

# Vaccines: Responding to Terrors Old & New

ACOI 2021 Clinical Challenges for Hospitalists

May 13: 1:00 – 2:00 PM

Epidemics, Pandemics and the fear of death (or microbes)





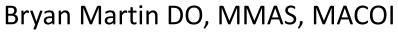
Bryan Martin DO, MMAS, MACOI Interim Chief, Al Division Professor of Medicine The Ohio State University





Bryan Martin DO, MMAS, MACOI No Fiscal Disclosure







President Elect: World Allergy Organization

## **Previously:**

President: American College of Allergy, Asthma & Immunology

Deputy Director: National Vaccine Healthcare Center Network, Washington DC

Director, Walter Reed Regional Vaccine Healthcare Center, Washington, DC

Consultant for Allergy & Immunology to the Army Surgeon General

# Learning Objectives

Upon completion of this activity, you will be better able to

Identify key barriers to vaccine administration in the US

Understand why people fear vaccines

Help advise patient's who have concerns about and reactions to vaccinations

# Mother Nature can't be forgotten: Pandemics are not new

#### **Old Pandemics**

- Small pox
  - Episodic epidemics
  - Not only fatal but disfiguring
- Plague (black plague)
- Spanish Flu (1918)
- Polio
- Yellow Fever

#### 21st Century

• SARS: 2003

• H1N1: 2009

• Ebola: 2014

• MERS: 2015

• Zika: 2015

• COVID 19 (SARS COV-2): 2019

# Major Pandemics

- 541 CE: The Plague of Justinian, centered in Constantinople, the capital of the Byzantine Empire
  - 30-50 million dead (estimated ½ world's population)
  - Yersinia pestis: aka plague
- 1347: Black death
  - Actually plague again, now in Europe
  - Kills 200 million in four years
  - Quarantine is invented in the early 1500's
    - Separate and Isolate the sick

# The Plague lasted a long time...

- London had outbreaks about every 10 years from 1348-1665
  - 40 outbreaks in just over 300 years
  - About 20% of Londoners died with each outbreak
- 1665: the Great Plague
  - 100,000 Londoners die in just 7 months.
  - Public entertainment was banned, victims forcibly shut into homes with red crosses pained on the doors and dead buried in mass graves.

# Plague suit

Invented by Dr. De Lorme (1584-1678): chief physician to King Louis XIII

Nose: ½ foot long shaped like a beak, filled with perfume with only 2 holes, one on each side, but that can suffice to breath

Boots: Morocan goat leather

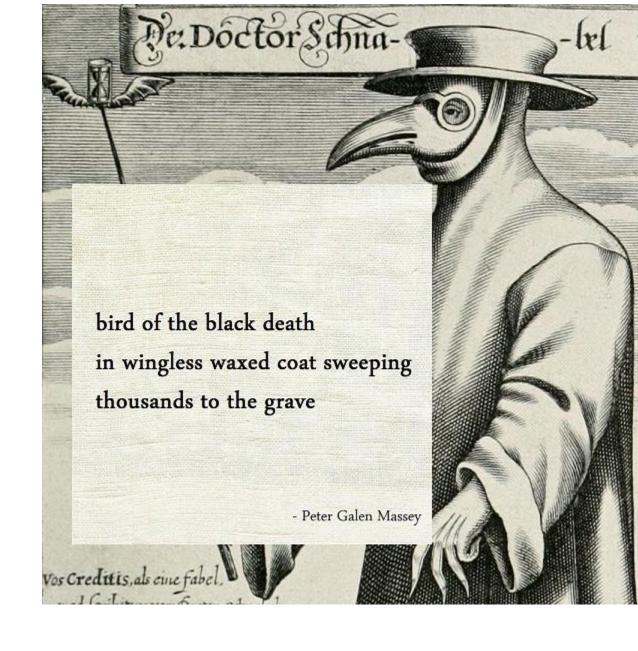
Breaches: attached to the boots

Short sleeved blouse in smooth skin:

