Prepare Your Practice To Fight Flu:

Make a Strong Influenza Vaccine Recommendation and Improve Your Influenza Vaccination Rates This Season
“The thing that motivates me to FIGHT FLU is the ability to prevent illness and death. Flu is a bad disease. It causes millions of illnesses every year, hundreds of thousands of hospitalizations and thousands and sometimes tens of thousands of deaths and so anything we can do to prevent that – that is what I want to work on.”

-Daniel B. Jernigan, MD, MPH
Director, Influenza Division, CDC
slide deck purpose

• Are you ready to fight flu? CDC is looking to you to make a strong influenza vaccine recommendation to patients. This slide deck includes techniques to make a strong influenza vaccine recommendation and tips for increasing vaccination rates within your practice.

Learning objectives

• Understand how to make a strong influenza vaccine recommendation
• Learn how to answer some common patient questions about influenza
• Learn how to answer some common patient questions about influenza vaccination
• Understand best practices for increasing influenza vaccination rates in their clinical practices
2017-2018 Flu Season

An influenza A(H3N2) predominant season with record-breaking influenza-like illness levels, hospitalization rates and reported pediatric deaths.

2017-2018 was the third overall high severity season since 2003 – 2004, and the first to be classified as high severity for all age groups.

Highest cumulative hospitalization rates were among:

- **AGES 65+**: 458.7 per 100,000 people
- **AGES 50 – 64**: 115.7 per 100,000 people
- **AGES 0 – 4**: 74.3 per 100,000 people
- **ALL AGES**: 106.6 per 100,000 people
2017-2018 Flu Season in Review

- CDC estimates that the 2017-2018 flu vaccine reduced the risk of getting sick and seeking medical care by 40% overall.
  - End-of-season VE = 40%
  - The vaccine provided 42% protection [influenza B], 67% [influenza A/H1N1] and 25% [influenza A/H3N2]

- Vaccination can offer substantial benefit and reduce the likelihood of severe outcomes, including hospitalization and death even when vaccine effectiveness is reduced.

- 2017-2018 estimates will be published later this year; however, during the 2016–17 season, vaccination averted an estimated 5.3 million influenza illnesses, 2.6 million influenza-associated medical visits, and 85,000 influenza-associated hospitalizations.

National Center for Immunization and Respiratory Disease (NCIRD)
2018-2019 Flu Season: ACIP Recommendations

• The Advisory Committee on Immunization Practices (ACIP) recommends that everyone ages 6 months and older receive a flu vaccine every year.

• Immunization providers are recommended to administer any licensed, age-appropriate influenza vaccine (IIV, RIV, or LAIV).

• There is no expressed preference for any flu shot or the nasal spray vaccine.

Live Attenuated Influenza Vaccine (The Nasal Spray Influenza Vaccine)

ACIP and CDC voted to resume the recommendation for the use of LAIV4 based on evidence suggesting that the new H1N1 component will result in improved effectiveness of LAIV against these viruses. LAIV4 is approved for use in non-pregnant individuals, 2 years through 49 years of age. People with some medical conditions should not receive the nasal spray flu vaccine.
Importance of a HCP Flu Vaccine Recommendation

• One of the most important predictors of adult patients accepting a vaccine is a healthcare professional’s (HCP) recommendation and offer of a vaccine during the same office visit.

• For many, HCPs are the most trusted source of information about vaccines.

• Patients’ perceptions about the strength of an HCP’s recommendation may have implications for vaccine uptake.
Make a Strong Recommendation Using the SHARE Model

- CDC suggests using the SHARE five-part approach to make a strong flu vaccine recommendation to enable patients to make informed decisions about flu vaccination.

**SHARE**
- the tailored reasons why the recommended vaccine is right for the patient given his or her age, health status, lifestyle, occupation, or other risk factors.

**HIGHLIGHT**
- positive experiences with vaccines (personal or in your practice), as appropriate, to reinforce the benefits and strengthen confidence in vaccination.

**ADDRESS**
- patient questions and any concerns about the vaccine, including side effects, safety, and vaccine effectiveness in plain and understandable language.

**REMIND**
- patients that vaccines protect them and their loved ones from many common and serious diseases.

**EXPLAIN**
- the potential costs of getting the disease, including serious health effects, time lost (such as missing work or family obligations), and financial costs.
Applying the Share Model

**SHARE the reasons:**
- “This vaccine can protect you and your family from getting sick from flu. By getting the shot today, you’ll be protecting yourself and the people around you who are more vulnerable to serious flu illness, like your children and parents.”

