

Immunization Action Coalition of Washington

RESOLUTION REGARDING INFLUENZA IMMUNIZATION OF HEALTH CARE WORKERS

WHEREAS, influenza is a highly contagious disease that is spread very efficiently and rapidly from person-to-person in health care facilities, and it is a serious disease that can lead to serious life-threatening complications;

WHEREAS, unvaccinated health care workers (HCWs) can potentially expose high-risk patients to influenza in a health care facility or could perpetuate an outbreak of disease, and unvaccinated HCWs may work while infected with influenza virus in part because they might not realize that they can be asymptomatic but still infectious;

WHEREAS, as few as 36 percent of HCWs are immunized against influenza each year;¹

WHEREAS, the Centers for Disease Control and Prevention (CDC) first recommended annual influenza vaccination for *all* HCWs in its 1997 Advisory Committee on Immunization Practices (ACIP) statement, stating that influenza vaccination is the primary method for preventing influenza and its severe complications;¹

WHEREAS, influenza vaccination of HCWs reduces morbidity (43 percent reduction in influenza-like illness) and mortality (44 percent reduction) among geriatric patients in long-term care facilities;^{2,3}

WHEREAS, transmission of influenza among HCWs causes absenteeism and disruption to the continuity and quality of care, and impairs health care facility preparedness for patient care in the event of large outbreaks of influenza or other communicable diseases;⁴

WHEREAS, influenza vaccination has been found to be cost effective and economical in that those who received influenza vaccine had up to 44 percent fewer physician visits and up to 45 percent fewer lost workdays;¹

WHEREAS, influenza vaccine is approximately 70% to 90% effective in preventing influenza infection in healthy individuals under 65 years of age (the majority of HCWs are part of this group);⁵

WHEREAS, healthcare worker vaccination requirements for vaccine-preventable infections including measles, mumps and varicella have been effective and accepted by HCWs;

NOW, THEREFORE, BE IT RESOLVED that the Immunization Action Coalition of Washington strongly recommends annual influenza vaccination for all HCWs to prevent transmission of influenza, and, therefore, that health care facilities require annual influenza vaccination of their HCWs and measure and report influenza vaccine coverage rates among their HCWs⁶.

1. "Influenza Immunization among Health Care Workers, Call to Action", National Foundation for Infectious Diseases, 2004.
2. Lundstrom T., Pugliese, G., Bartleyk J., Cox, J., Guither, C., Organizational and environmental factors that affect worker health and safety and patient outcomes. *Am J Infect Control*. 2002; 30; 93-106.
3. Mast, E.E., Harmon, M.W., Gravenstein, S., et al. Emergence and possible transmission of amantadine-resistant viruses during nursing home outbreaks of influenza (AH3N2). *Am J Epidemiol*. 1991; 134:986-97.
4. Nichol, K.L., Mallon, K.P., Mendelman, P.M. Cost benefit of influenza vaccination in healthy, working adult: an economic analysis based on the results of a clinical trial of trivalent live attenuated virus vaccine. *Vaccine*. 2003; 21:2207-2217.
5. CDC. Prevention and control of influenza: "Prevention and Control of Influenza: Recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR*. 2005; 54):1-40.
6. Requirements for vaccination may need to be contingent on vaccine availability.