bottom tucked into breaches

Hat and gloves: of smooth skin

Spectacles: over the eyes



# Plague COVID - 19





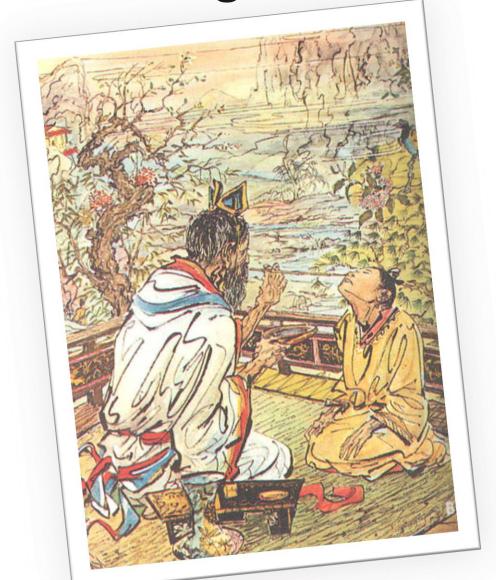
# Smallpox

- "Old World" Disease: endemic to Europe, Asia and Arabia for centuries
  - Persistent menace that killed 30% of those infected and scarred the survivors
  - It is hard to over emphasis the effect of small pox on history.
- When Europeans came to the Americas in the 15 th century, they brought the smallpox virus with them.
  - Indigenous people of modern day Mexico and United states had NO natural immunity and tens of millions died
  - Estimated that 90-95% of the indigenous population of the Americas is killed in the next century
    - Mexico goes from 11 million people pre-conquest to 1 million
- Efforts at protection: insufflation then variolation and finally vaccination.

"Immunization" predates Immunologists!

• Smallpox immunization is over 1000 years old:

- Some evidence of inoculation with infected matter before 200 BC in India or China
- One technique was insufflation:
  - Ground smallpox scab (variola) was insufflated into the nose in early China



## Edward Jenner: 1796

### Father of smallpox vaccination

 Dedicated his life, money, and reputation to spreading the use of vaccination

First vaccination developed in 1796

#### Vaccinates 24 children

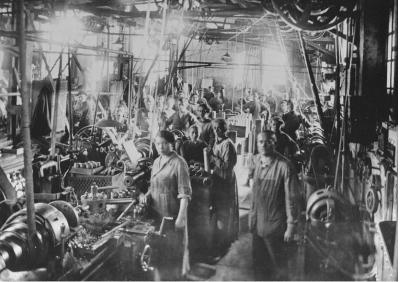
- After several months, exposes them to smallpox (variolation)
- Repeats exposure 5 years later



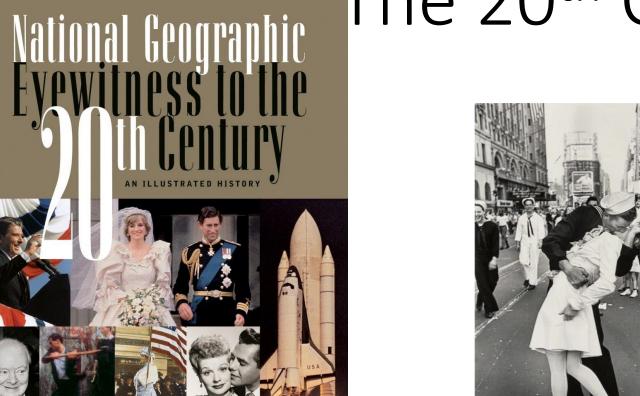
## "The Cow Pock or the Wonderful Effects of the New Inoculation!"

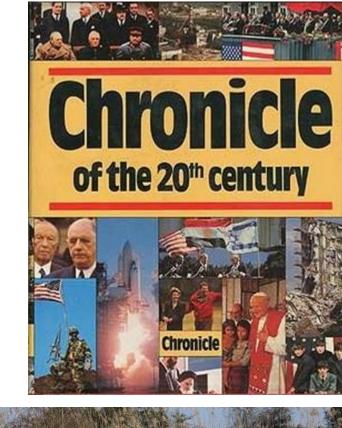


Vide-the Publications of ye Anti-Vaccine Society / J. Gillray, 1802



The 20<sup>th</sup> Century







# 1916 NYC Polio Epidemic

- All eyes are on the war in Europe
- Summer of 1916: NYC is quiet: playgrounds are empty due to a polio epidemic
  - No one knows how the recently identified polio virus is transmitted
  - 72,00 stray cats, suspected of harboring the virus are rounded up and exterminated
- Those who could, fled. Mothers dragged their children into crowds at train stations and ferry docks.
- Families with a case at home were quarantined

