

Anti-pneumococcal vaccination in patients with COPD in a Primary Care Health Unit

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Aim: The aims of this study were to know the prescription profile of anti-pneumococcal vaccines and the compliance to this vaccination by patients with Chronic Obstructive Pulmonary Disease (COPD) in a Primary Care Health Unit (PCHU).

Method: We conducted a retrospective, observational descriptive study in a population of patients with COPD belonging to PCHU Lethes (Ponte de Lima, Portugal). Were included all patients diagnosed with COPD and a registry of at least one spirometry. The data were obtained by consulting digital clinical process in software SClinico® and National Health Data Platform®; were considered records until 31/07/2017.

Results: This study included 136 patients. A dose of two available anti-pneumococcal vaccines was prescribed in 44% of these. However, only 38% had records of at least one dose of one of the two anti-pneumococcal vaccines (what corresponds to 86% of all prescribed vaccines), and 11% had records of administration of the two vaccines. Comparing the two vaccines, 39% of patients had at least one prescription of 23-valent polysaccharide vaccine (23-PPV), of which 87% did the vaccination. It corresponds to a coverage with 23-PPV in 34% of patients with COPD. In case of 13-valent conjugate vaccine (13-PCV), 18% of patients had one prescription and, of these, 87,5% did the vaccination. Thus, the coverage with 13-PCV was 15% of patients with COPD.

Conclusion: This study revealed a low rate of prescription and a low rate of coverage with anti-pneumococcal vaccines in COPD patients. Given the importance of this vaccination in these patients, this study gave rise to a project of continuous quality improvement in Health Unit. These data are also a potential starting point for a study of the factors that determine the prescription of these vaccines and compliance by patients.

Declaration of Interest: The authors declare that they have no competing interests.

The Ethics Committee of Local Health Unit of Alto Minho assessed and approved the research protocol.

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