Ensuring Broad Immunization Coverage In Refugee and Immigrant Children

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5-year old immigrating from Cameroon, parents are refugees from the Democratic Republic of Congo. Received 2 doses MMR vaccine, 3 doses HBV vaccine, and 3 doses of IPV vaccine, all finishing by age 2 (assume appropriate intervals between doses). Plan a catch-up schedule for him.





Are there any vaccines on the schedule for the patient on the previous slide that could possibly be skipped? How would you know?





#3 also has a younger brother who is 17 months old and has had the same set of vaccines; his MMR were given at 6 and 9 months. Plan his catch-up schedule.











Learning Objectives

- Compare issues seen in unimmunized or partially immunized refugee and immigrant populations to those commonly encountered in US-born populations
- ▶ Identify specific issues sometimes encountered in refugee and immigrant populations while attempting to ensure full vaccine coverage
- ▶ Review possible solutions to these special issues with attention to both the CDC catch-up schedule and to the needs of the families
- ► Highlight specific vaccine-preventable diseases where risk may be elevated in certain populations based on country of origin





What our US born patients are thinking about....

What refugee parents are worried about...









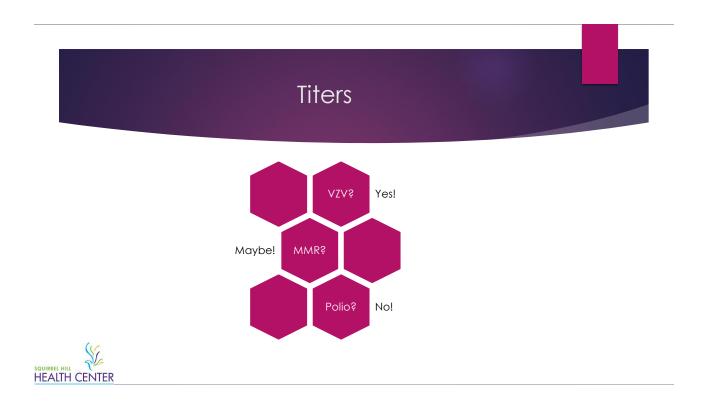
BCG

- Not especially effective
- Can cause false-positive PPD in childhood but not by the time someone is an adult
- Provides false sense of security
- Quantiferon-Gold test is not altered by prior BCG vaccine but . . .
- Quantiferon cannot be done on child under 5 years old
 - ▶ PPD anyhow, use higher threshold for "positive" test in these children
- ▶ Does seem to be a promising therapy for bladder cancer....



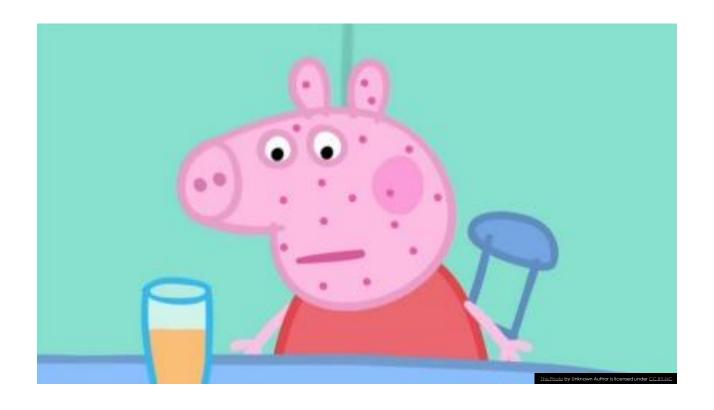
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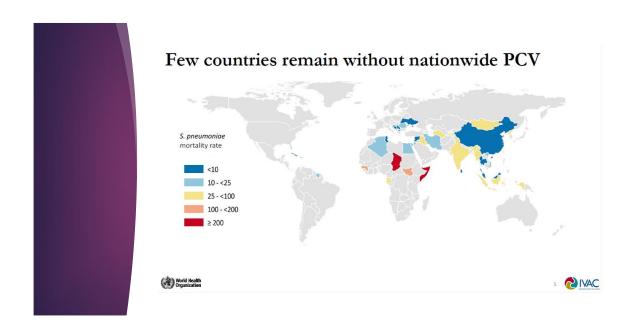
Measles Single Antigen Vaccine Early MMR















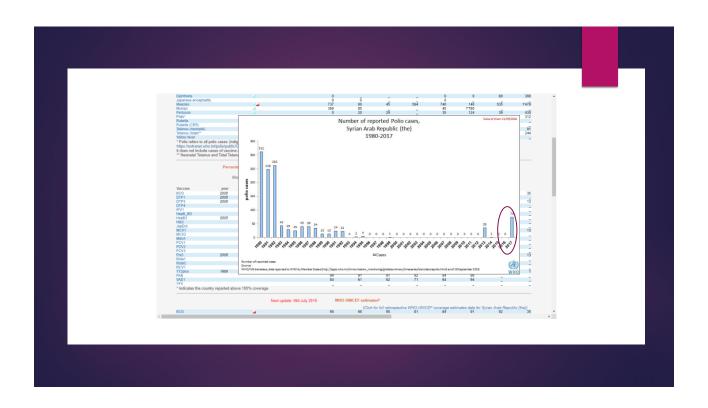
How to Scare Yourself...

