

## MILLIONS OF TEENS ARE UNDERPROTECTED AGAINST VACCINE-PREVENTABLE DISEASES

## The flip side of the 2016 data:

- 61% of eligible 17-year-olds have NOT been vaccinated with a second dose of quadrivalent meningococcal conjugate vaccine (MenACWY), despite the fact that this dose has been recommended for 16-year-olds since 2010.
- Among teens 13-17 years of age, 50% of females and 62% of males need catch-up immunization with 1 or more doses of human papillomavirus (HPV) vaccine.
- More than half—51%—of adolescents 13-17 years of age were NOT vaccinated with influenza vaccine during the 2016-2017 flu season.

#### 2016 COVERAGE RATES IN TEENS 13-17 YEARS OF AGE<sup>1,2</sup> 8 100 Healthy People (HP) 2020 Public Health Goal: 80%a Estimated vaccination rate 80 HP Goal: 70% 60 49 40 38 20 Tdap<sup>b</sup> MenACWY MenACWY<sup>c</sup> $HPV^d$ $HPV^d$ Influenzae UTD, females UTD, males ≥2 doses Vaccine

<sup>a</sup>No HP goal has been established for 2 doses of MenACWY; <sup>b</sup>Tdap = Tetanus, diphtheria, and acellular pertussis; <sup>c</sup>second-dose rate is based on 17-year-olds; <sup>d</sup>HPV up-to-date (UTD) rate for series completion; <sup>e</sup>2016-2017 influenza season.

## PERFORMANCE VS PERCEPTION: A CHALLENGE TO IMPROVING RATES

 Studies show that health care providers tend to overestimate their practice's immunization rates.<sup>3</sup>



**STOP AND MEASURE** the practice's current vaccination rates for adolescent patients

## The full potential of the 16-year-old visit

A routine immunization visit, or "platform," for 16-year-olds can not only reduce vulnerability to serious vaccine-preventable diseases through both on-time and catch-up vaccinations; it can also improve overall **well-being** by allowing an opportunity to:



Continue to provide vital preventive services, including psychosocial counseling on such issues as substance abuse avoidance, safe driving, and safe sexual behaviors.



Help instill a preventive care mindset in an age group whose members typically come to the medical office for reasons other than well care.



Prepare teenagers to transition from pediatric to adult care, empowering them to take ownership of their health, including vaccinations.

## Key Elements of the 16-Year-Old Immunization Visit, as described by the Adolescent Immunization Initiative<sup>a</sup>

#### **Proactive approach**

- Measure adolescent immunization rates and set goals for improvement
- Identify and reach out to vaccine-eligible adolescent patients (eg, remind and recall)
- Adopt a team approach and a routine vaccination workflow (eg, use standing orders)
- Capitalize on patient encounters (eg, check immunization status at every visit)
- Foster a culture of prevention (eg. schedule annual preventive health visits for all teens)
- Educate families about the milestone 16-year-old visit well in advance

#### Well-care services with immunizations as a priority

- Review vaccines and administer as appropriate: MenACWY, meningococcal B, influenza, catch-up (eg, HPV and Tdap vaccines), vaccinations for high-risk conditions
- Perform annual screenings and physical examination (eg, sexually transmitted infections, obesity)
- Provide psychosocial assessment and counseling (eg, depression, sexual health, safe driving, drugs, alcohol, tobacco, vaping, nutrition, exercise, sleep)

## Preparation for transition to young adulthood

- Educate teens about the importance of preventive care throughout life
- Empower teens to play a greater role in their own wellness, including following immunization recommendations
- Provide practical information, such as self-care management (eg, give the patient of copy of his or her care plan)

# TAKE ACTION

- Take a proactive approach to implementing the 16-year-old visit. Start by measuring immunization rates.
- Spread the word—16 years is a milestone age for immunizations and other preventive services.

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## RESOURCES

- American Academy of Family Physicians (AAFP) Foundation Highlight on VACCINATIONS 4 TEENS Resource Library www.aafpfoundation.org/vaccinations4teens
- · Society for Adolescent Health and Medicine (SAHM) Position Statement: Establishing an Immunization Platform for 16-Year-Olds in the United States https://bit.ly/2IVg5Sq
- · National Foundation for Infectious Diseases (NFID) www.adolescentvaccination.org

Immunization Action Coalition (IAC)

Adolescent Immunization Update and the 16-Year-Old Platform www.immunize.org/webinars/atkinson2

MenACWY: You're Not Done If You Give Just One; Give 2 Doses to Strengthen Protection www.Give2MenACWY.org

· Centers for Disease Control and Prevention (CDC) Preteen and Teen Vaccine Resources https://www.cdc.gov/vaccines/parents/resources/teen.html

References: 1. Centers for Disease Control and Prevention (CDC). National, regional, state, and selected local area vaccination coverage among adolescents aged 13-17 years—United States, 2016. MMWR. 2017;66(33):874-882. 2. CDC. Flu vaccination coverage, United States, 2016-17 influenza season. https://www.cdc.gov/flu/fluvaxview/coverage-1617estimates.htm. Accessed April 2, 2018. 3. CDC. Immunization strategies for healthcare practices and providers. In: Epidemiology and Prevention of Vaccine-Preventable Diseases. Hamborsky J, Kroger A, Wolfe S, eds. 13th edition. Washington, DC: Public Health Foundation, 2015:33-46.



<sup>a</sup>The Adolescent Immunization Initiative (AII) is a multidisciplinary group of experts in adolescent health and immunization, assembled under the sponsorship of Sanofi Pasteur, whose mission is to collaborate with stakeholders to establish an immunization platform at 16 years of age.