

# Special Population Case Studies

## *High risk children and the role of BC Children's Hospital*

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# Disclosures

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- All funds paid to institution
- No personal payments



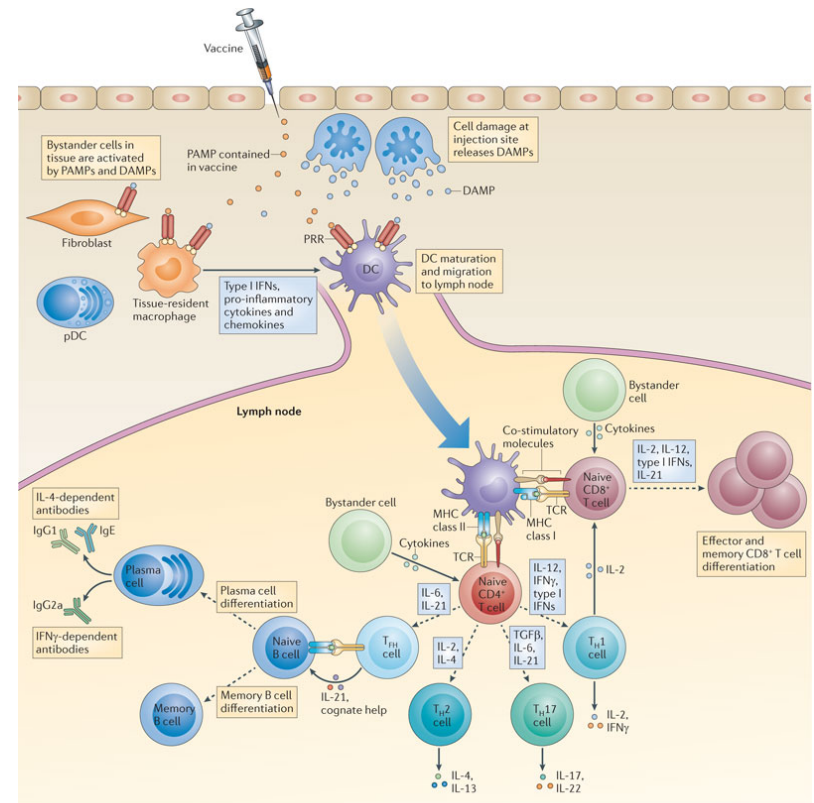
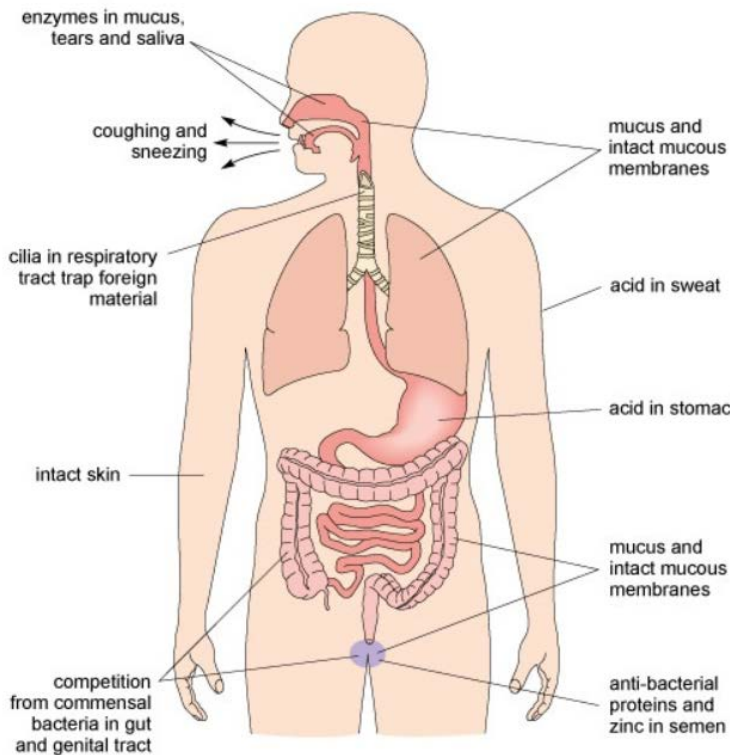
# Objectives

- Explain the impact of under-immunization on the health of medically high risk children
- Illustrate how the new Family Immunization Clinic at BCCH will help to identify and immunize medically high risk children



# Protection against infection

- Physical/chemical barriers
- Cells of the immune system



Nature Reviews | Immunology



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# “Medically high risk children” - examples

- Defects in

- Physical/chemical barriers
  - Cystic fibrosis & influenza
- Cells of the immune system
  - Chronic conditions: inflammatory bowel disease (IBD)  
juvenile idiopathic arthritis (JIA)
  - Immunodeficiency: HIV
  - Immunosuppressive medications: children with cancer