- http://apps.who.int/immunization_monitoring/globalsummary
- ► Can click on any country you like and see how many cases of a given disease they've had in a particular year



				Democi	atic Republic of	the Congo (the)	▼				
Developme	nt status:	1	_east develop	ed	GNI / capita (US\$): GDP / capita (US\$):		450 ¹ 887 ¹	Infant (under 12 months) mortality rate: Child (under 5 years) mortality rate:				72 ² 94 ²
Population data in th	ousands ³											
•					2017	2016	2015	2014	2013	2000	1990	1980
Total population					81'340	78'736	76'197	73'723	71'316	47'076	34'615	26'357
Births					3'401	3'335	3'269	3'200	3'129	2'180	1'614	1'217
Surviving infants					3'177	3'111	3'043	2'974	2'903	1'946	1'433	1'065
Pop. less than 5 years					14'846	14'494	14'099	13'723	13'348	8'661	6'351	4'780
Pop. less than 15 years					37'646	36'491	35'313	34'199	33'082	21'439	15'618	11'755
Female 15-49 years					18'045	17'447	16'884	16'324	15'792	10'545	7'844	6'099
Number of reported	caeae					(Cli	ck for retrospectiv	e incidence data	for Democratic I	Republic of the Co	ngo (the))	
-	cuses									0		43
Diphtheria Japanese encephalitis		6				-	-	-	-	U	-	43
Measles					(45'107)	5'092	5'020	33'711	88'381	8'282	4'564	32'596
		<u>ज</u> न्म			45 107	5 092	5 020	33 / 11	00 30 1	0 202	4 504	32 390
Mumps Pertussis		6			1'602	ō	ō	ō		75	_	15'335
Pertussis Polio*					22	0	0	0	ō	603	_	
		6			22	204	464	864	1'704	003	_	263
Rubella					1	204	404	804	1704	_	_	-
Rubella (CRS)		6			253	80	330	201	_	77	120	_
Tetanus (neonatal)									_		120	848
Tetanus (total)** Yellow fever		6			939	80 77	330 0	201 3	_	77	_	848
* Polio refers to all pol https://extranet.who.in	t/polis/public/0 ses of vaccine-	aseCount asp	x ralytic polio (V	APP) and cases o	of non polio acute	flaccid paralysi	s [AFP]).	disaggregated da	ita please click o	n this hyperlink:		
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Developm	ent status:	: Least developed			GNI / dPress (F11) to exit full screen 26821			Infant (under 12 months) mortality rate: Child (under 5 years) mortality rate:				28 ² 35 ²
Population data in t	thousands ³											
					2017	2016	2015	2014	2013	2000	1990	1980
Total population					29'305	28'983	28'656	28'323	27'985	23'741	18'749	14'902
Births					572	572	573	576	582	761	727	624
Surviving infants					556	556	556	559	564	715	655	536
Pop. less than 5 years					2'746	2'756	2'805	2'857	2'933	3'567	3'058	2'445
Pop. less than 15 years					9'053	9'182	9'329	9'463	9'607	9'731	7'956	6'170
Female 15-49 years					8'219	8'061	7'882	7'724	7'553	5'712	4'359	3'470
remaie 15-45 years					0219	0001	7 002	1124	7 333	3712	4335	3470
Number of reported	d cases					(Clic	k for retrospective	e incidence data	for Nepal)			
Diphtheria					728	140	26	1'079	103	268	7	82
Japanese encephalitis		6			63	98	937	1'304	118			
Measles		6.6			- 00	1'269	1'599	1'279	1'861	9'397	182	561
Mumps		6			61'228	30'610	38'858	34'034	29'134	0001	102	001
Pertussis					9'092	4'890	4'416	6'096	3'431	6'021	18	1'055
Polio*		6			0	0	0	0	0	29	6	52
Rubella		6			21	656	626	704	755	25	•	JZ
Rubella (CRS)		6			0	33	50	16	755	-	-	-
Tetanus (neonatal)		6			7	7	266	57	87	134	ō	_
Tetanus (total)**					880	766	888	883	377	305	35	116
Yellow fever		6			000	/00	000	003	311	305	33	110
* Polio refers to all po	olio casos (ind	gonous or imp	arted) includi							n this hyperlink:	-	_
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Sources

- ▶ CDC vaccine schedules
- ▶ PA Code regarding vaccinations for schools
- ▶ WHO Immunization Monitoring App
- ▶ 8 years experience caring for a large population of new Americans from a broad range of countries who never fail to show me something I've never seen before

