

# A retrospective analysis of the vaccination practices amongst the HIV population at St. James's Hospital

P Conlon, C Kerr, C Bergin  
St James's Hospital GUIDe department.



**Background:**  
Vaccination is an important component of infection prevention, particularly relevant for patient cohorts including those with HIV infection who are at increased risk of acquiring infection and suffering the consequences of disease progression.

**Context:**  
St James's GUIDe service has an ethnically diverse cohort. We have grouped our patients by geographic location and by acquisition risk.

**Methods:**  
We interrogated our HIV database of 2,500 patients. We identified those who returned negative serology to varicella or rubella. We subsequently cross referenced our digital and hardcopy vaccination database to determine if they had subsequently been vaccinated.

**Results:**

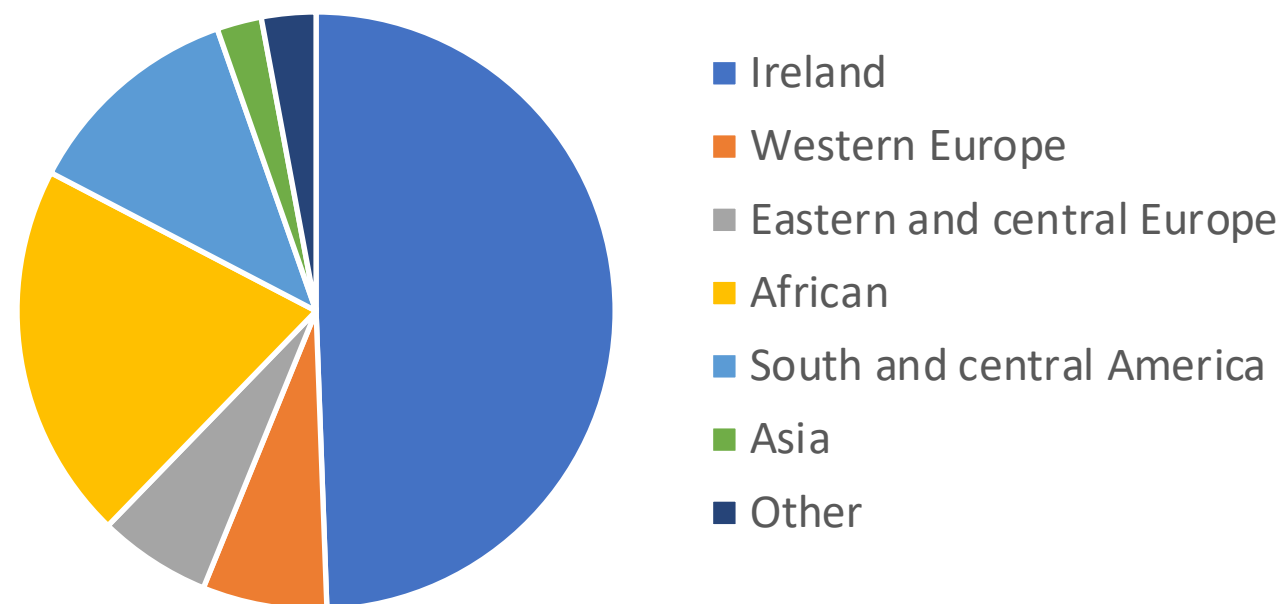
**Varicella**

- 55/1522 (3.6%) patients were seronegative
- 38/55 (69.1%) patients were enrolled in a catch up vaccination programme
  - 54.5% had received 2 doses VZV
- 8 patient's immunity had waned following documented vaccination

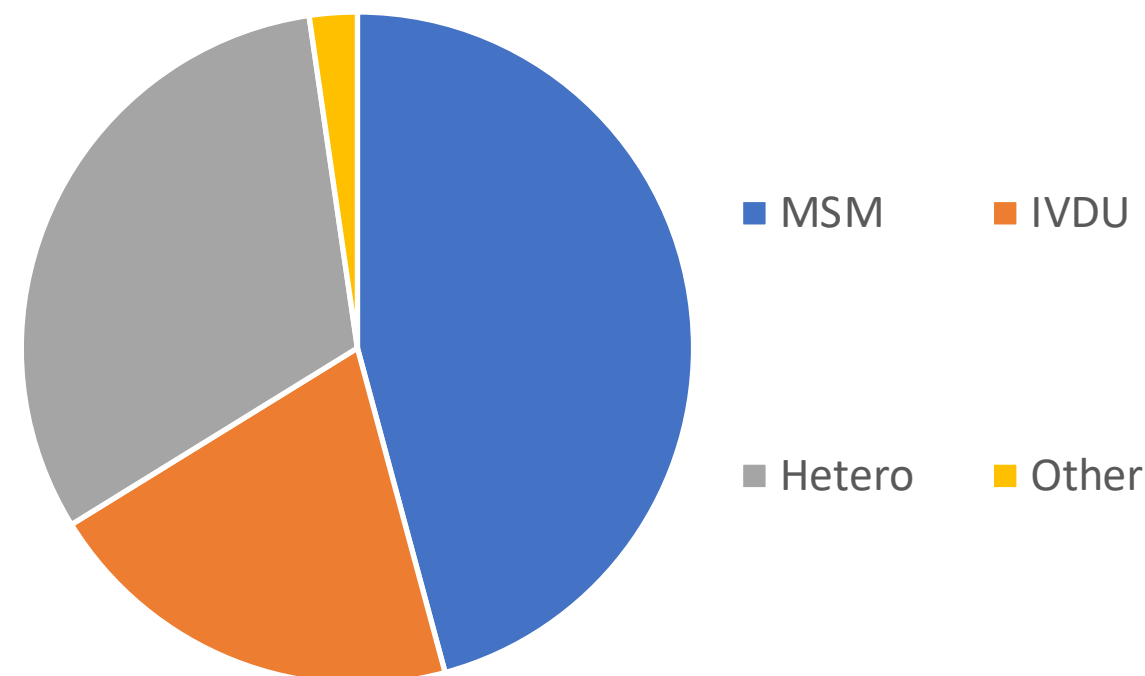
**Rubella**

- 112/997 (11.2%) patients were seronegative
- 56/112 (50%) were subsequently vaccinated
- 18 females were non immune
  - 16 of which were of childbearing age

Geographic distribution



Acquisition Risk



**Discussion**

- The majority of our cohort are immune to varicella and rubella (93.4% and 88.2% respectively).
- Of those found to be non-immune an active recruitment process has recalled 70% of those non-immune to varicella and 50% of those non-immune to rubella.
- The lack of a single vaccination passport is a significant barrier to the appropriate vaccination of our cohort.
- Reasons patients listed as to not be vaccinated included; lack of clarity if they had been previously been vaccinated, being vaccinated elsewhere, loss to follow up, personal preference
- We propose to complete the recall of all patients identified non-immune to varicella and rubella and to continue this analysis across other preventative infectious diseases including measles, mumps hepatitis A and hepatitis B.