

Uptake of Pneumococcal Vaccination in New HIV Positive Clients attending Sydney Sexual Health Centre over a four year period.



Health
South Eastern Sydney
Local Health District



Desreux C, Cross M, Knight V.

Sydney Sexual Health Centre, Directorate of Planning and Population Health, South East Sydney Local Health District.

Background

In Australia the 23v Pneumococcal Polyvalent Vaccine (23vPPV) has been available since 1983, and from 2005 people aged <65 years with conditions predisposing them to Invasive Pneumococcal Disease (IPD) have been able to access the 23vPPV via the Pharmaceutical Benefits Scheme. The National Health and Medical Research Council (NH&MRC) lists HIV as a category A condition, that which is at highest risk of acquiring IPD. Current recommendations include the immunization of HIV positive adults with the 23vPPV at 5 year intervals until 3 doses received. These recommendations are supported by ASHM in their guidelines for the Primary Care Management of HIV Disease. At Sydney Sexual Health Centre (SSHHC) surveillance of 23vPPV uptake amongst HIV positive clients is not structured beyond documentation in the client's medical record. The provision and administration of 23vPPV at SSHHC began in April 2010, this allows for evaluation regarding initial and ongoing immunization against IPD in our HIV cohort. The clinician prompt regarding vaccination is located in the patients paper medical record on the HIV Annual Screening Form and is not part of the electronic medical record.

Aim

- Identify all patients presenting with a new HIV diagnoses at SSHHC during 01/05/2010 - 30/04/2014
- Determine proportion offered pneumococcal vaccine
- Determine proportion immunised and timeframe to immunisation
- Review documentation practices associated with the offer and uptake of vaccine.

Results for patients retained in care at SSHC

- 301 clients were assessed as being retained in care at SSHC
- 136 (45%) were offered the vaccine
- 120 (40%) received the vaccination (Figure 3)
- 49 (40%) of those vaccinated received it within 30 days of diagnosis

Methodology

- A list of all new HIV diagnoses at SSHC between 01/05/2010 – 30/04/2014 was generated from the electronic medical record
- A manual medical record review was performed to determine if the vaccine was offered and/or accepted and date.
- We created a sub cohort of patients who remained retained in care during the study period for further analysis

Overall Cohort

- A total of 383 clients received a diagnosis of HIV during the study period
- 167 (44%) were offered vaccine
- 146 (38%) received the vaccine (Figure 2)
- The median days between diagnosis and vaccine offer was 27 days

Figure 1. Flowchart for inclusion in the final cohort of HIV positive patients in the study