- Vaccine delivery problems

- Frequent visits to hospital
- Children with severe behavioural problems



# Increased risk of infections in IBD

**Table 1** Opportunistic infections reported with immunosuppressant therapy in inflammatory bowel disease

Factors that may predispose to infectious complications in IBD	IBD (disease type and extension, disease duration)	
	Malnutrition	
	Immunosuppressive medications	→
	Leucopenia from immunosuppressive medications	→
	Surgery	→
Viral infections	Concomitant disease	
	Virus Varicella zoster	
	Virus Herpes simplex	
	Cytomegalovirus	
	Epstein-Barr virus	
Bacterial infections	Human papilloma virus	
	<i>Escherichia coli</i>	
	<i>Salmonella</i> spp.	
	<i>Streptococcus pneumoniae</i>	
	<i>Clostridium difficile</i>	
	<i>Staphylococcus</i> spp.	
	<i>Mycobacterium tuberculosis</i>	
	<i>Legionella pneumophila</i>	
	<i>Listeria monocytogenes</i>	
	<i>Mycobacterium avium</i> spp. or <i>xenopi</i>	
<i>Nocardia</i>		
Parasite and fungal infections	<i>Candida</i> spp.	
	<i>Pneumocystis jiroveci</i> ( <i>carinii</i> )	
	<i>Aspergillus</i> spp.	
	Histoplasmosis	
	<i>Cryptococcus</i> spp.	
	<i>Toxoplasma gondii</i> *	
	<i>Coccidioides immitis</i>	
	<i>Leishmania donovani</i>	
Blastomycoses		

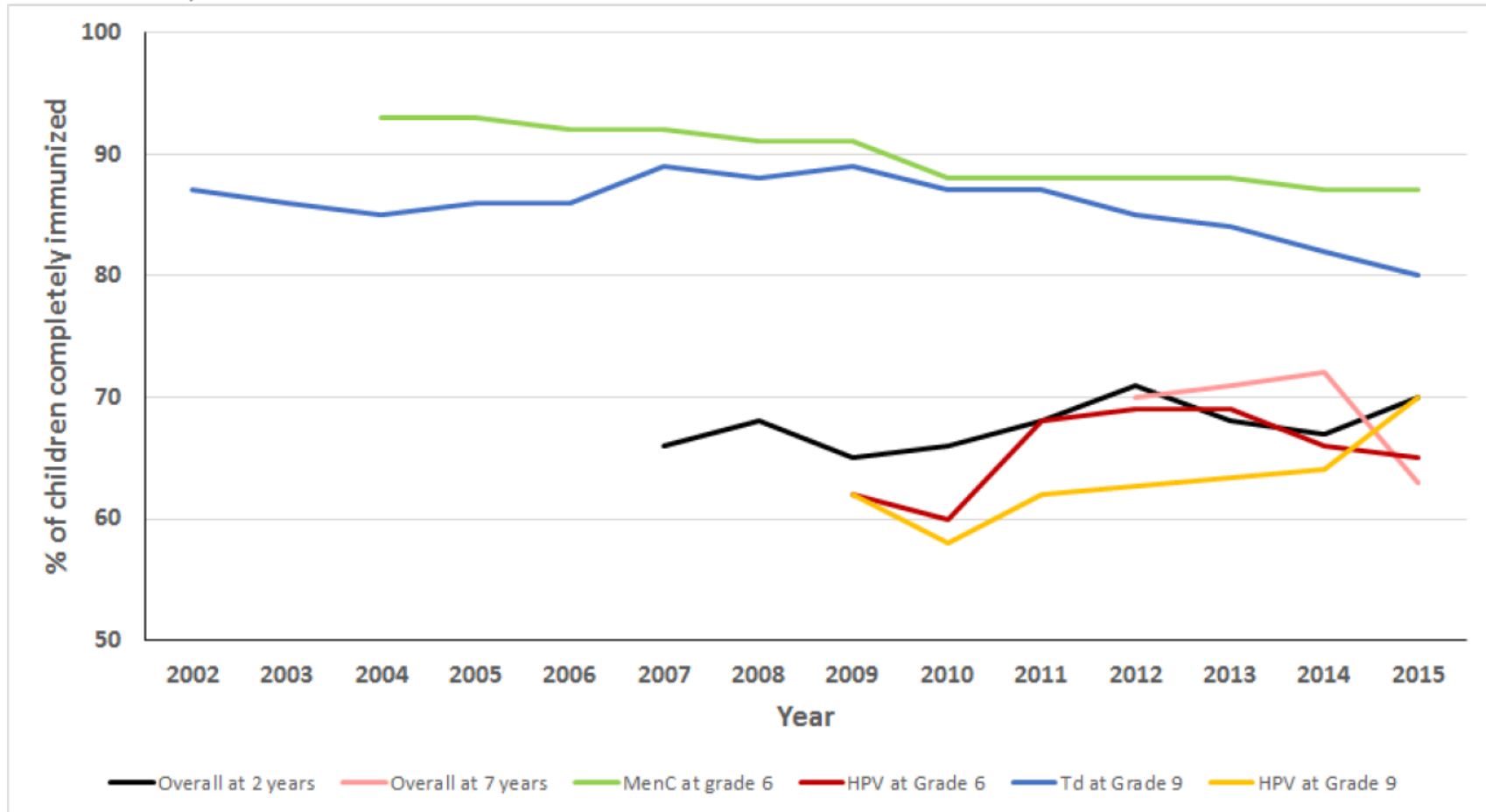
# Responsibility for vaccination?

