



Louisiana partnership helps elucidate vaccine uptake during pregnancy

Dr. Runa Bakshi
Immunization Program
Louisiana Office of Public Health

Collaborators:



- We have no financial supports or conflicts of interest to report.

Overview:

- Recommended vaccines during pregnancy
- Challenges and opportunities
- Current vaccination landscape during pregnancy
- Next steps

Recommended Vaccines during Pregnancy

- **Tdap**: 27-36 weeks of pregnancy
- **Flu** (if flu season): anytime; Sep-Oct
- **COVID-19**: anytime
- **RSV (Abrysvo)**: 32-36 weeks; Sep-Jan

Why vaccinate during pregnancy?

- Protect newborn for the first few months of their life until they are old enough to get their own vaccines
- Prevent stillbirth and preterm delivery (COVID-19)

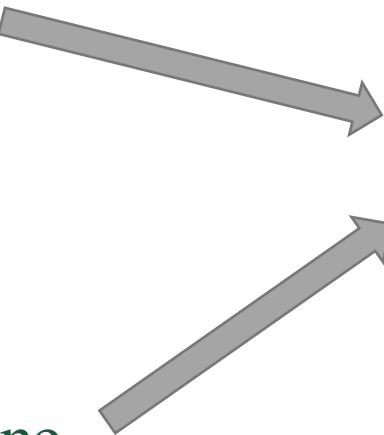
The Key Question

Are people being vaccinated as recommended during pregnancy?

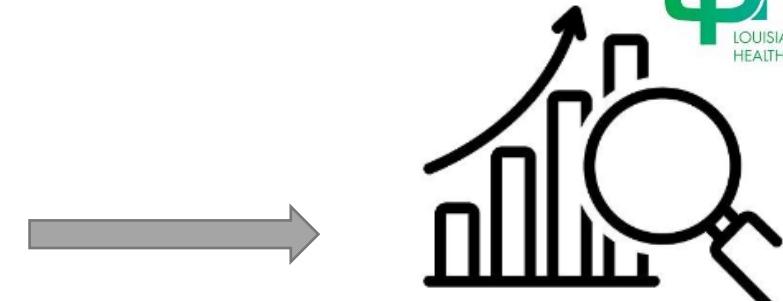
- Challenges:
 - No pregnancy indicator in IIS
 - Technology challenges
 - Privacy concerns
 - Too cumbersome to link Vital Records births data to IIS
- Opportunity:
 - Louisiana Public Health Institute's Pregnancy Registry



Methods



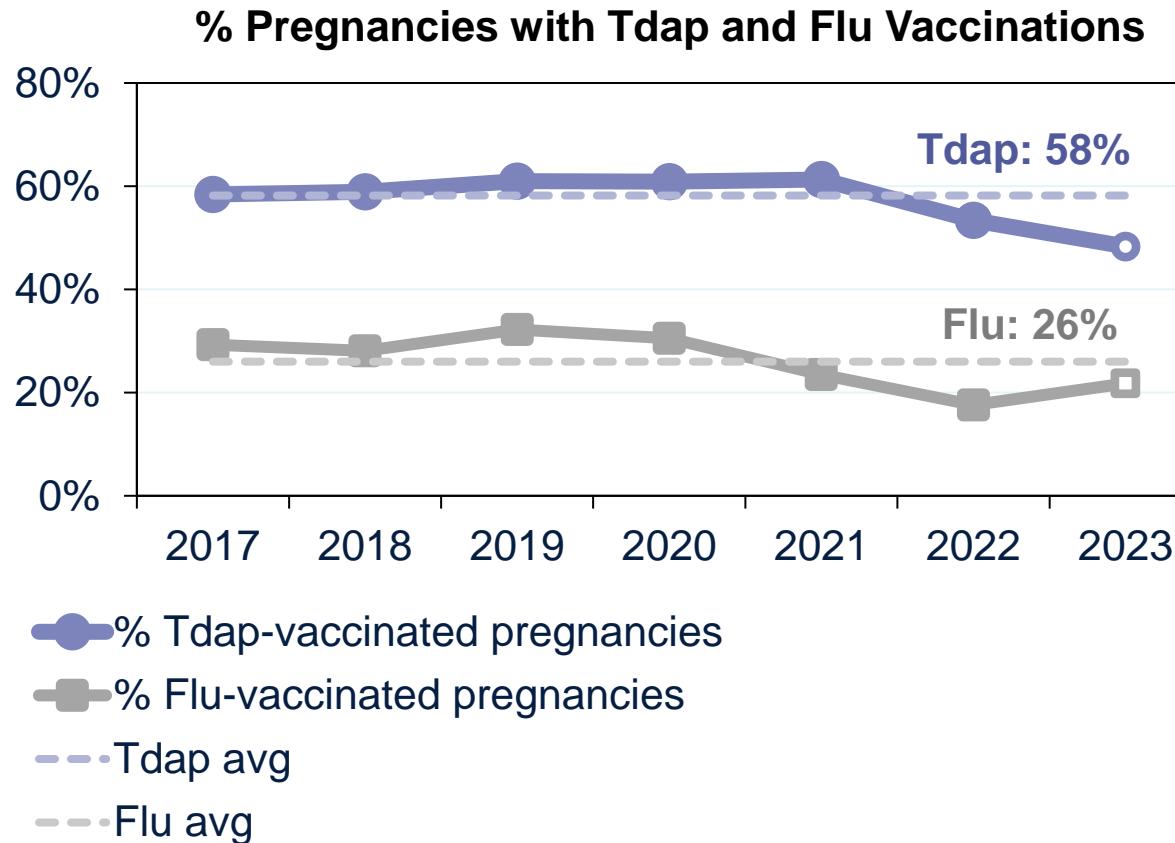
Louisiana Pregnancy Registry
(2017-2023)