**HIGHLIGHT positive experiences:**
- “The CDC recommends that everyone get a flu vaccine each year. I always get one myself so I don’t pass along flu to my patients and my family members.”

**ADDRESS patient questions:**
- “To answer your question, a flu shot cannot cause flu illness. There can be some mild side effects, but this is not flu illness. There are different side effects that may be associated with getting a flu shot or a nasal spray flu vaccine.”

**REMINd patients that flu vaccine vaccines protect them and their loved ones:**
- “Flu activity is going to start to pick up, and CDC says to expect more cases in the coming months. That is why I want to make sure I help protect you and your loved ones.”

**EXPLAIN the potential costs of flu:**
- “It’s important to get vaccinated this season because flu vaccination can reduce potential flu illnesses, doctor visits, and missed work and school due to flu.”
High Risk Populations

Everyone 6 months of age and older should get an influenza vaccine every year. Even healthy adults can get sick with influenza and spread it to others.

However, vaccination is particularly important for certain patients who are at high risk of serious complications.

When making an influenza vaccine recommendation to these patients SHARE tailored reasons the vaccine is particularly important for their overall health.
High Risk Populations: Adults 65 Years and Older

“Due to the weakening of your immune system that happens with age, you are at high risk for serious complications from flu. In fact, in recent years, most flu-related hospitalizations and deaths have occurred in people 65 years and older.”
“People with chronic medical conditions—such as heart disease, diabetes and asthma—are at higher risk for developing flu-related complications, ranging from worsening of these chronic conditions, to pneumonia, and other more severe complications.”
High Risk Populations: Young Children

“Young children, even healthy young children, are at higher risk for serious flu-related complications. A recent study found that flu vaccination reduced the risk of flu-associated death by half (51%) among children with underlying high-risk medical conditions and by nearly two-thirds (65%) among healthy children.”

Consider bundling influenza vaccine recommendation with other vaccines
High Risk Populations: Pregnant Women

“Flu is more likely to cause severe illness in pregnant women due to changes in the body, such as the immune system, heart, and lungs that make them more prone to illness. A flu vaccine during pregnancy has been shown to help protect you and your baby from flu during pregnancy and can help protect your baby for several months after birth.”

Consider bundling influenza vaccine recommendation with other vaccines (i.e. Tdap)
Addressing Questions & Vaccine Refusals

Every visit with a patient is an opportunity to recommend an influenza vaccine. Patients may have questions. Interpret questions as a request for additional information and be prepared to answer common questions.

- Address questions immediately and apply the SHARE model. Offer influenza vaccine in the same visit.
- If a patient refuses an influenza vaccine, probe for reasons, and provide answers to any concerns.
- If a patient continues to refuse an influenza vaccine, share an informational handout to help advance education beyond the office visit and follow up at a later time.
Increase Vaccination Rates by Removing Common Perceived Barriers

- **Vaccine is not effective** → Share vaccine benefit information
- **Unlikely to get influenza** → Highlight influenza prevalence; use 2017-2018 season as example
- **Influenza is not serious** → Share hospitalization statistics; highlight symptoms and cost-associated
- **Influenza vaccine causes illness or side effects** → Note extensive research on vaccine effectiveness and address safety
Is the Flu Vaccine Effective?

- It is estimated that during the 2016–2017 influenza season, vaccination prevented 5.3 million influenza illnesses, 2.6 million influenza-associated medical visits, and 85,000 hospitalizations associated with influenza.

- A 2017 study showed that influenza vaccination reduced deaths, intensive care unit (ICU) admissions, ICU length of stay, and overall duration of hospitalization among hospitalized influenza patients.

- Another 2017 study showed influenza vaccination can reduce a child’s risk of influenza-related death by half (51%) among children with underlying high-risk medical conditions by two-thirds (65%) among healthy children.

“The effectiveness of a flu vaccine varies from season to season depending on the match of the vaccine to circulating viruses. Last year’s vaccine is estimated to have reduced the overall risk of seeking medical care for flu illness by about 40%.”

“The flu vaccine can also protect against the most serious complications in high risk groups.”
I Received a Flu Vaccine Last Year and Still Was Sick With Flu

- You may have gotten exposed before immunity from vaccination set in.
- You may have been infected with a flu virus that is different from what is in the vaccine.
- Influenza vaccine can vary in how well it works and some people who get vaccinated still get sick. It’s important to remember that there is data to show that vaccination may have made your illness less severe than it would have been otherwise.
- Influenza vaccine only protects against influenza, not other respiratory diseases.

