Characteristics Associated with Michigan Children Under-Immunized in their First Year of Life

RACHEL C. POTTER

AIRA NATIONAL MEETING, APRIL 6, 2016

Presentation Outline

- Background
- Methods
- Results
- Discussion

Background

Our inspiration



Vaccine

Volume 33, Issue 36, 26 August 2015, Pages 4572-4578



Exploring the heterogeneity among partially vaccinated children in a population-based cohort

Christopher A. Bell^{a, b,} ▲ · ☑, Kimberley A. Simmonds^{a, c}, Shannon E. MacDonald^{d, e}

⊕ Show more

Choose an option to locate/access this article:

Get Full Text Elsewhere

doi:10.1016/j.vaccine.2015.07.004

Get rights and content

Highlights

- · Children not-completely vaccinated are a heterogeneous group.
- · Many lifestyle factors impact vaccine completion.
- Multiple household moves and >3 children are linked to incomplete vaccination.
- Midwife delivery was strongly associated with vaccination status.

- Assessed vaccination status at age 2 years
- ▶ 2008 Alberta Canada birth cohort
- Children not up-to-date on vaccinations described as
 - ► Selectively vaccinated
 - ▶ Incompletely vaccinated
 - Non-vaccinated
- Maternal and household characteristics used as predictors

National Immunization Survey 2014 Data

	U.S. Coverage	State Range	MI Coverage	MI Rank
4:3:1:3:3:1:4*	71.6 ± 1.5	63.4 – 84.7	65.0 ± 8.5	47th
3+ DTaP	94.7 ± 0.7	89.4 – 98.5	89.4 ± 6.1	50th
3+ Polio	93.3 ± 0.8	87.8 – 97.9	87.8 ± 6.5	50th
Hib – Primary Series	93.3 ± 0.8	88.9 – 98.4	88.9 ± 5.9	49th/50th
3+ Hep B	91.6 ± 0.9	82.6 – 97.6	89.2 ± 5.1	41st/42nd
3+ PCV	92.6 ± 0.8	85.2 – 98.1	85.2 ± 6.9	50th

^{*4 +} DTaP, 3 + Polio, 1 + MMR, 3 + Hib / full series, 3 + HepB, 1 + Varicella, and 4 + PCV

Vaccination Status Assessment

Doses by age 12 months

- 3+ Hepatitis B (HepB)
- 3+ Diphtheria, Tetanus, and acellular Pertussis (DTaP)
- 2+ / 3+ Haemophilus influenzae type b (Hib)
- 3+ Pneumococcal Conjugate (PCV)
- 3+ Inactivated Poliovirus (IPV)

FIGURE 1. Recommended immunization schedule for persons aged 0 through 18 years —2013 (for those who fall behind or start late, see the catch-up schedule [Figure 2])

These recommendations must be read with the footnotes that follow. For those who fall behind or start late, provide catch-up vaccination at the earliest opportunity as indicated by the green bars in Figure 1. To determine minimum intervals between doses, see the catch-up schedule (Figure 2). School entry and adolescent vaccine age groups are in bold.