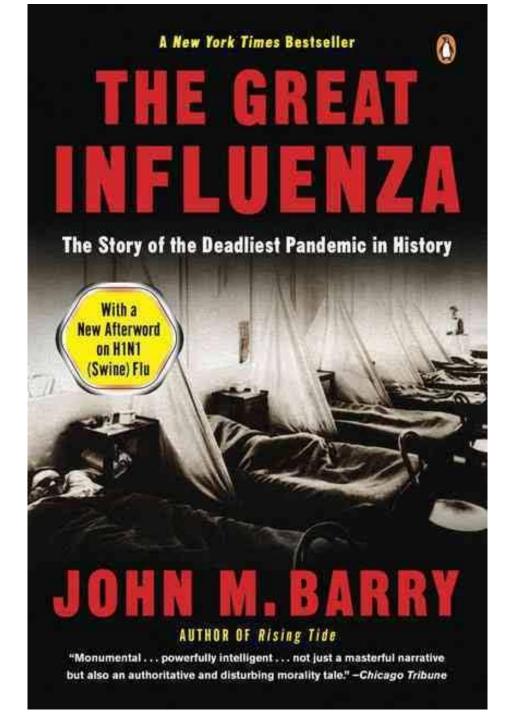
• 75% of those afflicted survived, many condemned to life in a wheelchair, on crutches

or in bed

## 1916 NYC **Polio** Epidemic

- By August every isolation bed in NYC was occupied, many with more than one child
- At the peak of the epidemic a baby died approximately every 2.5 hours
- Fear permeated the city. When the weather turned cool, polio seemed to disappear
- Final toll:
  - Approximately 8,900 infected in NYC
  - 2,400 deaths, with many survivors paralyzed
- Nationwide 27,000 were afflicted, most under 5

# And then: 1918 Influenza



# 1918 Influenza Epidemic

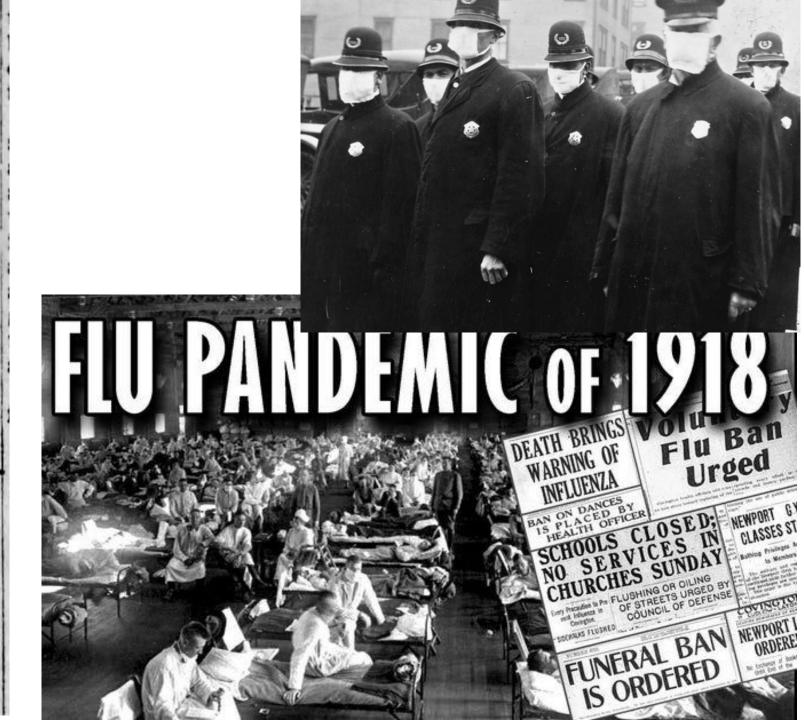
- Fall of 1918 a severe flu was noted, initially in soldiers mobilizing for war in Europe
  - In Camp Devens, outside Boston 12,000 soldiers were affected in September alone
- NYC was a primary embarkation point for the troops and quickly felt the brunt of the epidemic
- Death notices filled the newspapers; photos showed:
  - Stalwart looking young men in uniform
  - Glowing young brides in wedding gowns
- Obituaries listed entire families dead.
- The air reeked of decaying flesh as days passed before the death cart collected the dead.

