

## Disruption in Pneumococcal Vaccine Administration during Influenza Vaccine Shortage.

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In 2000, much of the influenza vaccine (IFV) was distributed later in the season than usual (*MMWR* 49:39:888-892). We assessed whether the disruption in IFV supply had an effect upon pneumococcal polysaccharide vaccine (PPV) administration. We analyzed period-prevalent ESRD patients from 1999 ( $n = 176,143$ ), 2000 ( $n = 185,217$ ), 2001 ( $n = 194,508$ ), and 2002 ( $n = 205,124$ ). For each year, patients were prevalent at least 90 days before December 31 of the previous year; were alive on December 31 of the previous year; carried Medicare as primary payer and Medicare Part B coverage throughout the one-year follow-up period; and survived throughout the one-year follow-up period. IFV administration was indicated by the presence of CPT code 90657-90660, 90724, or G0008 in either Medicare Part A Outpatient or Medicare Part B claims; PPV administration was indicated by the presence of CPT code 90732, G0009, or J6065.

IFV and PPV Administration Rates (% of Patients)						
<b>IFV: 1999</b>	0.2%	3.6%	32.0%	7.7%	0.9%	44.4%
<b>IFV: 2000</b>	0.6%	0.4%	7.6%	23.0%	10.6%	42.2%
<b>IFV: 2001</b>	1.6%	0.5%	12.3%	27.7%	3.7%	45.8%
<b>IFV: 2002</b>	0.9%	1.9%	38.9%	9.2%	1.4%	52.3%
	<b>Jan-Aug</b>	<b>Sep</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Total</b>
<b>PPV: 1999</b>	1.6%	0.4%	2.6%	1.7%	0.6%	6.9%
<b>PPV: 2000</b>	1.8%	0.3%	0.8%	1.2%	0.8%	4.9%
<b>PPV: 2001</b>	2.2%	0.3%	1.1%	1.4%	0.7%	5.7%
<b>PPV: 2002</b>	2.1%	0.3%	2.1%	1.5%	0.7%	6.7%

From 1999 to 2000, yearly administration rates of both IFV ( $p < 0.001$ ) and PPV ( $p < 0.001$ ) fell significantly. More than 61% of the decline in PPV administration can be attributed to declines among patients who were administered IFV in November or December 2000. The return of typical IFV administration patterns in 2002 also marked the return of typical PPV administration patterns. Because the yearly odds ratio of PPV administration associated with IFV administration ranged from 1.5 [95% CI: (1.4, 1.6)] to 2.8 [95% CI: (2.7, 2.9)] during this period, the evidence suggests that disruptions in IFV supply can negatively affect PPV administration.