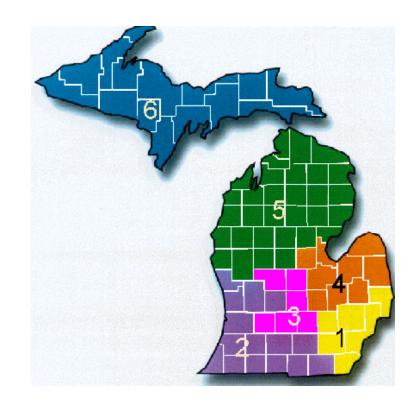
Vaccines	Birth	1 mo	2 mos	4 mos	6 mos	9 mos	12 mos	15 mos	18 mos	19-23 mos	2-3 yrs	4-6 yrs	7-10 yrs	11-12 yrs	13-15 yrs	16- yr
Hepatitis B1 (HepB)	dose 1 [±] →	← 2	\rightarrow		~		3 rd dose									
Rotavirus² (RV) RV-1 (2-dose series); RV-5 (3-dose series)			<1 [±] → dose	<mark>←^{2rd}→</mark> dose	See footnote 2											
Diphtheria, tetanus, & acellular pertussis³ (DTaP: <7 yrs)			<1 ^s → dose	→2 rd → dose	<-3 rd → dose			← 4				<5 th → dose				
Tetanus, diphtheria, & acellular pertussis ⁴ (Tdap: ≥7 yrs)														(Tdap)		
Haemophilus influenzae type b ⁵ (Hib)			<1 [±] → dose	<mark>←^{2rd}→</mark> dose	See footnote 5		3 rd of do see foo	ıse →								
Pneumococcal conjugate ^{6a,c} (PCV13)			+1± dose	✓2 rd → dose	<a>3rd → dose		← 4	_								
Pneumococcal polysaccharide ^{6h;c} (PPSV23)																
Inactivated poliovirus ⁷ (IPV) (<18years)			<1 st → dose	<mark>←2rd→</mark> dose	—		3 rd dose					<4 th → dose				
Influenza ⁸ (IIV; LAIV) 2 doses for some : see footnote 8						Anı	ual vaccin	ation (IIV c	only)			Annu	al vaccina	tion (IIV or	LAIV)	
Measles, mumps, rubella ⁹ (MMR)							← 1	se ->				<2 rd → dose				
Varicella ¹⁰ (VAR)							← 1	* se ->				← ^{2nd→ dose}				
Hepatitis A ¹¹ (HepA)							—	2 dose see foot		→						
Human papillomavirus ¹² (HPV2: females only; HPV4: males and females)														(3 dose series)		
Meningococcal ¹³ (Hib-MenCY ≥ 6 wks; MCV4-D≥9 mos; MCV4-CRM ≥ 2 yrs.)						see foo	note 13							<mark>-1"→</mark> dose		boost
Range of recommended ages for all children	d	age	nge of rec es for cato munizatio		ed	ag	ange of rec jes for cer oups	commend tain high-	led risk	ag uj	ges during o is encou	ecommeno g which ca iraged and h-risk gro	atch- d for		lot routin ecommen	

Methods

DATA SOURCES
STATISTICAL MODEL

MCIR Background

- The Michigan Care Improvement Registry (MCIR)
 - ▶ Michigan's IIS
- Web-based
- Populated with electronic birth records
- Operated with a regional approach
 - Provider recruitment and training
 - ► Help desk
 - Advisory boards



MCIR Background

- ► Legislation passed 1996
 - Opt-out
 - ▶ Vital Records integration
 - Mandated reporting for childhood immunizations
 - ► Less than age 20 years
- First rolled-out to providers in 1998
- ► IIS Sentinel Site since 2004
- Became a lifespan registry in 2006
 - No mandated reporting for adult immunizations
 - ► Age 20 years or greater

Leveraging the EBC-IIS Linkage

- ► Vital Records' Electronic Birth Certificate (EBC) integration part of legislation in 1996
- MCIR populated with EBC birth data from 1994 – current
- Information
 - Child
 - Responsible Party
 - ► Hepatitis B birth dose / HBIG
- This linkage has allowed MCIR to become the hub for clinics to obtain not only immunization records but also other public health data such as newborn screening and hearing.

EBC population of IIS

- ▶ In the past, there was a weekly transfer of data between systems.
- Currently, there is a daily query of a view in the Vital Records EBC system
 - New and updated records are considered for import into the IIS
 - Sometimes a new record in the vital records system is simply a new version of an existing record in our IIS
 - Updates are compared with previous versions
 - ► Material changes are added to existing records
 - ► Non-material changes are ignored
 - ▶ If a non-EBC record already exists, the EBC data is the default so an EBC ID will be present in the child's record.

Linkage to EBC data

- ► The numeric EBC identifier can be used to access additional fields available in the live birth file
- ► Use of these fields requires:
 - Review by the MDHHS Institutional Review Board (IRB) and
 - Review by the MDHHS Privacy Officer and
 - Execution of a Data Use Agreement (DUA) between Vital Records and Immunizations