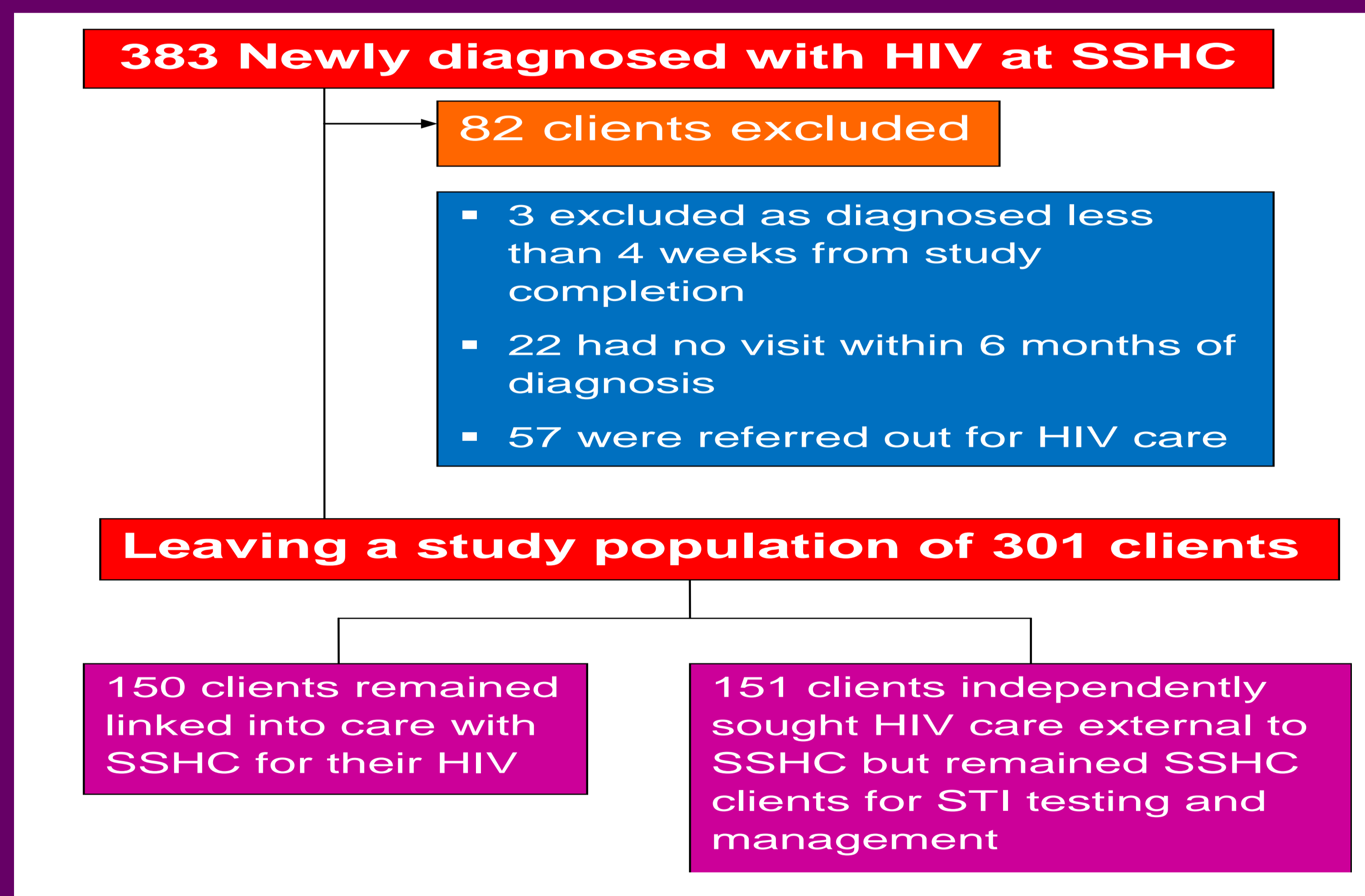


Figure 2. Pneumococcal vaccine treatment cascade in all clients newly diagnosed with HIV at SSHC during the study period (n=383)

