

Many Parents Shun CDC's Vax Schedule for Kids

— Opting for delaying or skipping vaccines instead

by Molly Walker, Associate Editor, MedPage Today
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More than one-third of parents did not follow the recommended vaccination schedule for their young children in 2014, opting for a different schedule that included delaying or skipping vaccines, researchers found.

While 63% of children ages 19 to 35 months followed the early childhood immunization schedule recommended by the CDC's Advisory Committee on Immunization Practices (ACIP), 23% were on "alternate" schedules and 14% were on "unknown" schedules, which involved limiting the number of shots per vaccine series or in some cases, skipping at least one vaccine series altogether, reported Robert Bednarczyk, PhD, of Emory University Rollins School of Public Health in Atlanta, and colleagues.

Moreover, less than 60% of examined children were classified as being "up-to-date" with all ACIP-recommended vaccines, the authors wrote in *Pediatrics*.

They cited "concerns" about the need for, and safety and effectiveness of, vaccines, leading to declines in "vaccine confidence."

"[This] is consistent with several trends reported by American doctors in recent years, including parental requests to limit the number of vaccinations given at each visit, increased need for a strong and consistent physician recommendation for vaccination, and potentially wavering vaccine confidence," the authors wrote.

They examined data from the 2014 National Immunization Survey for all ACIP-recommended vaccinations, including data on rotavirus and hepatitis A vaccines.

Children either followed the recommended vaccination pattern, an "alternate" pattern (in line with either limiting the number of shots per visit or skipping at least one vaccination series), or an "unknown" pattern (not in line with ACIP recommendations or clearly limiting shots per visit or vaccine series).

Researchers noted that children who were more likely to follow an "alternate" vaccine pattern moved across state lines, were not firstborn, lived in the Northeast, and were non-Hispanic black race below the poverty level.

Children who received WIC benefits (i.e., from the Special Supplemental Nutrition Program for Women, Infants, and Children), lived below the poverty level, and received vaccinations from public providers only were more likely to follow an "unknown" schedule, the authors said.

Not surprisingly, children following an "alternate" vaccination pattern were more than four times as likely not to be up-to-date and children following an "unknown" pattern were about 2.4 times as likely not to be up-to-date compared with those following a recommended schedule.

Notably, two-thirds of children who were not up-to-date initiated vaccination late at least once, though up-to-date children with alternate vaccination patterns had about three more vaccination visits and received one fewer vaccine per visit than up-to-date children.

The authors also noted that while up-to-date and not up-to-date children received about the same number of vaccines per visit, not up-to-date children had fewer visits in total.

Limitations to the data, the researchers said, include not being able to determine the motivations for adhering to or not adhering to a set vaccine schedule and that the team could not track missed opportunities for vaccination involving healthcare provider visits without vaccination.

The authors suggested future research into determining what parent actions and circumstances increase the chance that they will deviate from the recommended vaccination schedule, and interventions to target both providers and parents to increase vaccine uptake.

Disclosures

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The findings and conclusions in this article are those of the authors and do not necessarily represent the official position of the U.S. Department of Health and Human Services.

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