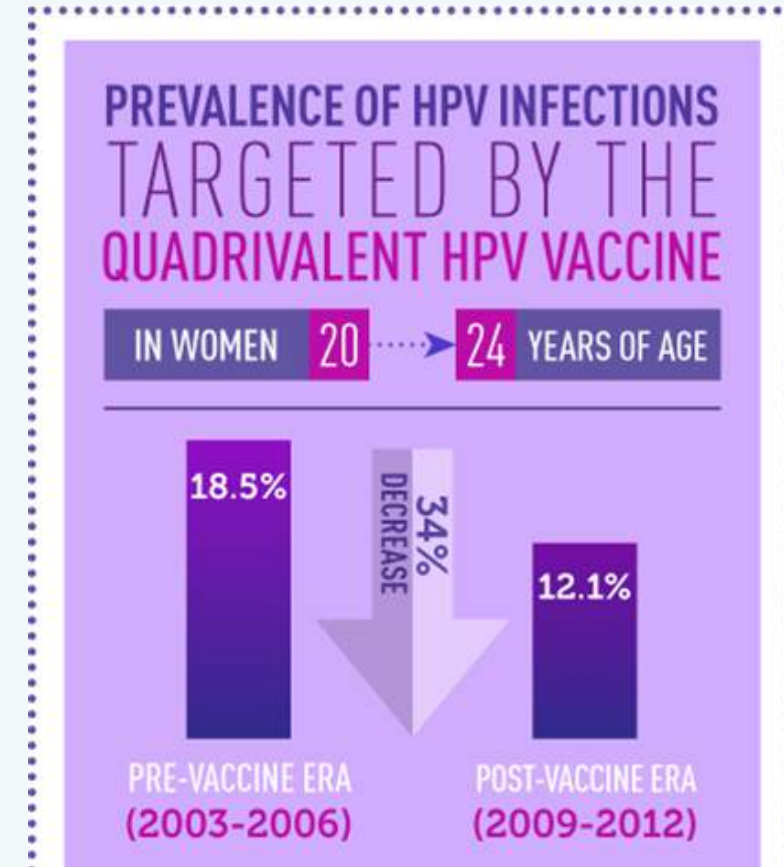
Reference:

Markowitz et al. Prevalence of HPV After Introduction of the Vaccination Program in the United States. *Pediatrics* Mar 2016, 137 (3) 1-9.



www.cancer.gov

Source: Markowitz LE, Liu G, Hariri S, et al. *Pediatrics*. 2016 Mar;137(3):1-9



www.cancer.gov

Source: Markowitz LE, Liu G, Hariri S, et al. *Pediatrics*. 2016 Mar;137(3):1-9

National Award to ISU

Prestigious National Award recognizes ISU College of Pharmacy's Operation Immunization Patient Outreach Project

The American Pharmacist Association-Academy of Student Pharmacists chapter at Idaho State University College of Pharmacy (ISU-COP) received the Operation Immunization National Award at the 2016 APhA Annual Meeting and Exposition in Baltimore, Maryland. This is the first time ISU-COP has been recognized at a national level for their immunization outreach. Initiated in 1997, Operation Immunization is a sponsored patient care project designed to raise the public's awareness and knowledge on the importance of vaccinations. More than 130 pharmacy school Operation Immunization programs from across the nation competed for this prestigious award.

The student chapter at ISU-COP has been innovative in their leadership to promote education, awareness, and delivery of immunizations across Idaho since the program's inception. Every year, the program has grown in both outreach and sponsorship. Last year, ISU-COP student pharmacists administered more than 4,000 immunizations, directly educated more than 5,000 people, and outreached to more than 60,000 people in public relations activities such as television and print campaigns.

The National Influenza Vaccination Week (NIVW) initiative allowed Operation Immunization to educate more than 400 faculty, staff, and non-College of Pharmacy students at ISU. An estimated 16,000 people in the community watched our television news story of the NIVW event allowing us to reach even more people in the greater Pocatello community. Most importantly, the success of ISU-COP's Operation Immunization project was largely due to the students fostering partnerships with the Idaho Immunization Coalition, local departments of health, local school districts, and other health care providers.

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Important Legislative Update

2016 Legislative Session Overview

Only one immunization related bill was brought before the 2016 Idaho Legislature. This bill was Senate Bill 1294 "Practice of Pharmacy." The Idaho Immunization Coalition maintained a neutral stance in regards to supporting the bill to amend statute 54-1704.

S1294 - Practice of Pharmacy: The Idaho State Pharmacy Association brought legislation to lower the pediatric patient age at which an Idaho pharmacist can independently prescribe vaccines from twelve (12) years to six (6) years of age. In other states around the country, the ages for pharmacists prescribing vaccines for youth are all over the spectrum ranging from birth through 18 years. By lowering the pharmacist vaccine prescribing age, the Idaho Department of Health and Welfare suspects that there will be modest improvements in access to some vaccinations for children ages six through 11, over time. These improvements are expected to be gradual due to the fact that fewer vaccines are generally administered for this age group, compared to children ages six and under. Currently, less than half of the retail pharmacy sites in state are reporting immunizations in the Idaho Immunization Reminder Information System (IRIS). With more pharmacists prescribing additional vaccines to this expanded group of children, it may be an ideal time to further assess the potential advantages of having more retail pharmacies reporting to IRIS for more complete immunization records in Idaho.

S1294 passed easily and the amendment to the existing statute will go into effect on July 1, 2016.

From our partner American Cancer Society's HPV VACS:

Tedx Talk: You Are the Key to Stopping HPV

This nine minute [Tedx talk](#) by Heidi Parker, Executive Director of Immunize Nevada and HPV disease survivor, strongly encourages parents to ensure their teenage sons and daughters receive the HPV vaccine as a method to prevent cancer.

NOTE: Best used with parents seeking a high-level of information, or who already perceive HPV from an STI perspective.