# CLOSING OF ALL PUBLIC PLACES IS STATE ORDER

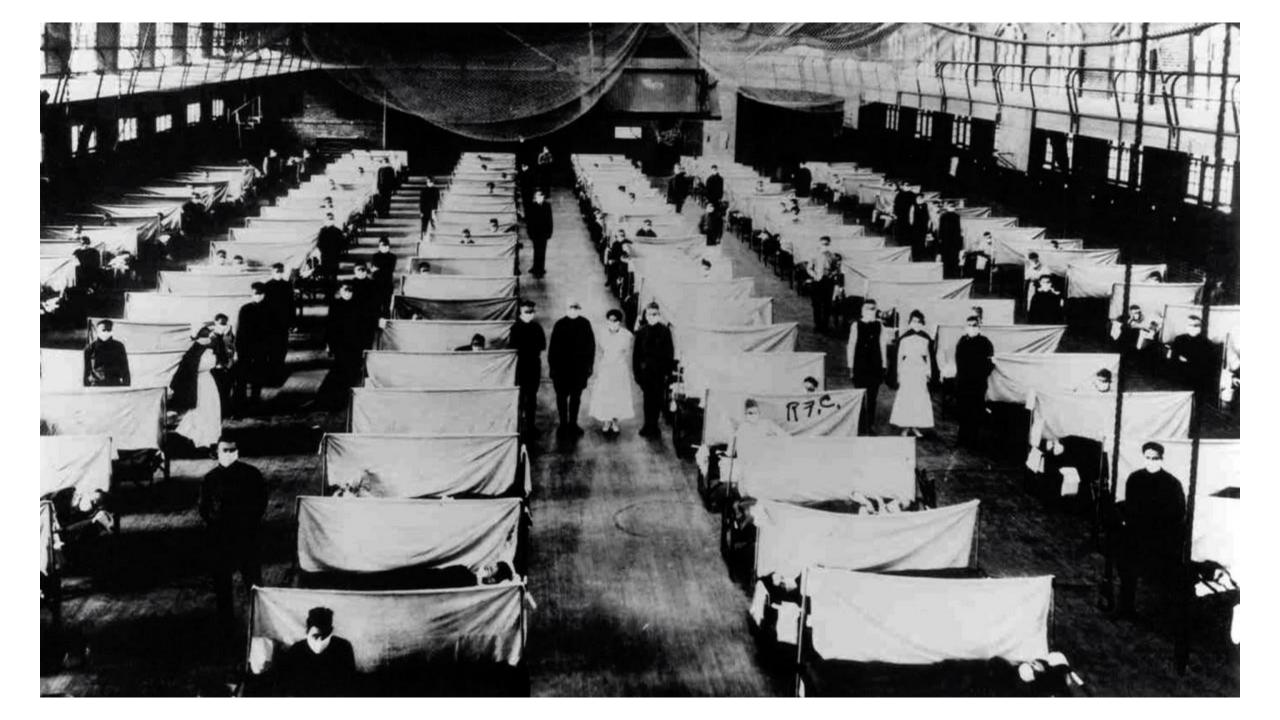
Rapid Spread of Spanish Influenza Leads to Move by Health Secretary.

# SCHOOLS ARE DISMISSED

Other Places Also Come Under Ban Effective Here.







# 1918 Influenza Epidemic

- Desperate to ward off illness, and feeling medicine was unable to help, home remedies proliferated:
  - Wear of camphor balls, Extraction of all teeth, Red peppers, Strychnine, Whiskey, Chloroform
- Spring of 1919 Influenza had run its course
  - 20 million dead worldwide
  - 850,000 dead in the US
  - 33,000 in NYC
- One survivor of these epidemics was a young Jonas Salk, born in East Harlem on October 28, 1914.







## The nose was an issue then, too!



## ALL FLU RECORDS SMASHED In Denver in last 24 hours

And One of Pneumonia—New Regulations
Issued by City as Scourge Rages.

Continued From Page Onc.)

The agreement reached calls for own germs beam

keep the other person's bacalli int. O course, when each person because his own perms beamed in his own mask the other fellow doesn't get the harm

# Police Will Squelch All Halloween Fu

Orders To Disperse Gatherings And Celebrations Tonight Because Of "Flu."

As "joy-killers" and "gloom-spread ers" members of the police force will reign supreme tonight — Halloween usually a time of much merriment and joy to youngsters and grown-ups alike The "flu" has done it!

#### Help Bar Deadly Influenza From Seattle

Don't get into crowds, don't cough or sneeze without using a undkerchief, get plenty of fresh air, and when the symptoms of a cold appear isolate yourself as far as possible from others.

By SURGEON GENERAL RUPERT BLUE.

First there is a chill, then fever, headache, backache, reddening of the eyes, aches all over the body and general prostration. Persons so attacked should go to bed at once and call a physician.

## CHURCHES, SCHOOLS, SHOWS CLOSED

we contin for expended imaginary Put over that

## **AMERICANS AND FRENCH** SMASH FOE

Times were both similar and different!

Smoking with a mask?

