



ACOG 2020 DISTRICT II VIRTUAL ANNUAL MEETING
Junior Fellow Research Day Oral Presentation and iPoster Session Contests

RESEARCH ABSTRACT FORM

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RESEARCH TITLE: Differences in Flu and Tdap Vaccination in Pregnancy between Faculty and Private Providers

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INTRODUCTION:

Prior studies have assessed individual patient characteristics as predictors of Tdap and flu vaccination in pregnancy, but little is published on the role of provider type. We evaluated differences in vaccination rates between private and hospital-based practices, and explored the rate of vaccine hesitancy in pregnant women.

METHODS:

This was a cross sectional study of a convenience sample of recently postpartum women. After consent, women completed a survey, which included whether they received the flu and/or Tdap vaccine, and a validated vaccine hesitancy scale for both flu and Tdap vaccines. The prenatal chart was also reviewed to confirm vaccine administration as well as demographic data. The primary outcome was rate of vaccination. Fisher's exact test was performed to compare the outcome between private and hospital providers.

RESULTS:

Of the 231 women approached, 209 (90.5%) agreed. Of the 208 women, 138 (66.3%) had prenatal care with a private practice, and 70 (33.7%) with a hospital-based practice. Patients of hospital-based providers had a higher rate of flu and Tdap vaccination compared to patients of private practices (Flu: 70% vs. 54.3%, $p=0.036$; Tdap: 77.1% vs. 58.4%, $p=.009$). Among the entire cohort, 55.3% had some degree of vaccine hesitancy (Figure 1). This did not differ between hospital and private practices (54.3% vs. 55.8%, $p=.883$).

CONCLUSIONS:

In spite of similar prevalence of vaccine hesitancy, pregnant women cared for in hospital practices had higher rate of vaccinations than those in private practices. More research is needed on ways of improving vaccination rates at private practices.

Figure 1: Vaccine hesitancy survey results

