Health Benefits of Vaccines for Older Adults and Recommendations for Improving Older Adult Immunization Rates

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Although there are many myths and questions as to whether or not getting vaccinated is of any value to an older individual, the significant benefits of immunizations are real and well supported. The Centers for Disease Control and Prevention (CDC) manages, reviews, and promotes the recommendations for vaccines. Each year, the CDC Advisory Committee on Immunization Practices (ACIP) reviews the adult immunization schedule, and updates immunizations schedules as necessary. In 2012, there were important updates regarding vaccinations for older adults, some of which is highlighted below.

**Pneumonia and Influenza Vaccine**

Pneumonia and influenza immunizations have the advantage of compressing morbidity, particularly for older adults who generally have multiple comorbid conditions. The ACIP recommends the pneumonia vaccine for all adults 65 years of age and older; however no revaccination is necessary once an individual is vaccinated (Centers for Disease Control, 2010). The flu vaccine is recommended every year for older adults age 65 and over (Centers for Disease Control 2010). In 2008 the Centers for Disease Control (CDC) reported that adults age 65 and older comprised 90 percent of deaths that occur every year from complications related to influenza and pneumonia. Specifically, immunizations for pneumonia and influenza have been shown to decrease hospitalizations among older adults (Talbot 2011; Thomas et al 2012).

**Herpes Zoster (Shingles) Vaccine**

Shingles, a painful localized skin rash often with blisters also known as herpes zoster, may be prevented with the herpes zoster vaccine. The benefit of preventing shingles with a vaccination for herpes zoster can have an even more direct impact on older adults than that received by influenza and pneumonia vaccinations. Among older adults who are institutionalized, prevention of shingles results in a decreased risk of being placed in isolation. The vaccine also decreases the risk of pain during and following a herpes zoster infection. Older adults, unfortunately, are at the greatest risk of developing shingles. The vaccine against shingles results in a 50% reduction in cases of herpes zoster. Given the significant implication of this disease, the benefits to vaccination are impressive.
**Tetanus Toxoid, reduced Diphtheria Toxoid, and Acellular Pertussis (Tdap)**

In 2012, ACIP recommended Tdap for all adults aged 65 and older (MMWR 2012, 61(25). Pertussis is underdiagnosed and underreported substantially in all age groups. ACIP supported the conclusion that the actual burden of pertussis in adults aged 65 years and older likely is at least 100 times greater than that reported. The ACIP suggests that providers should not miss an opportunity to vaccinate persons aged 65 years and older with Tdap. Therefore, providers are encouraged to administer the appropriate Tdap vaccine they have available.

**Where Are We Now With Immunization Rates**

Despite the significant benefit of immunizations, immunization rates among older adults remain below target (Williams, Lu, O'Halloran, Bridges, Pilishvillti, Hales & Markowitz, 2014). The 2012 outcome data noted that the rate of influenza and pneumococcal vaccine among older adults across all races and ethnicities was approximately 60%. This is in contrast to the Healthy People 2020 adult goal of achieving immunization rates of 90%. There is, therefore, significant opportunity available across all areas of aging to improve the rate of immunizations and provide older adults with the best possible insurance of avoiding disease risk for those diseases we have vaccines to prevent.

**Challenges to Immunizations**

There are numerous challenges to immunizations. Included are such things as a lack of ability to require immunizations, as is done with children and entry into public school. Another common challenge is that older adults are less likely to see health care providers for primary prevention as opposed to for a specific problem. Financial coverage for immunizations is also different for adults than it is for children. That being said, it is anticipated that the full implementation of the Affordable Care Act may result in a greater emphasis on preventive health, which may support increased adult immunization rates.

**Response to the Challenge**

Many groups are working to improve adult immunizations rates. Among these is the National Adult Vaccination Program (NAVP). NAVP includes a multi-stakeholder industry-supported collaboration spearheaded by The Gerontological Society of America (GSA). Over the past few years, the NAVP has established a roadmap and key drivers for how to improve immunization rates for adult. Key drivers for improving uptake of
immunizations focus on:

- **System, Framework and Process**: establish a culture supportive of older adult immunizations. For example, social media might be a way to facilitate mindset and behavior change.

- **Payers and Providers**: provide a national leadership/champion for older adult education related to immunizations. Focus on addressing the benefits to immunizations versus the cost of this service.

- **Patients and Caregivers**: expand policies and mandates to promote older adult immunizations and incentivize providers to immunize.

Continued work of the NAVP has established even more focused themes and drivers for improving immunization rates among adults. These provide important and focused guidance for ways to improve older adult vaccine rates. It is important not to miss opportunities to provide vaccines and diverse locations within the community (e.g. churches, libraries, recreational centers). Some of these themes, such as those focused on reimbursement require the work of the entire health community.

All of those working with older adults can help drive the initiative to increase immunization rates for those within our own health centers and communities. We can each be champions and advocates for adult immunizations. As health care providers we need to be examples of appropriate health care practice and get immunized ourselves and encourage other providers and patients to do likewise.

Here are strategies to implement at your health center:

- Develop a process that assures immunizations are addressed regularly
- Support the expansion of who can prescribe and administer vaccines within the community
- Take every opportunity to use the many available resources such as those on the NAVP webpage to keep you and your patients educated and up-to-date on the benefits of vaccines, access and reimbursement.

Immunizations are our best approach to decreasing vaccine-preventable diseases among older adults. We owe it to those for whom we provide care to assure that they have access to the opportunity for immunization and a chance of avoiding unpleasant symptoms, morbidity and potentially fatal disease.
Sources:


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