French GPs vaccinate their patients differently compared to their own children

Nancy, 22/11/2016: More than half of general practitioners (GPs) recommend vaccination for their patients that differ from their practices for their own children, according to a survey in France, which was recently published in the journal *Clinical Microbiology and Infection*. The physicians' attitudes varied for different reasons, like the confidence they have on the benefits and the safety of individual vaccines.

In France, GPs are the cornerstone of the vaccination programme as there is no school-based vaccination scheme. Official public health policy makes vaccinations against tetanus, diphtheria and polio mandatory while it recommends others including measles-mumps-rubella vaccine (MMR), hepatitis B vaccine (HepB), human papillomavirus vaccine (HPV) and the vaccines against meningococcus C (MenC).

Researchers led by Pierre Verger and Céline Pulcini, from the Aix Marseille and Lorraine Universities, France surveyed 1,038 GPs who had at least one child aged between two and 25 years old. For example, nearly half (47%) of them reported that they had all of their own children vaccinated against HepB, but that they did not always recommend that vaccine to their patients. Similar discrepancies were observed among 36% of GPs for the MMR vaccine, 19% to 28% for routine and catch-up MenC shot, and 27% for the HPV vaccine.

Comparatively 14% always recommended MenC for patients at 12 months old, but did not had all of their children vaccinated, while 5% (MenC catch-up), 3% (HepB and HPV) and less than 1% (HPV) recommended the vaccine to their patients but reported that their own children were not vaccinated.

The statistical analysis carried out on the data revealed three overall clusters that can describe the behaviour of French GPs:

37% of GPs recommended vaccination to their patients and had their own children vaccinated (Cluster 1), and only 3% of French GPs did not recommend vaccination to their patients and reported that their own children were not vaccinated (Cluster 3)

However, 60% of GPs (Cluster 2) showed differences between the vaccination recommendations to their patients and the vaccination practices for their own children. This was particularly true for the MMR vaccine. 100% of GPs’ children in this group had been vaccinated but GPs were inconsistent in how they recommended it to patients.

The survey also showed that male doctors, those who practice alone, those occasionally practising alternative medicine, and those not favourable to vaccination in general were more likely to present a high level of discordance.

The reasons for those differences are complex but Agrinier and colleagues speculate that vaccine hesitancy certainly has a part to play.

“One of the biggest discrepancies was seen with the HepB vaccine: 77% of GPs had their own children vaccinated but only about 33% recommended the vaccine to teenage patients. This is possibly due to patient-related barriers. There have been unsubstantiated claims that the vaccine is linked with multiple sclerosis and this has been fuelled by media interest,” explains Marion Le Maréchal. Other factors may include financial cost of the vaccine, worries about the risks of vaccination, or philosophical or religious objections. “These barriers are real in general practice but they do not exist between the GP and his or her own children,” adds Marion Le Maréchal.

Further causes for general vaccine hesitancy could include concerns about adverse safety profiles, particularly of combination vaccines or newer products, or the fact that some may consider the incidence of the vaccine-targeted disease too low for any risk. GPs may fear an immune overload, or they prefer infection-driven or other preventive measures over vaccine-induced immunity. It is often media reports that plant the seeds of doubt

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about supposed adverse events, the pharma industry's failed disclosures or failures in the pharmacovigilance system.

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Notes to editors

According to the World Health Organisation, around 6 million deaths worldwide are prevented every year because of vaccination.

The effectiveness of most vaccines is high. After receiving the second dose of the MMR vaccine (measles, mumps and rubella) or the standalone measles vaccine, 99.7% of vaccinated individuals are immune to measles. The inactivated polio vaccine offers 99% effectiveness after three doses.

Although vaccines are tested rigorously and there is well-documented evidence that they prevent the diseases they intend to prevent, there is a small but vocal minority who do not accept the evidence and are anti-vaccination.

Media Contact: Alex Heeley, a.heeley@defacto.com +44 203 735 8168

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