

Challenges to Vaccine Uptake Among IBD Patients Initiating Biologic Therapy – A QI Initiative

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Evidence of Conflict of Financial Interest

	Co-authors	Conflict disclosures
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3	Dr. Jennifer Jones	No conflicts of financial interest.



Introduction and Methods

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• Patients with inflammatory bowel disease (IBD) may be at an increased risk of vaccine-preventable diseases (VPD). • The Canadian Association of Gastroenterology (CAG) established clinical practice guidelines for immunization in patients with inflammatory bowel disease (IBD) in 2021 for live and inactivated vaccines. • The uptake of vaccination among IBD patients starting biologic therapy is variable. • This QI project aims to perform a retrospective chart review to assess the quality of VPD management in IBD patients in the three months preceding the start of biologic therapy.	• We compared patients' vaccination histories to Canadian Association of Gastroenterology (CAG) guidelines, considering biologic type, provider type (gastroenterologist vs. primary care), and any documented vaccination barriers. • Data was extracted from the local EMR system (Med Access) at Digestive Care and Endoscopy. 



Results and Conclusion

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- Although the project is still underway, out of the 18 patients starting new biologic therapy, all patients were identified as non-immune against at least one VPD on the local EMR.
- However, there was insufficient record of whether patients received the proper vaccinations prior to starting their biologic. This was due to lack of consistency between providers recording new vaccinations.
- Only 1/18 patients had documented vaccinations for hepatitis A, hepatitis B, COVID, and Streptococcus pneumonia.
- Our next steps include developing a strategy for comprehensive digital documentation of vaccination status for patients with IBD.



References

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