

HCW Immunization Toolkits

Website Version of the Toolkit

Dina Zota, Prolepsis Institute

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HCW IMMUNIZATION PROMOTION TOOLKIT

- Based on findings from WP 4, 5 & 6
- All-inclusive HCW Immunization Promotion Toolkit available in English & all consortium languages (Greek, Italian, Romanian, Lithuanian, Polish, German) for:
 - > A) Individual health professionals (e.g. private practitioners or hospital employees)
 - >Physicians
 - Nurse & other specialties
 - ➤ B) Healthcare administrators & public health professionals





Step1: Choose your language

*More languages coming soon

English



Step2: Choose your Toolkit



HEALTH PROFESSIONALS: Physicians



HEALTH PROFESSIONALS: Nurse and Other Specialties



Healthcare Administrators & Public Health Professionals



2nd Level for Public Health Professionals



1st Level for Health Professionals

GET INFORMED! GET VACCINATED! GET PROTECTED!



1st Level Material for Health Professionals Physicians, nurses & other professionals

✓ Fact Sheets

✓ Posters



Material for Health Professionals

Physicians



Fact sheets



Material for Physicians Fact Sheets



Vaccines

Toolkit for Physicians INFLUENZA HEPATITIS B MEASLES, MUMPS, RUBELLA (MMR) TETANUS, DIPHTHERIA, PERTUSSIS (Td/Tdap) VARICELLA Myths and Misconceptions

Fact sheet contents per vaccine



HEPATITIS B PLEASE REMEMBER THAT



PLEASE REMEMBER THAT

Hepatitis B

causes acute liver infection and may lead to fulminant liver failure and liver necrosis.

is the most common infection acquired in a hospital, either through needle sticks or through contaminated instruments.

may lead to lifelong infection, which, if left untreated, may lead to liver cancer.



Billion people are affected by hepatitis B

AROUND THE WORLD

which leads to an estimated 1.000.000 deaths attributed to the effects of hepatitis B infection



TETANUS, DIPHTHERIA, PERTUSSIS WHEN DO I NEED TO GET A TD/TDAP VACCINE?



WHEN IS Td/Tdap VACCINE RECOMMENDED?

Tdap is administered To all adults to all adults

Td and Tdap vaccines contain tetanus and diphtheria toxoid vaccines, while in addition Tdap contains partial antigens of *Bordetella pertussis.* Both are administered as one dose intramuscularly





MEASLES, MUMPS, RUBELLA (MMR) WHO NEEDS TO GET A MMR VACCINE?

WHO NEEDS TO RECEIVE THE MMR VACCINE?

Healthcare workers

including supportive services and volunteers, born after 1957, who come in contact with patients, need to have received 2 doses of MMR vaccine for full protection.

Susceptible HCWs

- exposed to measles, mumps or rubella can receive the MMR vaccine within 72hrs of the exposure in order to prevent or modify the disease in some cases
 - Immune compromised persons, who are at high risk for complications, may also need administration of IV Immune Globulin (IVIG) to prevent disease.
 - Exposed pregnant HCWs should not receive the MMR vaccine; only IVIG.





MEASLES, MUMPS, RUBELLA (MMR) EFFECTIVENESS OF THE MMR VACCINE

EFFECTIVENESS OF THE MMR VACCINE



on or after 12 months of age

95% protection against measles80% protection against mumps90% protection against rubella, probably long-lasting.



administered 4-6 weeks apart

99.7% protection against measles; however up to 5% of immunized persons may lose their immunity over time.

80-95% protection against mumps; however there are indications of waning immunity and a 3rd dose of MMR may be used to control an outbreak.





VARICELLA(chickenpox) THE DISEASE IN SHORT

THE DISEASE IN SHORT

Varicella is still very common in the European Union countries, and is a seasonal disease with incidence peaks during winter and spring.

Outbreaks occur usually in pre-school and school children. Periodic larger outbreaks may occur with an inter-epidemic cycle of 2 to 5 years. Vaccination recommendations are not harmonized among member states. Surveillance systems for varicella are also not harmonized and not all countries collect data on varicella cases.