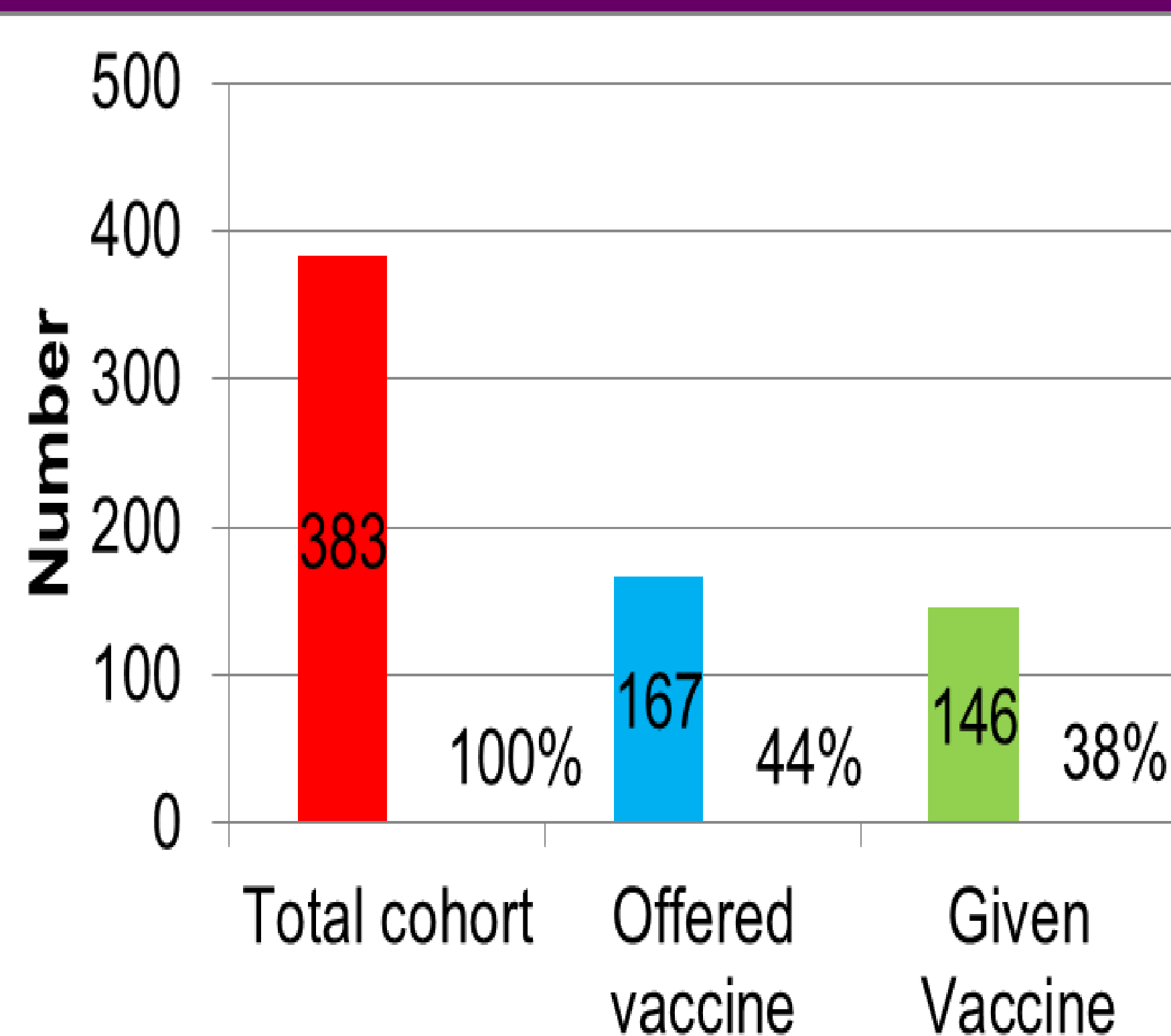
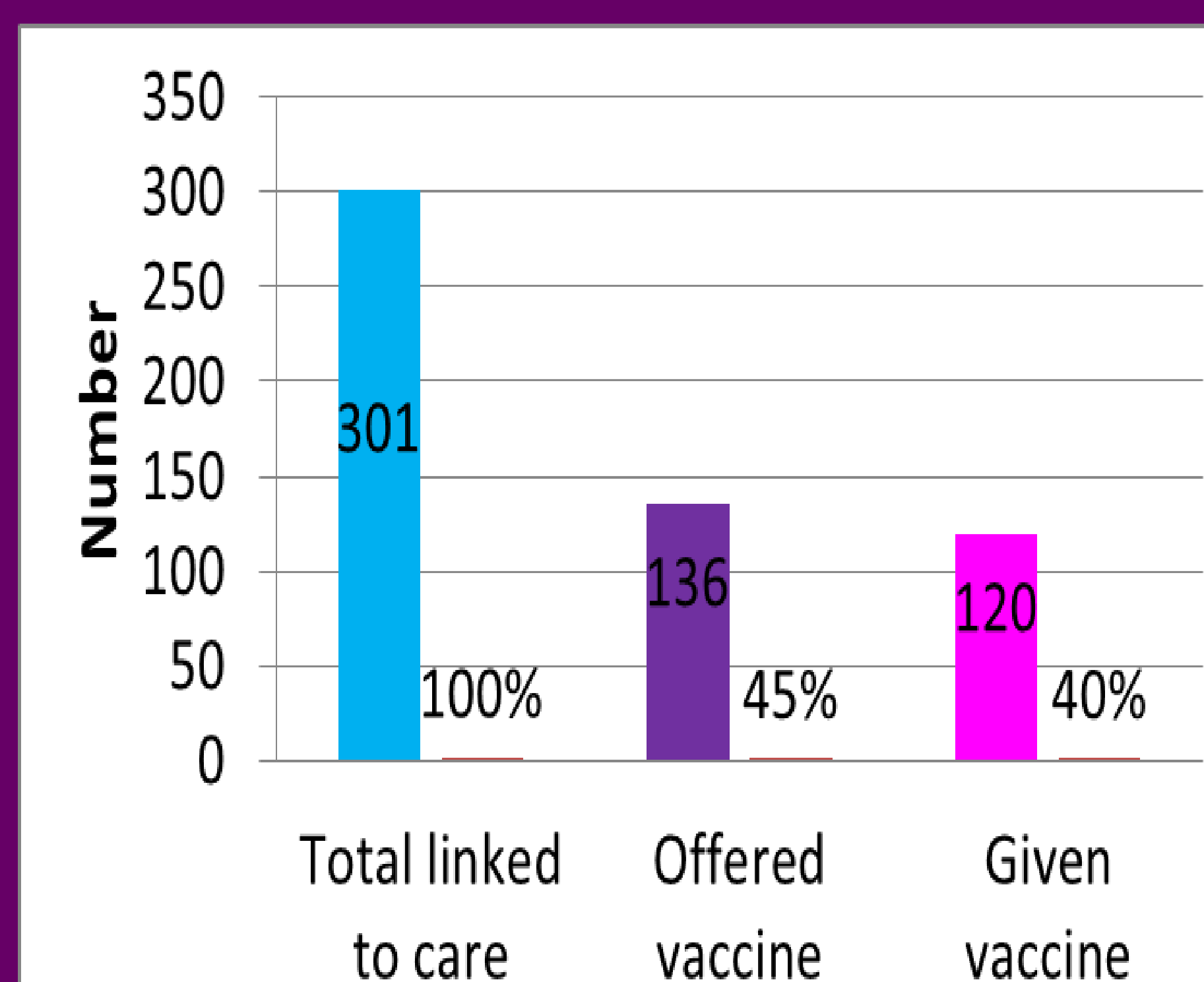


Figure 3. Pneumococcal vaccine treatment cascade in total cohort of newly diagnosed patients linked in for care at Sydney Sexual Health Centre during the study period (n=301)



Conclusions

- Less than half retained in care were offered a vaccine (45%)
- Vaccination uptake in clients retained in care was 88% (120) following an offer of vaccine (n=136)
- There was limited clinical documentation on reasons for or against an offer of vaccination/receiving vaccination
- Ways to encourage or remind the clinician about pneumococcal vaccination in newly diagnosed people needs to be investigated eg. EMR prompts