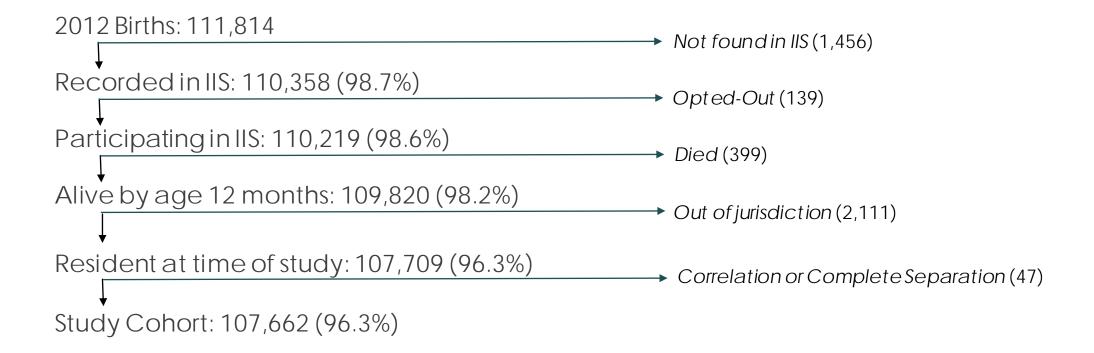
		MICHIGAN DE	ITAL WORK PARTMENT OF COMMI	WUNITY HEALTH	
	1. MEDICAL RECORD NUMBER OF CHILD		CARD NUMBER		CAL RECORD NUMBER OF MOTHER
CHILD	4. CHILD'S NAME (\$100)	(middle)	Berth	(sulks) 5.	TIME OF BIRTH & DATE OF BIRTH
Graco	7. SEX 8. PLUMALITY 0. BB	ETH GROWN .	to corners	I'S NAME (print or type)	11. DATE CERTIFIED
	12. MOTHER'S CURRENT LEGAL NAME (first, m	diffe, last)	18, 4	OTENDANT'S NAME AND TO	THE IF OTHER THAN GERTIFIER
ř	14, MOTHER'S FULL NAME BEFORE FIRST MAR	RRED (first, middle, last)	15. MOTHERS DAT	TE OF BIRTH 15, MOTHE	es STATE OF BERTH (name of country if not US
	17s. MOTHER'S PASSIDENCE STREET ADDR	#86	175, CITY, VILLAGE, TWP.	17s. COUNTY	174. STATE OR COUNTRY 17c. SP+EXTN
NOTHER NFO	BWITHIN CITY LIMITS 19 MOTHER'S MALING I YES I NO I LINKNOWN	ADDRESS IF DIFFERENT	195. PO BOX #	10s. CITY, WILLAGE, TWY	196, STATE OR COUNTRY 196, ZIP+EXTN
	20. CURPRINT MARKETAL STATUS Disease Married Mented but Reliating Disease Married Hashand's Internation	D YES D NO	ED AT BIRTH OR CONCEPTS O D NOT APPLICA	ON? 22 DID ACCOURT RUL BLE D VES	E THAT THE HUSINAND WAS NOT THE FATHER ID NO. ID NOT APPLICABLE
	□ DivorcedWidowad □ Unknown	EX DO TOU SAILING TOP	ILE AN AFFECAUT OF PAREN		□ NO □ NOT APPLICABLE
	24. INFORMANT'S NAVE FORTERENT FROM WOTHER (first, middle, and lest)	25. MOTHER'S SOCIAL SECURITY NUMBER	26. MOTHERS EDUCATI 1. 8th grade or less 2. 8th-12th grade, no dipl 1. 3th grade or less 2. 3th-12th grade, no dipl 1. 3th grade or less 2. 4th some ordege but no dipl 2. 5th hers to be	orns D 5. Bachelor's degree or GED D 7. Master's degree	
FATHER INFO	27, FATHER'S CURRENT LEGAL, NAME (IN), 30s, FATHER'S RESIDENCE STREET ADDRESS 31. PATHER'S SOCIAL SECURITY NUMBER			P, VELAGE, TWP 30c	S STATE OF SINTH JORN'S of country if not USA STATE OR COUNTRY 36d, 2194 BKTN. 4(AA, AS) 17 8, Continue or Findoscipula ((BA, AS) 6(gas) (Ph.), Ed.), MD.
		34. DATE OF PIRST VISIT	2 4. Some od lege but no de		MEd, MSW, MSA) II 9. Linknown