SYMPTOMS

Incubation period:

9-21 days (usually 14 days)

Varicella begins with mild cold symptoms, followed by high fever and a pruritic rash emerging initially on the face and chest, then spreading to the extremities. The characteristic pruritic rash is initially maculopapular, developing soon to vesicles which then turn to pustules. All phases of the rash can be seen at the same time. An enanthem may also appear in the buccal or genital mucosa. Patients also usually complain of malaise, loss of appetite and headache.

TREATMENT

Varicella in children is usually self-limiting and no treatment is needed besides relief of pruritus and prevention of secondary skin infections. Antivirals such as acyclovir and valacyclovir are usually recommended for adults who are in higher risk for complications or for immune compromised persons. Varicella Zoster immune globulin is recommended for immune compormised patients or for pregnant women and their neonates within 72 hours after exposure to varicella.



INFLUENZA RISKS



RISKS

ASSOCIATED WITH INFLUENZA INFECTION

Common symptoms

- · Fever, sore throat, runny nose, dry cough, fatigue, headache, and muscle ache
- · Croup and bronchiolitis common in children

Common Complications

- Pneumonia
- · Otitis media
- Sinusitis
- Myocarditis
- Pericarditis
- Worsening of chronic medical condition present before influenza illness (e.g. congestive heart failure)

Rare complications

- Sepsis
- Encephalopathy
- Death

ASSOCIATED WITH INFLUENZA VACCINATION

Common adverse events (1<100)

- Soreness/pain, redness and/or swelling around the injection site
- Short-term fever (1–2 days), may be high (>39.0 C°) in children
- Short-term fatigue (1-2 days)
- Myalgia (1-2 days)
- Adverse reactions are more common in children not previously exposed to the vaccine or virus than in adults

Rare adverse event (<1/1.000)

Urticaria

Very rare adverse events (<1/10.000)

- Anaphylaxis
- Paresthesias
- Guillain-Barré syndrome (<1/1.000.000 doses)





HEPATITIS B WHERE CAN I FIND MORE INFORMATION?

WHERE CAN I FIND OUT MORE INFORMATION?

- 1. www.impfen-info.de
- 2. WHO Europe: www.euro.who.int, search for immunization resources
- 3. www.cdc.gov
- 4. www.vaccines.gov
- 5. www.vaccineinformation.org
- 6. www.ncirs.edu.au
- 7. Immunization Action Coalition (IAC): www.immunize.org



































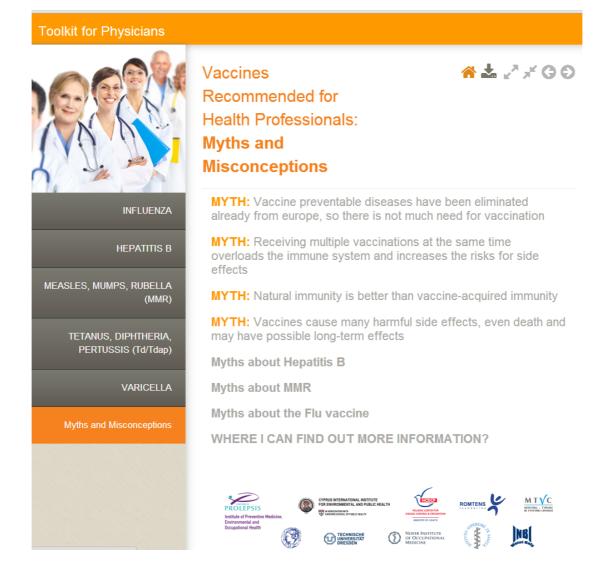


The material for this particular factsheet was based on **ECDC** material from a relevant toolkit on influenza (2012).