Pregnancy Registry: At A Glance

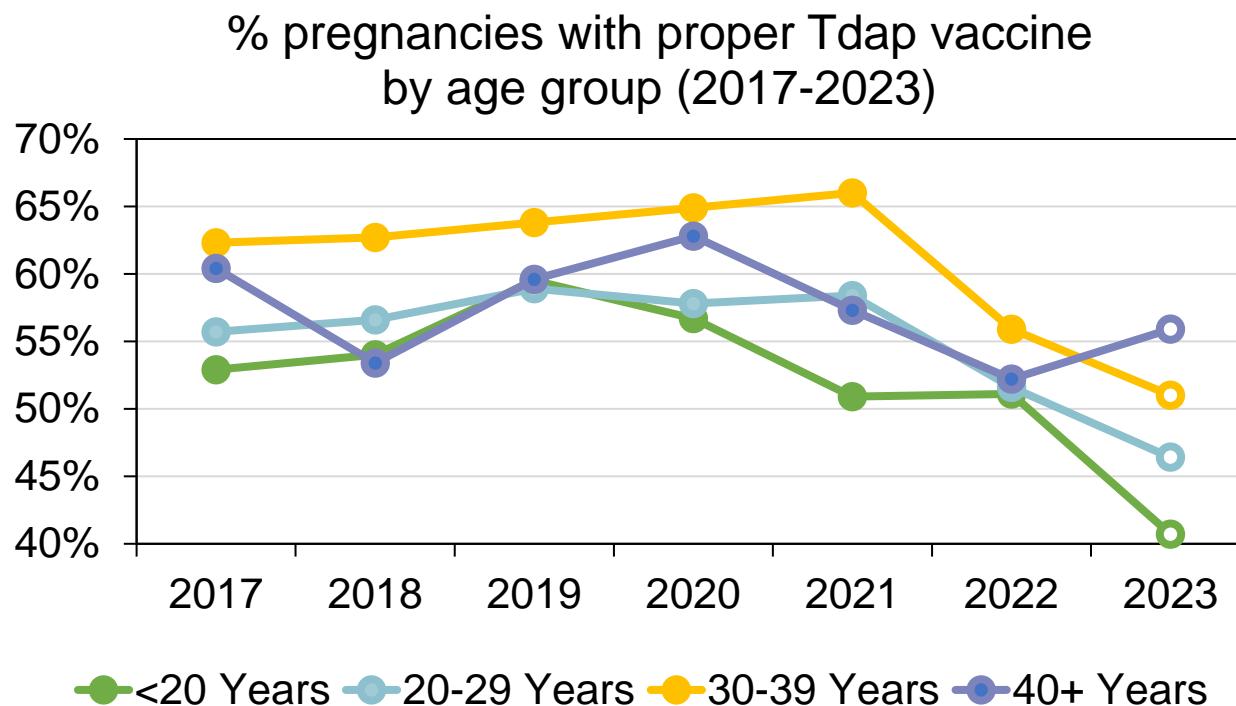
- Inclusion based on pregnancy outcome (eg: live birth, stillbirth, etc.), at Ochsner or Tulane Health System after Jan 1, 2016.
- Excluded if age at pregnancy outcome was <10 or >54 years.
- Compared to all live births in the state (2018-2020):
 - Registry (2018-2020) skews slightly older;
 - Live births from non-Hispanic White birthing parents under-represented;
 - Mostly represents the population in and around the Greater New Orleans Area.

