EHFG 2011: EXPERTS ADDRESS “VACCINE CONFIDENCE GAP”

The Internet and social media are proving a serious nuisance by spreading unfounded scare-stories about vaccines, the European Health Forum Gastein was told by vaccine expert Dr Heidi Larson. The consequences could be alarming. One was the return of measles, with the WHO posting 25,000 new cases in September 2011. Public trust in vaccines is highly variable, experts said, this needed to be addressed by decision makers.

Bad Hofgastein, October 6, 2011 – Systematic monitoring of vaccine rumours, concerns, and refusals was crucial, international vaccine expert Dr Heidi Larson told today’s workshop on adult vaccination at the European Health Forum Gastein. “I have no hesitation in comparing this to our handling of infectious diseases, where surveillance is also essential,” she said. A rumour surveillance system is being trialled at the London School of Hygiene and Tropical Medicine, where Dr Larson is a senior lecturer.

Vaccines are among the success stories of modern medicine, Dr Larson said. Between 1997 and 2009, for instance, the number of measles cases dropped over 96% from over 20,000 to just under 7,500; the number of Rubella cases dropped over 98% from over 800,000 in 1999 to just under 12,000 in 2009, according to WHO Europe.

The consequences of misinformation, the Internet-funnelled rumour mill and public distrust in vaccines were well-documented, she said, and frequently worrisome. One of the most striking examples was measles, Dr Larson said: “Despite the great progress in reducing measles, cases have again surged over the past year—with over 25,000 cases as of September 2011, driven in part by non-vaccination due to unfounded fears around the MMR vaccine.”

There was reluctance to successful vaccines, with “adult vaccines -- including those for young adults -- being particularly vulnerable to scepticism”, said Dr Larson. By last year, just 49% of girls in the USA had received at least the first of the recommended three shots for human papilloma virus, or HPV (a sexually transmitted infection that can cause cervical cancer and genital warts). But only a third had come back for all three doses, the US Centers for Disease Control and Prevention revealed in August.

The same reluctance was undermining influenza vaccination. The publication Vaccines Today reported that most European countries were falling well below the WHO/EU target of 75% coverage. While some 82% of older people in the Netherlands have received the annual flu vaccine, coverage has plummeted as low as 16% in Poland. The figures are almost as low in the Czech Republic and Slovakia, where less than one third of the elderly and high-risk populations have been vaccinated against seasonal influenza.

In a recent Lancet article, Dr Larson and fellow-researchers called this trend “the vaccine confidence gap.” “The vaccine community demands rigorous evidence on the efficacy and safety and technical and operational feasibility of any new vaccine, but has been negligent in
demanding equally rigorous research into the manifold psychological, social, and political factors that affect public trust in vaccines,” she said.

This needed to be taken into account by policy and other decision-makers: “Public trust in vaccines is highly variable and building trust depends on understanding perceptions of vaccines and vaccine risks, historical experiences, religious or political affiliations, and socio-economic status.”

Noting that vaccine scepticism was as old as vaccines themselves, dating back to the New England Anti-Compulsory Vaccination League formed in 1882 to fight mandated smallpox vaccination, she said rumours were now turbo-charged: “The Internet and social media have had an enormous impact on recent vaccine debates such as H1N1, enabling groups either for or against vaccination to organize themselves into highly effective international organisations capable of rapid dissemination of information.” This included wild misinformation, rumours, and a huge variety of colourful conspiracy theories.

“New methods of communication, dialogue, and engagement are urgently needed across all vaccine stakeholders—vaccine experts, scientists, industry, national and international health organisations, policy-makers, politicians, health professionals, the media, and the public,” she said. “No single player can reverse the vaccine confidence gap.”

Transparency helped, she said. “Listening to stakeholders, being transparent about decision-making, and being honest and open about uncertainty and risks. There will be extremist anti-vaccination groups who will not change their minds. Many—the majority—could change their minds. The focus should be on building and sustaining trust with those who accept and support vaccines.”

The EHFG is the most important conference on health care policy in the EU. This year it attracted more than 600 decision-makers from 45 countries for discussions on the latest developments in health care policy.

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