	23, DID MOTHER RECEIVE PRENATAL CARE? (5 Yets NO D UNKNOWN 37. LIVE EIPTHE HOW LAVING (46) 195 fed and the live of the l		S NOW DEAD (do not include		OF LAST LIVE SHITH (month/year)
MEDICAL ADMIN	40, OTHER TERMINATIONS (SPONTANEOUS AND	NOUGED AT ANY TIME AFT.	ER CONCEPTION)	41. DATE OF LAST DITH	ER TERMINATION (north/year)
	42. DATE LAST NORMAL MENSES BEGAN (FINITION)	Orano est. destruires: sistem	MIND GESTATION (Weeks) 4	4. CHILD'S BIRTH WEIGHT	BOROTY UNID 45. APGAR SCORE
					5 mins_10 mins_(only if Grain+5)
	es, HOSPITAL NAME (if not hospital, street name or	d number, olly, county)	47. IS INFANT STILL TIME OF REPO INFOS INFO	RTY (month/day/yw	EBBYCHED 49: IS INFANT TO BE ADOPTED!
MOTHER STAT	E YES E NO	American Indian, Biack, White			
	 ANCESTRY - Mexicon, Printo Ricer, Cubum, C If race is American Indian, list princ 	ordeni or South American, Ciric pal Mite.	sano, ether Hispania, Alro-Ame	arless, Arsib, English, Francit,	Rinnish, etc. papacity below)
FATHMAR	SS, HISPANIC ORIGIN SK, RACE-	American Indian, Black, Walte	s, etc. If Asian; give railsmally	Le., Colosse, Filipiro, Asias	instan, etc. (epecify)
	55. ANCESTRY - Mexican, Puerte Ricen, Cuban, Cr If race is Arroficen Indias, 1st princip	rimi or Souts American, Chico sal title.	sers, other bioparic, Afro Arno	dosa, Amio, English, French, I	Firmsh, etc. (specify below)
	SE MOTHER TRANSPERRED PRIOR TO DELIVER CONTROL TO NO. TO UNIVERSE MOTHER'S PREPREGNANCY[M. DID MOTHER	1 .	ME OF PACILITY TRANSFER	(In feet)	IR'S HEIGHT 59 MOTHER'S WEIGHT AT DELIVERY (pounds)
MED STAT	WEIGHT (pounds) CR DURNAGE C YES C NO	☐ UNIONOWER ☐ YES	D NO D INKNOWN		B4. OTHERS IN HOUSEHOLD SMOKE? IN YES IN NO IN HOUSEHOLD SMOKE? IN YES IN NO IN HOUSEHOLD SMOKE?
	пуев пио пининоми п или	T FERDING INITIATED, FLAN TEO PLANNED NOT F	PLANNED BUNKNOWN	(private insusa	ros, Medicald, etc.)
[D YES D NO DUNKNOWN	YES, PACILITY TRANSPIRE	EU 10	70. BOCIAL SEC	DIRITY REGISTRATION REQUESTED DI YES DI NO

