



National Black Nurses Association



GERIATRIC NURSING...

Geriatric Health Care: Keeping our Treasures Healthy

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Nurses Urged to Take a Role in Vaccinating Older Adults

WILLIAM SCHAFFNER, MD AND SUSAN J. REHM, MD

Vaccines are an important part of routine preventive care for older adults, but most adults don't get their vaccines as recommended. Omitting vaccination leaves adults needlessly vulnerable to severe illnesses, long-term suffering and death from preventable infections. Nurses can have a positive impact on the health of their patients by taking an active role in immunization services in their practice settings.

Surveys of U.S. adults show that they are very likely to act on their health care providers' recommendations. In a 2007 survey from the National Foundation for Infectious Diseases, nearly nine in ten adults said they would get a vaccine if their health care provider recommended it. Unfortunately, surveys also show that patients and health care providers are not having these conversations as often as they should.

While vaccines are recommended for adults of all ages, they are particularly important for older persons who are at great risk of serious debilitating consequences and death from infectious diseases. Vaccination is particularly important for individuals living in nursing homes or assisted living facilities, as disease can spread easily among people in close proximity.

Nurses can and should be a vital part of the vaccination process. Here are three easy steps to help make vaccination for older adults a routine part of their care.

1. Know which vaccines to recommend and why

Most of us know that all patients 65 and older should get an influenza vaccine every year, but did you know CDC actually recommends the vaccine annually for every American starting at age 50? In addition, CDC recommends shingles (zoster) vaccine for individuals 60 and older and pneumococcal vaccine for individuals 65 and older. Some adults may also need a booster for tetanus, diphtheria (Td).

INFLUENZA

Influenza causes an average of 36,000 deaths, most of them in older adults, and more than 220,000 hospitalizations in the U.S. every year.^{1,2} Annual influenza vaccination reduces the risk of getting influenza, and can also reduce the severity of illness if a vaccinated person gets influenza. In nursing home residents, vaccination is up to 80 percent effective in preventing influenza-related death.^{3,4,5,6} In community-dwelling elderly persons, vaccination is 27 to 70 percent effective in preventing hospitalization for influenza or pneumonia.^{7,8,9}

Because influenza vaccination is needed every year, patients should be reminded when it's time to get vaccinated. Vaccination should be offered as soon as the influenza vaccine becomes available in the community and should continue into December, January and beyond since U.S. influenza cases usually don't peak until February.

PNEUMOCOCCAL DISEASE

The elderly and adults with special health concerns are at highest risk from pneumococcal infection and its complications. The most common clinical presentations of pneumococcal infection are pneumonia, meningitis and sepsis. About one in every 20 people who get pneumococcal pneumonia dies from it; older adults are more likely to die from the disease.¹⁰ For most people, only a one-time vaccination is recommended.



SHINGLES

The risk of getting shingles increases as a person ages; of the one million Americans who develop shingles each year, the majority are 50 years of age and older.¹¹ Shingles can be very painful in its acute stage, but it is post-herpetic neuralgia (PHN), a long-term pain associated with shingles, that is of greatest concern. PHN can be very severe and debilitating; it is difficult to treat and may last for months or years after the shingles rash itself has healed. The shingles vaccine prevents PHN in two of every three people vaccinated and prevents shingles itself in about half of all people vaccinated.¹²

TETANUS, DIPHTHERIA

The bacteria that cause tetanus are widespread in soil and dirt and can enter the body through any cut or wound. While diphtheria is now very rare in the U.S., it continues to cause illness worldwide. Ease of travel makes it important that we maintain our immunity against this deadly infection. All adults who had the primary series of vaccines as children should get a booster dose of tetanus-containing vaccine (Td) every 10 years. Those younger than 65 should get one dose of Tdap, a three-in-one combination that also includes protection against pertussis (whooping cough), in place of one Td booster. This is important because infected adults can pass pertussis on to vulnerable infants who are at highest risk of complications, including death, from whooping cough.

2. Encourage the use of Standing Orders

Research has shown that standing orders can have a positive effect on vaccination rates. Nurses can help establish standing orders in their workplace by speaking with their institution's decision maker. Sample standing orders for all of the above vaccines are available here.

3. Get your vaccines and encourage your colleagues to get theirs, too

Another great way to help patients stay healthy is to make sure you are up to date on your own vaccinations. This makes you much less likely to pass serious infections on to others. It also gives you more credibility; it's easier to recommend vaccines when you can tell your patients, "I got mine, too!" This is especially important with annual influenza vaccination.

ABOUT THE AUTHORS

WILLIAM SCHAFFNER, MD, is president-elect of the National Foundation for Infectious Diseases and chairman of the Department of Preventive Medicine at Vanderbilt University School of Medicine in Nashville, Tennessee.

SUSAN J. REHM, MD, is medical director of the National Foundation for Infectious Diseases. She has served as a staff physician at the Cleveland Clinic in Cleveland, Ohio since 1983 and is vice chair of the Clinic's Department of Infectious Disease.

RESOURCES

A variety of materials to help educate patients and colleagues about adult vaccination, including reminder postcards and fact sheets, are available on www.adultvaccination.com.

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