

# H1N1 and Vaccination of Rheumatology Patients

Sir,

We read with great interest the recent letter by Naseem S et al on the topic of the uptake of Influenza and Swine flu vaccination in Immunocompromised patients in the UK . We acknowledge their work and their results which show a less than ideal uptake of Influenza and H1N1 vaccinations among Rheumatology patients attending their service in Wales.

From an Irish perspective we question the transferability of the data reported by Naseem et al to an Irish based Rheumatology population where the H1N1 outbreak was well publicised in 2009/2010 . Firstly I would like to highlight that all Rheumatology patient receiving immunosuppressant medications attending our service were actively informed, via postal information, to receive the seasonal and H1N1 vaccine in 2009/2010. The postal information was standardised and provided by the Irish Society for Rheumatology. This was the approach taken by the majority of Rheumatology services in Ireland. In combination with this information patients were advised to contact our nurse-led telephone support service should they have any questions . Unfortunately Naseem S et al do not appear to have taken a similar active approach and therefore we question if higher vaccine uptake levels could be achieved by implying a postal information service. Like Naseem S et al we are currently auditing vaccine uptake among our patients. Initial data, which is still under evaluation, shows a 64% uptake of the H1N1 vaccine, 61% for the influenza vaccine and 9% for the pneumococcal vaccine in 2009.

In addition to actively informing patients of the need for vaccination in 2009 we also question the transferability of data reported by Naseem et al based on the level of anti-TNF therapy among their patients. Only one patient among these patients received anti-TNF therapy, namely etanercept. This equates to approximately 1% (1/91) of inflammatory arthropathy patients (RA, PsA, SNA). Official current Irish data as to the level of anti-TNF therapy among inflammatory arthropathy patients is unavailable however it is estimated that its use is in excess of 50% and may be as high as 70%. Therefore one could postulate that a greater usage of anti-TNF therapy in Ireland may create a more health aware Rheumatology population in Ireland and thus a higher Influenza and H1N1 vaccine uptake as seen by our provisional Rheumatology service data.

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## References

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Comments: ✓