“A flu vaccine is the best available protection against flu for yourself and those around you. Even if you do get sick with flu, vaccination may make your illness milder.”
I Don’t Need a Flu Vaccine, I Have Never Had Flu Before

• Influenza viruses are constantly changing, so getting an influenza vaccine every year is the safest option to obtaining immune protection.

• Influenza can be very serious and getting a flu vaccine also protects people around you, including those who are more vulnerable to serious flu illness, like babies and young children, older people, and people with certain chronic health conditions.

“A flu virus is one of the fastest mutating viruses and can change year to year. Just because you did not have flu before does not mean you will not in the future. Every year healthy people get the flu who have never had it before.”
Flu Is Not That Serious

• Influenza is a contagious respiratory illness that can cause mild to severe illness.

• Serious outcomes of influenza illness can result in hospitalization or death. Some people, such as older people, young children, and people with certain health conditions, are at high risk of serious complications.

• CDC estimates that influenza has resulted in between 9.2 million and 35.6 million illnesses, between 140,000 and 710,000 hospitalizations and between 12,000 and 56,000 deaths annually since 2010.

“Flu can be very serious. Every year in the U.S., millions of people get sick, hundreds of thousands are hospitalized, and thousands of people die.

“Beyond serious health consequences, if you’re sick with flu, you risk missing work or school. In fact, flu causes U.S. workers to miss up to 17 million days of work each year.”

“Flu can be mild for some people and serious for others. We can’t say for certain how mild or serious your illness will be”
Is There Any Risk Of Serious Reactions To a Flu Vaccine?

- Serious allergic reactions to influenza vaccination are very rare.

- The most common side effects from the influenza shot are soreness, redness, tenderness or swelling where the shot was given. Low-grade fever, headache and muscle aches also may occur.

- The viruses in the nasal spray vaccine are weakened. Side effects from the nasal spray may include: Runny nose, wheezing, headache, or vomiting.

“There can be mild side effects associated with a flu vaccine but these are much less severe than symptoms often associated with flu illness.

There are different side effects that may be associated with getting a flu shot or a nasal spray flu vaccine.”
Can a Flu Vaccine Give You Flu?

- Influenza vaccines do not cause flu illness.
- Influenza shots are currently made in two ways: the vaccine is made either with influenza vaccine viruses that have been ‘inactivated’ and are therefore not infectious, or with no influenza vaccine viruses at all (which is the case for recombinant influenza vaccine).
- LAIV does contain live viruses; however, the viruses are weakened, so that they will not cause influenza illness.

“No, you cannot get flu from a flu vaccine. There may be mild side effects, but this is not flu illness.”
Is the Flu Vaccine Safe?

- For more than 50 years, hundreds of millions of Americans have safely received influenza vaccines and there has been extensive research supporting its safety.
- Side effects from influenza vaccination are generally mild and short-lasting, especially when compared to symptoms of influenza.

“Flu vaccines have good safety record. Hundreds of millions of Americans have safely received flu vaccines over the past 50 years, and there has been extensive research supporting the safety of flu vaccines.

A flu vaccine is the first and best way to reduce your chances of getting the flu and spreading it to others.”
Additional Tips in Communicating With Patients About Flu Vaccination

- Keep it simple
- Complement statistics with human stories
- Avoid repeating the incorrect information
- Tie flu vaccination to values in protecting others
- Position annual flu vaccination as an important component to overall management of health
Techniques to Improve Vaccination Rates

• HCPs report higher vaccination rates when working in practices that involve medical staff in vaccine delivery, offer influenza vaccination during routine visits, have standing orders, and monitor vaccine rates

• Keep up to date on immunization recommendations by the Advisory Committee on Immunization Practices (ACIP)

• Create a culture of immunization within your practice
  • Make clinical resources and informational handouts readily available for staff and patients
  • Develop standing orders for influenza vaccination
  • Empower all staff to take every opportunity to recommend influenza vaccination

• Assess influenza vaccination status at every visit September to March; every visit is an opportunity to recommend an influenza vaccine

• Send email or phone reminders to patients to make an appointment before influenza season and follow-up with missed appointments, especially with high-risk patients

• Make referrals to other pharmacies if stock is unavailable
HCP Resources

• Fight Flu Toolkit
  • Make a Strong Flu Vaccine Recommendation Fact Sheets
  • #HowIRecommend Video
  • Appointment Reminder Email Template
  • Patient Flyer
  • Pharmacist Guide and Talking Points

• Maternal Vaccination Toolkit