Vaccinations during Pregnancy (2017-2023)



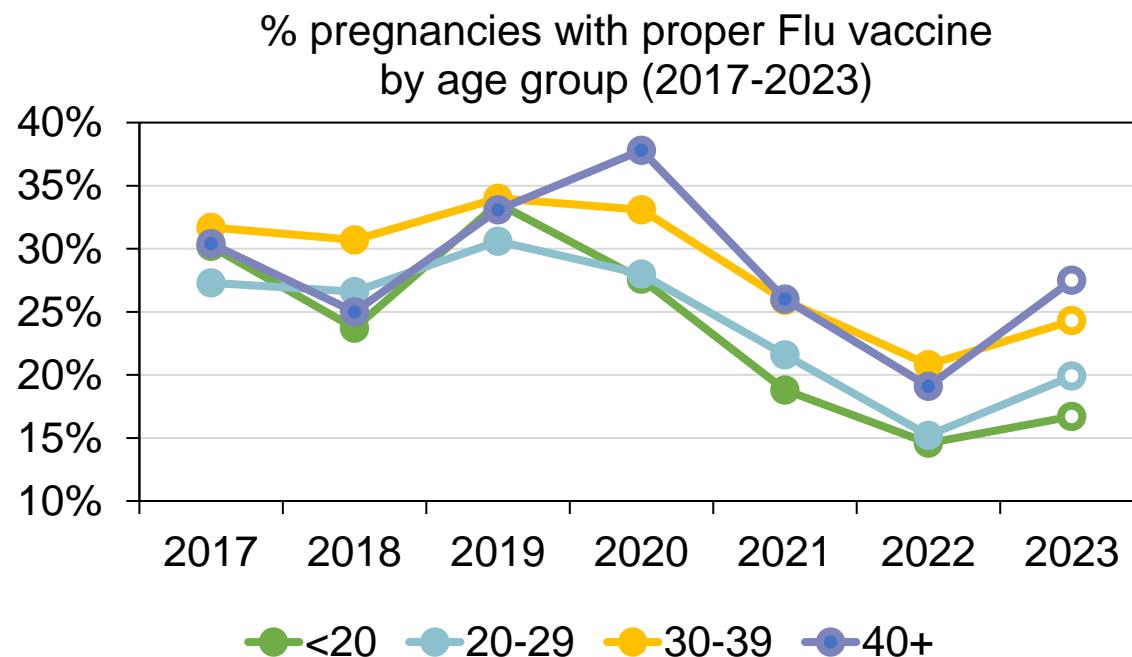
- Overall coverage rates for Tdap and flu during pregnancy were 58% and 26% respectively.
- 98% of Tdap vaccines were administered during the 3rd trimester of pregnancy.
- **Decreasing trend since Covid-19**
- **Flu recovering in 2023?**
(incomplete data at time of analysis)