Vaccines Recommended for Health Professionals: Myths & Misconceptions





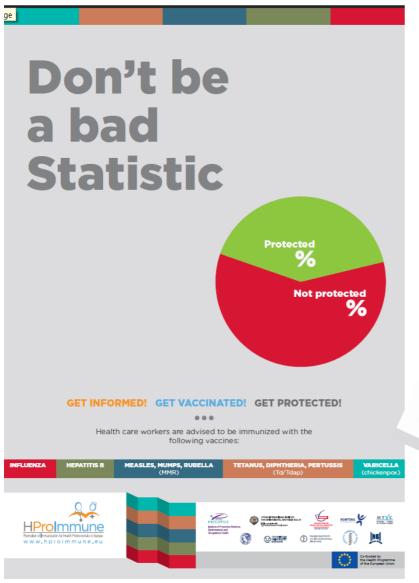


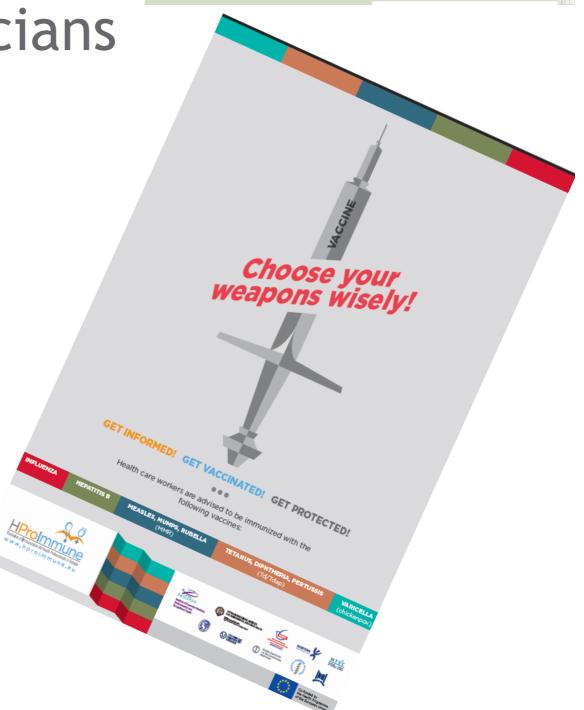
Posters



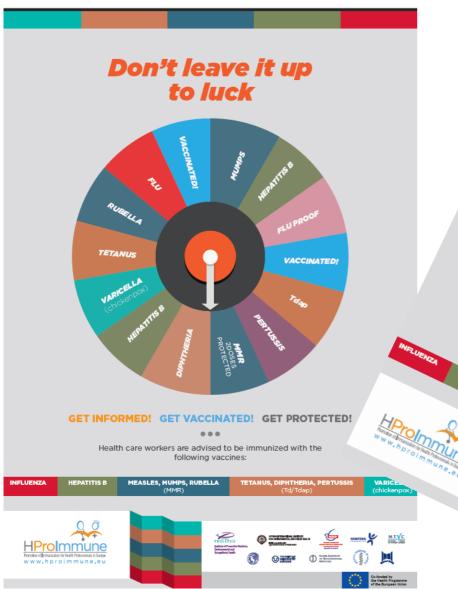
Material for Physicians

Posters





Material for Physicians
Posters





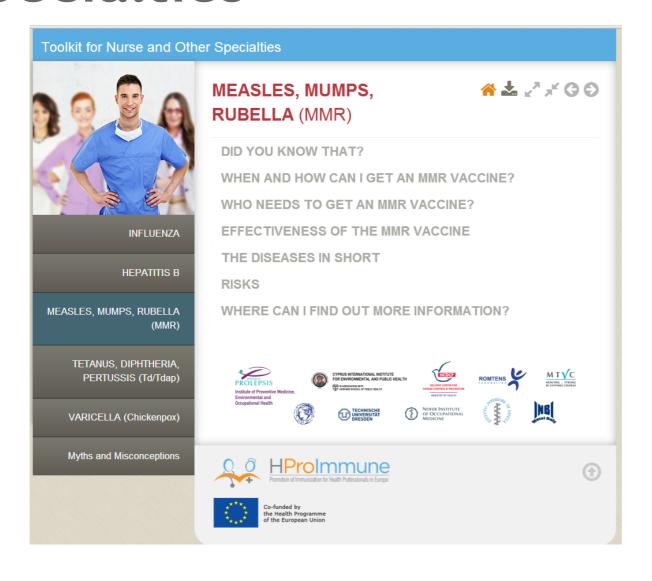
Material for Health Professionals

Nurse & other specialties



Material for Nurses & other specialties





✓ Language & information was adapted



Material

Healthcare administrators & public health professionals





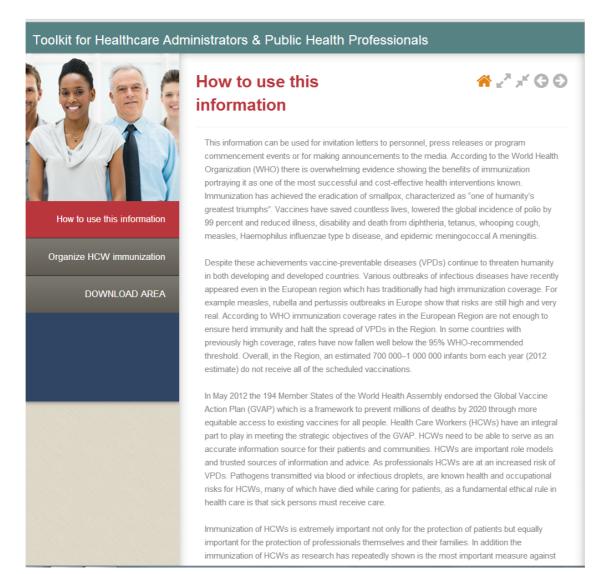
