

## Vaccinating Children Protects Our Community

In 1994, Heather Whitestone was named Miss America—the first such title holder with a physical challenge. The country admired her for her beauty, talent, and poise as well as for her ability to assume a very public role in spite of her inability to hear. Heather's hearing loss resulted from *Haemophilus Influenzae* type b (Hib) meningitis, a disease that is now preventable by vaccination.

This week, National Infant Immunization Week (April 19-25, 1998), is a good time to focus on the importance of ensuring that babies are protected against Hib and other vaccine-preventable diseases. All infants should begin a series of immunizations at birth. By age 2 years, they should have received vaccinations to protect them against 10 diseases: diphtheria, tetanus (lockjaw), pertussis (whooping cough), polio, measles, mumps, rubella (German measles), hepatitis B, chicken pox, and Hib meningitis.

Because many people in our country have not seen a case of diphtheria, polio, or pertussis in several generations, they do not realize how much damage these diseases can cause. Some even believe these diseases are a thing of the past and that there is no reason to immunize their children. But these diseases are now infrequent *because* of improved immunization services and the availability of improved vaccines. Often, when children aren't immunized, epidemics of these diseases can recur. For example, a major cause of the 1989-1991 measles epidemic in the United States was the failure to vaccinate children on time at 12 to 15 months of age. This epidemic affected more than 55,000 people in the United States; about 11,000 were hospitalized and approximately 130 died. More recently, outbreaks of rubella and, again, measles have occurred in parts of the United States.

The more children who are immunized, the less chance of an epidemic—and the less risk for those who may be vulnerable because they are very young, have deficient immune systems, or lack medical care. So, in addition to protecting individual children, immunization protects the entire community. Indeed, if it "takes a village to raise a child," it takes the collective choice of parents to immunize their own children to protect an entire village.

Some parents are concerned by stories in the media about the dangers of immunization. Such stories often are not based on fact. For example, several newspapers incorrectly reported that Miss America became deaf as a result of an adverse event following a diphtheria/tetanus/pertussis (DTP) vaccination. This story was retracted when her pediatrician came forward to state that her deafness resulted from exposure to Hib meningitis—not a vaccine.

In a recent article in the *Journal of the American Medical Association* (December 18, 1996), Gary Freed, M.D., and colleagues discussed published studies that have examined the data on adverse events. These studies include reviews by the Institute of Medicine that "rejected a causal relationship for most conditions alleged to be a result of immunization." Causal relationships

were found for some events, but the risks were extremely small. Dr. Freed concludes that "vaccines have become a widely accepted, beneficial, safe, and effective clinical preventive measure."

All parents and caregivers should make the decision to immunize their children based on the facts. Parents/caregivers should review Vaccine Information Statements available from their health care providers, which discuss the benefits and risks of vaccines. And they should ask their doctors questions about immunizations, including the benefits and risks pertinent to their own child. Parents/caregivers must be given valid reasons for delaying an immunization. Each health care visit is an opportunity to discuss immunization and to provide the needed vaccinations. Each visit that does not result in a needed vaccination is a missed opportunity for protection—not only for that child but also for the entire community.