Tdap during Pregnancy by Age Group



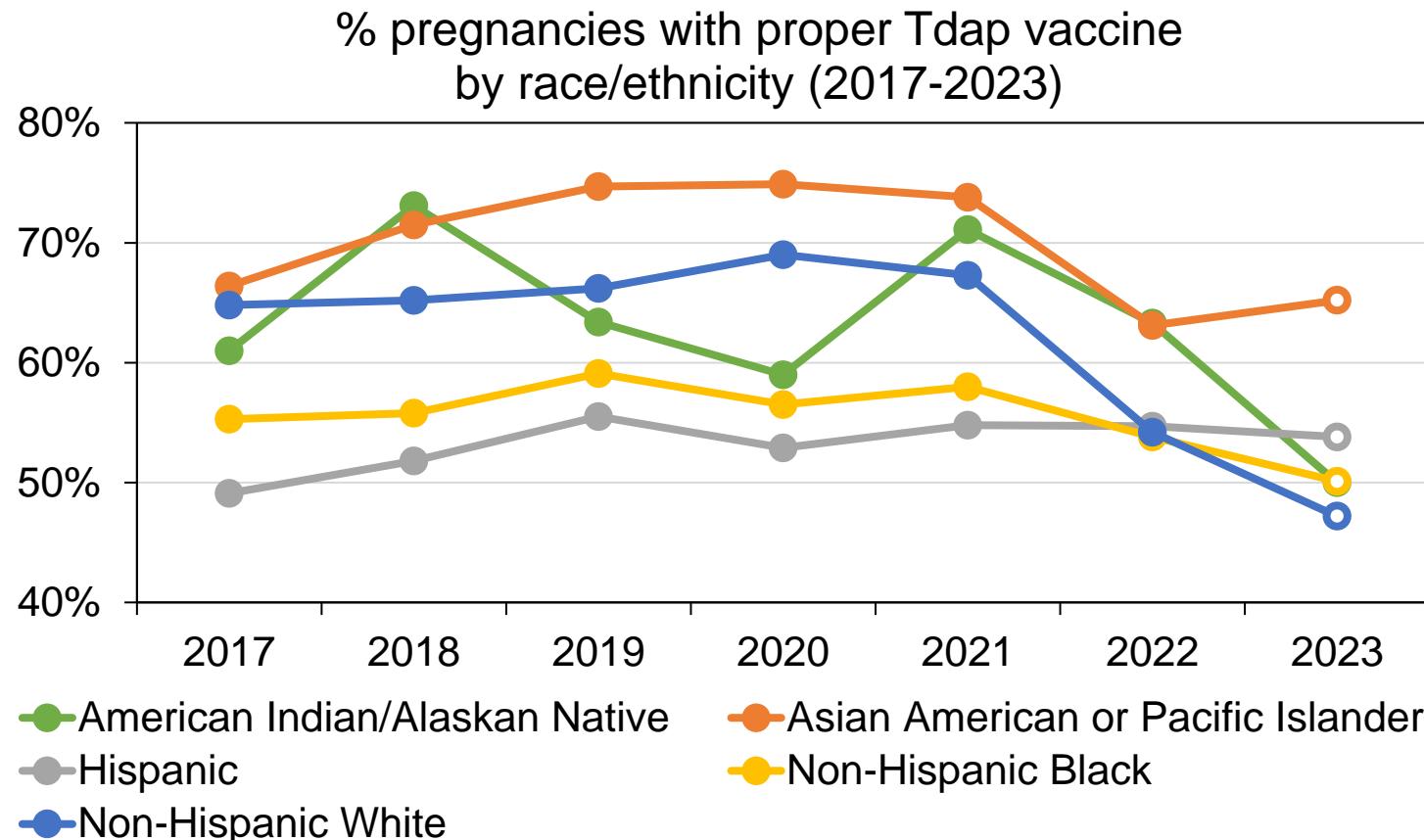
- Tdap vaccination rates were the **higher among older age groups (30+ years)** than younger age groups.
- Decreasing trends affecting all age groups but **40+ years age cohort possibly recovering in 2023.**

