



ParentPages

SHOTSMARTS FROM IMMUNIZE GEORGIA

Julieanna's Story – Hib Disease Can Be Prevented

On January 23, 2008, Julieanna did not wake up from her daily nap on time. The 15-month old baby had been running a temperature, but her mother, Brendalee Metcalf, assumed she just had the normal cold symptoms that could be expected during a Minnesota winter.

Metcalf gave her daughter a bath, hoping to make her feel better, but Julieanna could not hold her head up in the bathtub. Metcalf rushed her daughter to the hospital, where doctors first suspected a severe case of flu. After intravenous fluids did not help, Julieanna was admitted for an overnight stay and given an antibiotic that also happened to work for meningitis. That decision would save Julieanna's life.

The next morning, Julieanna's doctor recommended some difficult procedures to find out if she had meningitis: a lumbar puncture and a CAT scan. The doctor also asked Metcalf whether Julieanna had received the Hib vaccine.* Metcalf informed the doctor that Julieanna had all her recommended shots. Tests confirmed that Julieanna had Hib disease. Other tests showed she had an immune deficiency that prevented the vaccines she had received from working as well as they should. In other words, Julieanna was part of a group of immune-compromised children who rely on others for protection against disease.

When Julieanna was transferred to a Minnesota area children's hospital, her brother asked, "Mommy, Julie's going to die, isn't she?" After several seizures, brain surgery to remove a mass of fluid, sleepless nights in intensive care and endless days attached to a ventilator, Julieanna was finally released from the hospital on February 15, 2008. While she survived the infection, she lost all her motor skills, including her ability to swallow, crawl, walk or speak. She remains a full year behind in her developmental skills. Her immune system is still weak, and she receives three shots of immune globulin every week to keep from catching any diseases from her peers. Still, Metcalf is worried that Julieanna never may be fully protected from Hib and other diseases.

Julieanna's mother wants to educate everyone about protecting their children against deadly diseases such as Hib.** "Parents need to understand that when they choose not to vaccinate, they are making

a decision for other people's children as well," she says. "Somebody else chose Julieanna's path. I still see the scars every day. She did not have to go through this."

Hib disease is preventable. In 2008, Julieanna was one of five young children in Minnesota to get Hib disease. Three had not received the series of Hib shots recommended at 2, 4 and 6 months of age because of parent choice, and one of these died from the disease. The best way to protect your child from vaccine preventable diseases is to be sure your child has all the vaccines he needs. At the next visit with your child's doctor (well-child or sick visit), ask if your child is up to date on all of his shots.

Visit www.cdc.gov/Features/HibDisease/ to understand more about Hib disease and the vaccine to protect your child.

* The *Haemophilus influenzae* type b conjugate (Hib) vaccine is recommended at 2, 4 and 6 months of age to protect against *Haemophilus influenzae* type B or Hib disease. A booster dose is also recommended at 12 to 15 months of age. Due to a current shortage of this vaccine, the booster dose is only recommended for high-risk children. High-risk children include those with no spleen; those with sickle cell disease or other immune system problems; or those who are Alaska Native or Native American. When the vaccine supply is improved, all children will need to receive the booster dose in order to be fully protected. Ask your child's doctor to add your family to the list of people who will be called when the vaccine supply is improved.

** As a result of this experience, Ms. Metcalf has become a volunteer spokeswoman for the Every Child by Two's (ECBT) *Vaccinate Your Baby* campaign. www.vaccinateyourbaby.org

Immunize Georgia would like to thank ECBT (www.ecbt.org) for providing the information in this article. Immunize Georgia would especially like to thank Julieanna's family for allowing us to share her story. ■

Vaccine Safety – One Pediatrician’s View

Every day, news reports across the country talk about diseases in children that can be prevented by vaccines. As more and more parents choose not to give their children vaccines, these diseases have a greater chance of hurting our children in Georgia. Immunize Georgia talked with the Dr. Avril Beckford*, President of the Georgia Chapter of the American Academy of Pediatrics on the concerns parents have about vaccinating their child.

Q. In Georgia, what is the biggest concern parents have about vaccine safety?

A. Information in the media and on the Internet can make parents very nervous, but it may not be based on information that was researched by a trusted source. The immunization schedules recommended for children are based on years of detailed research and input by doctors and scientists. Many of these experts devote their life to understanding vaccines and protecting children from these terrible diseases.

Q. How do you feel about using alternative immunization schedules that space out the shots a child will get?

A. Pediatricians support the recommended immunization schedule because many years of research support that it is the best way to protect children from these diseases. If the shots are spaced out, babies will not be protected at a time when they are most at risk for serious problems. Cases of pneumococcal disease, measles, invasive *Haemophilus influenzae* Type B (Hib) disease and pertussis are all being seen more in the United States. During the measles outbreaks in 2008, several children got the measles from being in the waiting room of a doctor’s office.

Q. How do you respond to parents’ one size fits all concern?

A. The immunization schedule is not one size fits all. Talk with your child’s doctor – he knows him best and can review the risks and benefits for each vaccine based on your child’s

Current news articles from across the country

State health officials on alert for more measles

First rubella case in 9 years reported in Twin Cities woman

Whooping cough reported in schools

Four measles cases diagnosed in Maryland

Health officials tracing outbreak (of measles)

U.S. survey shows fewer N.J. children getting vaccinated

Hib disease deaths put focus on vaccine shortage

California schools' risks rise as vaccinations drop

Refusal to vaccinate puts kids at risk

medical history or condition. There are times when exceptions are made because a child has a compromised immune system (from cancer, etc) or has a chronic disease and needs an adjusted schedule. Your child’s doctor can help you decide the best course of action.

Q. What do you like to share with parents in your practice when they are concerned about vaccines?

- A.**
- It is a great privilege for you to trust me with the care of your child.
 - I hear you and understand your concerns.
 - I care deeply about your child and that is why I believe passionately in recommending these shots. Many studies have shown they are safe to be given and the immunization schedule is the best timing to give the shots.
 - It would be terrible if your child could not breathe or developed meningitis

and became blind or deaf or did not survive. I have seen these illnesses. Please partner with me in protecting your child. I have immunized my own children to protect them and want nothing less for yours.

Q. Do you have other thoughts or recommendations for parents?

A. I advise parents of newborns that children who have not received their immunizations can be a great risk to their newborn baby – there should be no unimmunized visitors until the baby is at least six months of age.

*Avril Beckford MD, FAAP, President of the GA Chapter of the AAP, is also a practicing pediatrician in Atlanta and a staff member at Children’s Healthcare of Atlanta at Scottish Rite. ■