- Shared responsibility
- Specialist(s)
- Family Physician
- Public Health
- Patient & Family



# Cannot rely on herd immunity

Figure 1. Percentage of children completely immunized at 2 years and 7 years of age, and at Grades 6 and 9 for selected vaccines in BC, 2002-2015.



MenC = meningococcal group C; HPV = human papillomavirus; Td = tetanus-diphtheria. Data from BCCDC<sup>20</sup>



# The BCCH Family Immunization Clinic

- Opened October 16th
- Highly visible
- Easily accessible
- Expert immunization care – nurses & physicians
- Focus on the whole family
- Link between acute health care and public health



# The practicalities

- Opened October 16<sup>th</sup>
  - Flu shots only initially
  - All vaccines from January 15<sup>th</sup>, 2018
- Ambulatory Care Building, main floor, opp. clinic 7
  - High traffic area
  - “Starbucks building”
- Drop-in and pre-booked appointments
- Not intended for staff or local residents



# A story of many firsts

- First in-hospital immunization clinic in Canada
- First clinic at BCCH to offer a drop-in service
- First hospital in BC with full access to immunization records
- First clinic to integrate 'Belly Breathing App' into practice
- First clinic to offer care to all friends & family members
- First group of staff to complete new BCCH training program
- First area to systematically engage patients in research
- First area at BCCH to be paperless (almost!)



# What do we do?

- Routine & catch-up vaccines
- Immunization counselling
  - After previous adverse events
  - Vaccine hesitancy
  - Complex medical conditions
- Personalized vaccine schedules for complex cases
  - Cancer
  - Other immune suppressive medications
- Nurse and physician consultations
- Immunization education, advocacy and outreach



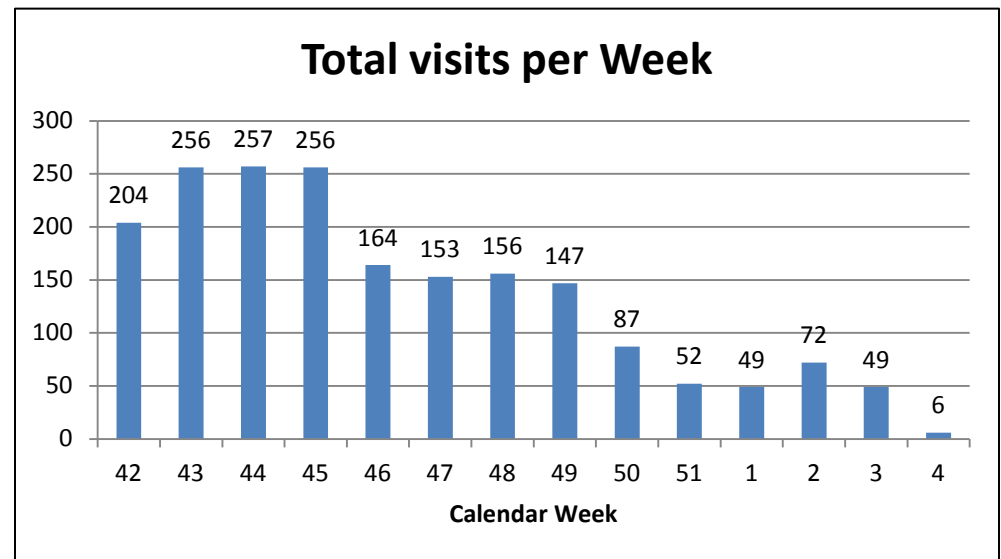
# Education in other clinics at BCCH

1. Ensure fully immunized to date from the start
  - If not, then initiate catch up ASAP
2. Ensure family members are fully immunized
3. Anticipate immunosuppression
  - Timely immunization (especially live vaccines)
  - Extra vaccines and/or doses may be needed
4. Ongoing consideration
  - Extra vaccines and/or doses, travel vaccines