Flu Shot during Pregnancy by Age Group



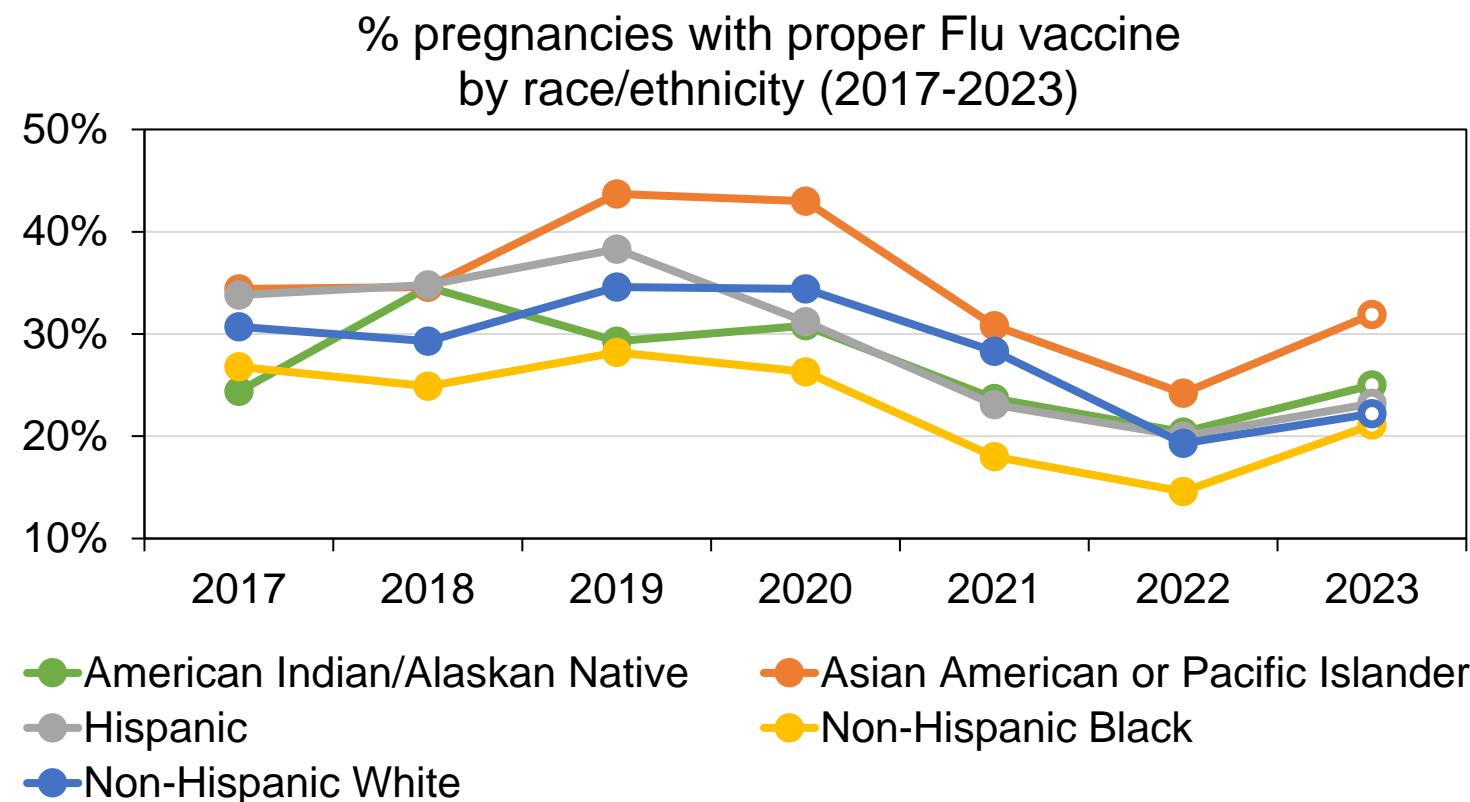
- Flu vaccination rates were the **higher among older age groups (30+ years)** than younger age groups.
- Decreasing trend since 2020, affecting all age groups but **possibly recovering in 2023.**