Analysis

- Univariate analysis:
 - Multinomial logistic regression to estimate the odds ratios, 95% confidence limits, and p values of each variable against each incomplete vaccination outcome compared to complete.
 - Variables significant in the univariate analysis were included in a multivariable model
- Multivariable analysis:
 - ▶ Multinomial logistic regression to estimate the adjusted odds ratios (aOR), 95% confidence limits, and p values of each variable, adjusted for all the other variables in the model.

Results

Study population

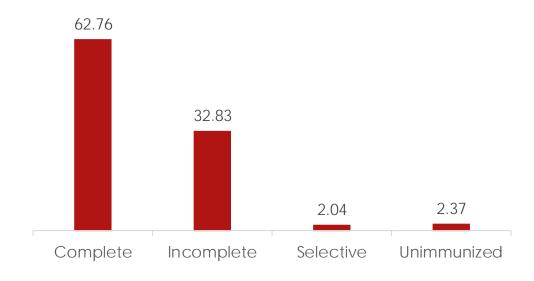


Immunization Coverage by Age 12 Months

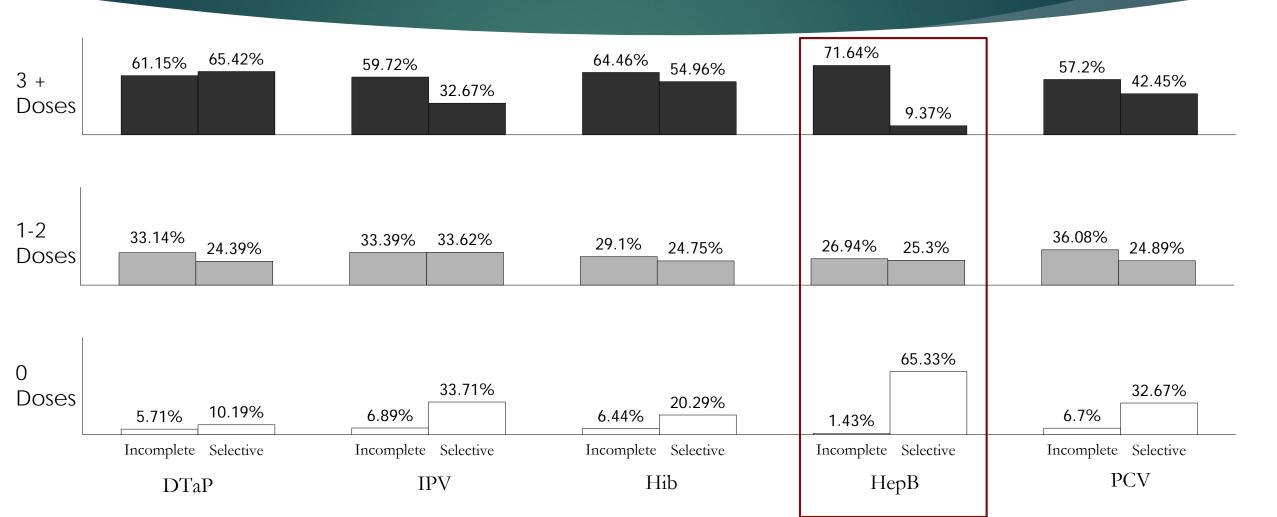
Vaccine	0 / None N (%)	1 or 2 / Not Up-to-Date N (%)	3 or more / Up-to-Date N (%)
DTaP	4,791 (4.45)	12,246 (11.38)	90,590 (84.17)
Polio	5,725 (5.32)	14,413 (13.39)	87,489 (81.29)
Hib	5,271 (4.90)	11,769 (10.93)	90,587 (84.17)
НерВ	4,489 (4.17)	14,549 (13.52)	88,589 (82.31)
PCV	5,635 (5.24)	13,297 (12.35)	88,695 (82.41)

Vaccination Status by Age 12 Months

- ▶ 62.76% Completely Immunized
 - ▶ 3+ Hepatitis B (HepB) and
 - > 3+ Diphtheria, Tetanus, and acellular Pertussis (DTaP) and
 - > 2+ / 3+ Haemophilus influenzae type b (Hib) and
 - > 3+ Pneumococcal Conjugate (PCV) and
 - ▶ 3+ Inactivated Poliovirus (IPV)
- 2.04% Selectively Immunized
 - All doses of one or more vaccines and
 - No doses of one or more vaccines
- 2.37% Unimmunized
 - No doses HepB, DTaP, Hib, PCV, or IPV
- ▶ 32.83% Incompletely Immunized



Individual Vaccine Coverage Among the Selectively and Incompletely Vaccinated



Multivariable Analysis (1)

	Incomplete v. Complete				Selective v. Complete					Non-Vaccinated v. Complete			
	aOR	(95% CI)	P-value		aOR	95% CI	P-value		aOR	95% CI	P-value		
Birth Attendant / Facility (ref=hospital/physician)													
Home	2.116	(1.664,2.690)	<.0001		16.643	(12.479,22.196)	<.0001		1.711	(0.956,3.063)	0.0706		
Hospital / midwife	1.248	(1.181,1.318)	<.0001		2.492	(2.164,2.870)	<.0001		3.288	(2.923,3.698)	<.0001		
Prenatal care 1st trimester	0.761	(0.736,0.786)	<.0001		0.811	(0.717,0.918)	0.0009		0.642	(0.578,0.713)	<.0001		
Maternal age (ref= < 21)	Maternal age (ref= < 21)												
aged 21-25 years	0.938	(0.895, 0.984)	0.0088		0.943	(0.737,1.205)	0.6376		1.076	(0.862,1.343)	0.5171		
aged 26-29 years	0.767	(0.728, 0.809)	<.0001		1.136	(0.887,1.456)	0.3129		0.832	(0.661,1.047)	0.1172		
aged 31-35 years	0.699	(0.658, 0.741)	<.0001		1.311	(1.013,1.698)	0.0396		0.728	(0.571,0.927)	0.0101		
aged 36-40 years	0.663	(0.618, 0.713)	<.0001		1.423	(1.076,1.880)	0.0132		0.823	(0.633,1.069)	0.1445		
aged 41 years or more	0.706	(0.625, 0.796)	<.0001	↓	1.601	(1.110,2.308)	0.0117		1.150	(0.826,1.600)	0.4088		
WIC enrollment (ref=never)	0.943	(0.908,0.979)	0.0020		0.433	(0.381,0.492)	<.0001		0.390	(0.350,0.435)	<.0001		

Multivariable Analysis (2)

