Health care workers must protect patients from influenza by taking the annual vaccine

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To justify compulsory vaccination, there must be an outbreak of serious illness; immunity levels must be low; the vaccine must be effective, safe and available; and vaccine uptake must be low.4,5 These conditions appear to be met for annual seasonal influenza. Exemptions could be granted for medical contraindications or for deeply held religious or philosophical convictions.

Campaigns and promotions have been attempted and have resulted in only a 22%–52% increase in vaccination rates.1 Compulsory programs for health care workers have resulted in participation rates above 95% in the leadership example of many Philadelphia teaching hospitals, as well as in a host of public and private American health care institutions.5 Public Health Ontario recently changed its guideline to recommend a mandatory program.4 The participation rate needs to be above 90% to prevent importation and to interrupt transmission within a hospital.

Our schools have shown us the way. During measles outbreaks, access to schools has been successfully denied to non-vaccinated children and staff. The time has come for health care institutions to demand that all health care workers be vaccinated. Our patients’ lives depend on this change.

References

2. Behrman AJ, Caplan AL, Coffin SE. Doctors choosing not to be vaccinated is choosing to do harm. BMJ 2011;343:d7198.

Competing interests: See www.cmaj.ca/site/misc/cmaj_staff.xhtml

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