Tdap during Pregnancy by Race/Ethnicity



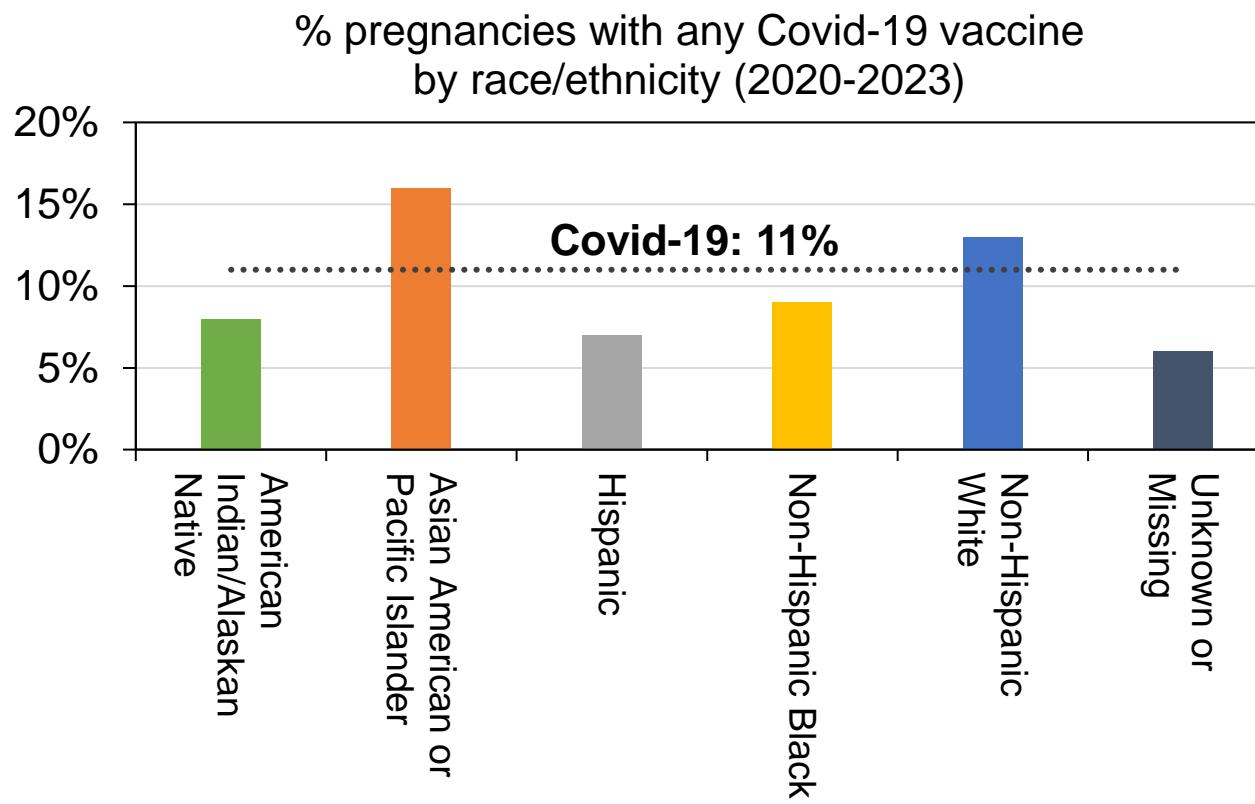
- Racial disparities in vaccination rates observed.
- Post-Covid decreasing trend observed mainly for AI/AN and non-Hispanic White populations.

Flu Shot during Pregnancy by Race/Ethnicity



- Racial disparities in vaccination rates observed.
- Decreasing trend since 2020, observed for all racial groups but possibly recovering in 2023.

Covid-19 Vaccine during Pregnancy (2020-2023)



- **Very low uptake** of any Covid-19 vaccine among the pregnant people.
- **Uptake increases with age group.**
 - <20 years: 2%
 - 22-34 years: 10%
 - 35-55 years: 17%
- **Racial disparities** in vaccination rates observed.

Next Steps

- Analyze RSV vaccination data once available
- Dive deeper to understand life course vaccination over multiple pregnancies
 - Link Vital Records births data to IIS and search for birthing parent in IIS
 - Data Lake with Master Person Index (MPI) that links VR and IIS data
- Work directly with hospitals to get patient identifiers and ascertain if all vaccinations are in the EMR.
 - If some vaccines are missing from EMR, possible data sharing with REACHnet.
- Identify ways to record pregnancy status in IIS associated with each vaccine administration
 - *Potential AIRA/CDC/multi-site workgroup?*

THANK YOU

Dr. Arundhati “Runa” Bakshi
Louisiana Department of Health

Data Analytics Program Manager | *Runa.Bakshi@la.gov*



Acknowledgement: This presentation represents the collaborative efforts undertaken by Louisiana Department of Health's Immunization Program and Louisiana Public Health Institute's Research Action for Health Network (REACHnet) staff. This work would not have been possible without the support of Elizabeth Crull (LPHI), Daniele Farisi (LPHI), Anna Legrand (LPHI), Dr. Veronica Gillespie-Bell (Ochsner), Dr. Maeve Wallace (Tulane) and Dr. Elizabeth Nauman (LPHI).





Questions?