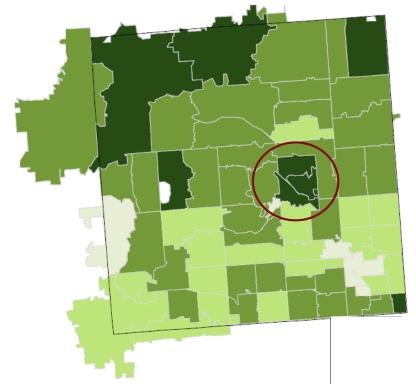
	Incomplete v. Complete				Selective v. Com	plete	Non-Vaccinated v. Complete			
	aOR	(95% CI)	P-value	aOR	95% CI	P-value	aOR	95% CI	P-value	
Number of Siblings (ref=0)										
one	1.334	1.291 1.379	<.0001	1.031	0.929 1.144	0.5689	1.281	1.153 1.424	<.0001	
two	1.554	1.491 1.620	<.0001	1.064	0.931 1.216	0.3647	1.894	1.675 2.142	<.0001	
three	1.810	1.709 1.917	<.0001	1.029	0.839 1.261	0.7849	2.498	2.121 2.941	<.0001	
four or more	2.238	2.083 2.403	<.0001	1.534	1.210 1.944	0.0004	5.128	4.298 6.119	<.0001	
Maternal education (ref=co	llege degree ↑ 1.253) 1.182 1.328	<.0001	0.564	0.445 0.713	<.0001	0.675	0.545 0.837	0.0003	
High school graduate	1.102	1.049 1.157	<.0001	0.617	0.526 0.724	<.0001	1.018	0.886 1.170	0.8002	
Some college	1.042	0.998 1.089	0.0627	0.818	0.727 0.919	0.0007	★ 1.297	1.163 1.447	<.0001	
Post-graduate degree	1.051	0.994 1.111	0.0795	1.004	0.883 1.141	0.9548	0.719	0.617 0.838	<.0001	
Not married (ref=married)	1.092	1.054 1.131	<.0001	0.836	0.728 0.960	0.0111	0.574	0.507 0.650	<.0001	

Multivariable Analysis (3)

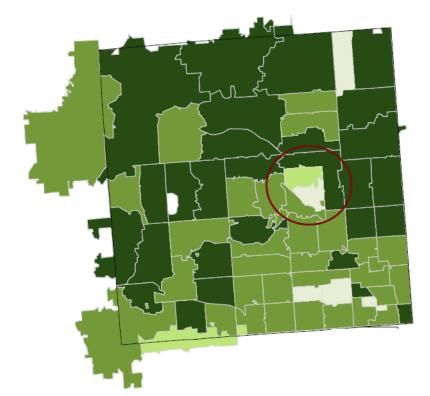
	Incomplete v. Complete				Selective v. Com	plete	Non-Vaccinated v. Complete			
	aOR	(95% CI)	P-value	aOR	95% CI	P-value	aOR	95% CI	P-value	
Maternal Race (ref=white)										
Native American	★ 1.290	1.165 1.428	<.0001	1.080	0.741 1.575	0.6883	0.888	0.618 1.278	0.5240	
Asian / Pacific Islander	★ 1.207	1.117 1.305	<.0001	0.313	0.221 0.443	<.0001	0.315	0.219 0.454	<.0001	
Black	★ 1.134	1.094 1.175	<.0001	0.699	0.589 0.828	<.0001	0.522	0.443 0.616	<.0001	
Other	0.942	0.886 1.003	0.0603	0.658	0.507 0.853	<.0001	0.407	0.310 0.535	0.0016	

Zip Code Maps

Incomplete



Non-Vaccinated



Discussion

Discussion

- ► Most children are completely immunized by age 12 months
- Of those children not up-to-date by age 12 months, the majority are incompletely immunized
 - ▶ 4% have completely omitted some or all vaccines
- Risk factors for having an incompletely rather than a completely vaccinated child are
 - Midwife-attended birth
 - Youth
 - Other children in the household
 - ► Having obtained less than a college education
 - Single marital status
 - Non-white race

Discussion

- ► These data were shared at regional conferences and immunization stakeholders' meetings to promote discussion and identify strategies.
- Small-area data are useful for local health jurisdictions
- Interventions to improve coverage should be appropriate for the targeted population
 - Recall letters
 - Reminders
- Explore and / or expand partnerships with obstetricians, midwives, birthing hospital staff

Acknowledgements

- ▶ Jevon McFadden, MD, MPH
- Cristi Bramer, MPH
- ▶ Bob Swanson, MPH
- Corinne Miller, Ph.D.
- ► Lauren Shaw, MS

Thank you