# The numbers so far

- 12 weeks flu only + 1 week all vaccines
- 1,921 patients immunized so far
- 1,896 influenza shots
  - 2016: 1,525 shots
  - 2015: 1,556 shots
  - 2014: 957 shots

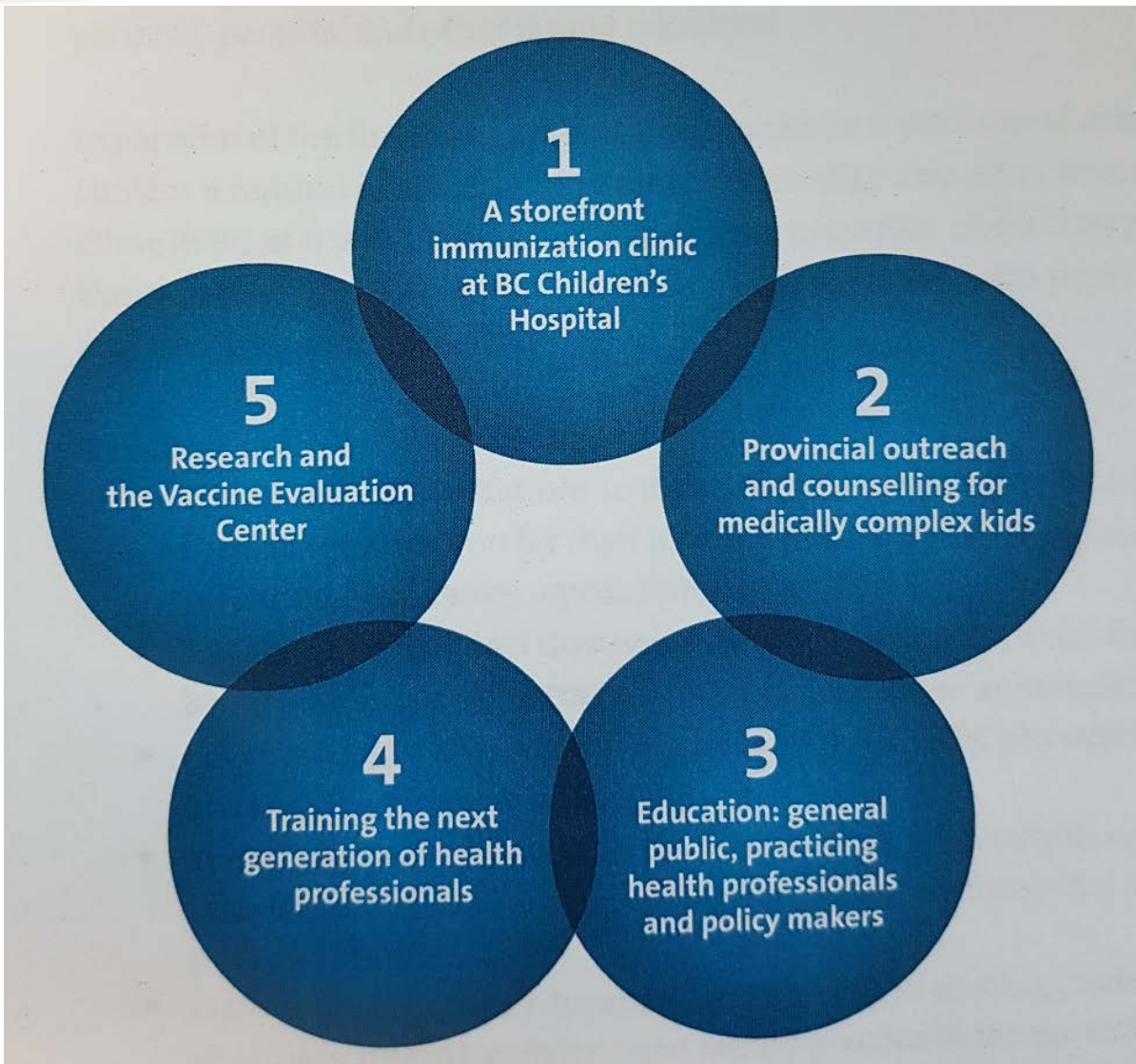


# Who's coming?

	Number	%
TOTAL	1,851	
Patients + family members	1,396	75%
- BCCH patients	757	41%
- Mother	354	19%
- Father	188	10%
- Siblings	74	4%
- Grandparent	23	1%
Others	455	25%
- Other children	185	10%
- Other adults	267	14%
- Unknown	3	0.2%



# Part of BCCH Immunization Project





# Thank you



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