2nd Level Material for Healthcare administrators & public health professionals

- ✓ How to use
 - ✓ Step by step guide
 - ✓ Free download area



Material for Healthcare Administrators & Public Health Professionals How to use this information

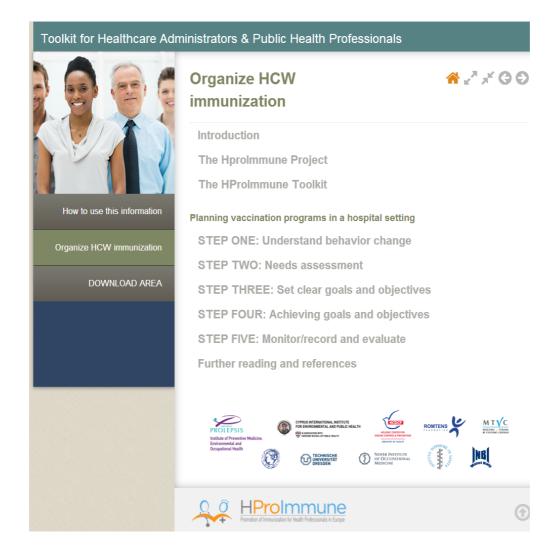






Material for Healthcare Administrators & Public Health Professionals Organize HCW immunization

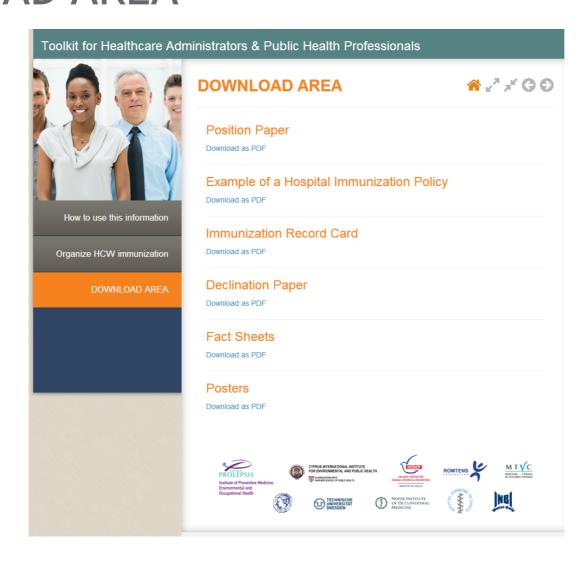






Material for Healthcare Administrators & Public Health Professionals DOWNLOAD AREA







Thank you for your attention!

Questions?