#### If You Must Smoke While Wearing Your Influenza Mask

IT is all very well to use an influenza mask. But what if I you want to smoke? Edward T. Duncan has supplied

First, buy two corn-plasters at a drug store. You may not see the relationship between a corn-plaster and the influenza. Wait a minute. Hasn't the plaster an opening for a corn? Well, that hole can be made to fit a cigar or a cigarette. Paste one of the plasters on the inside of the mask and the other on the outside, as shown in the picture. Extend the hole of the outside one clear through the mask. The other plaster is put on merely for beauty; it provides

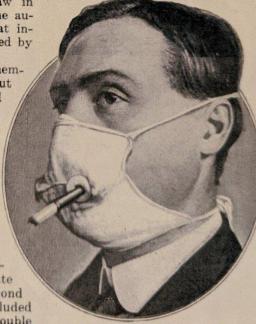
When you draw on your cigarette, all the little germs hovering around take advantage of the chance and try to get in. But when they have gone through the fire of your cigarette they become purified, and are quite harmless by the time they get to your lungs.

When you are not smoking, the open plaster is plugged

with a cork. This is to conform to the law in localities where the authorities think that influenza can be cured by legislation.

You must remember not to stick out your tongue, and to be very careful when you sneeze lest you blow out the cork and let in the germs.

Duncan, the inventor, at first thought of having an outlet for the exhaust smoke. but he found out that such refinements would violate the law. On second thought, he concluded that there was double enjoyment derived from swallowing the smoke a couple of times.



Smoke if you want to, even though you wear an influenza mask. Cornplasters fitted to the mask, inside and out, supply the necessary hole



# To Prevent Influenza!

Do not take any person's breath.

Keep the mouth and teeth clean.

Avoid those that cough and sneeze.

Don't visit poorly ventilated places.

Keep warm, get fresh air and sunshine.

Don't use common drinking cups, towels, etc.

Cover your mouth when you cough and sneeze.

Avoid Worry, Fear and Fatigue. Stay at home if you have a cold. Walk to your work or office.

In sick rooms wear a gauze mask like in illustration.

# 1918 Hospital



# 2021 Hospital





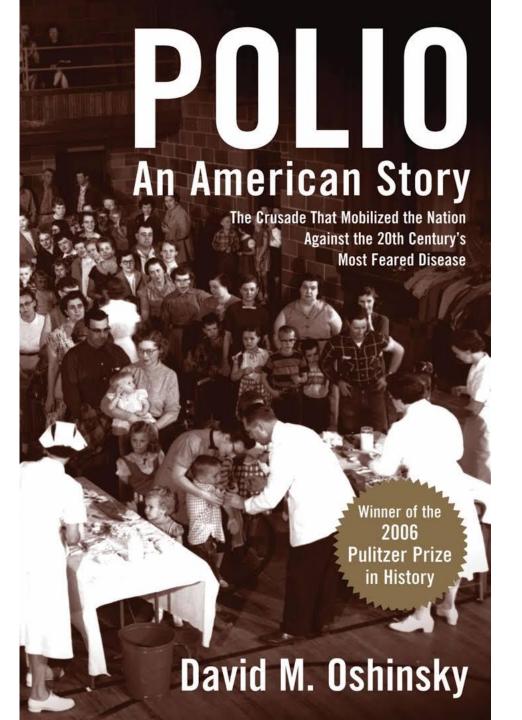
# The Legacy of Polio

http://amhistory.si.edu/polio/howpolio/

Behring Center



## Polio was a Problem



## Let's Review: Polio

Virus identified as cause

FDR contracts at age 39

1908

1916

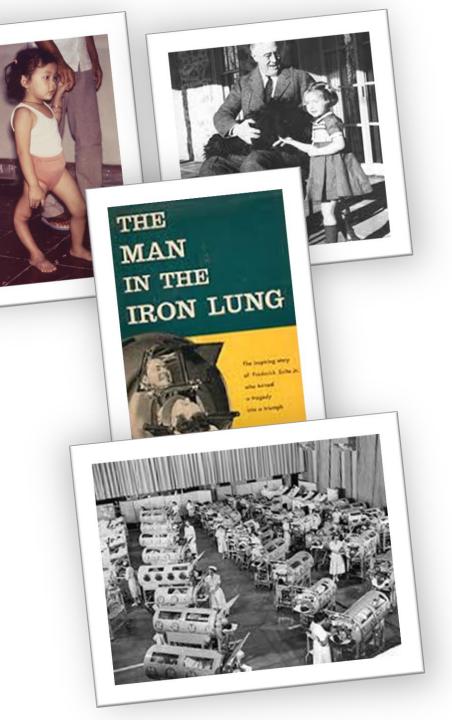
1921

1929

**US** epidemic

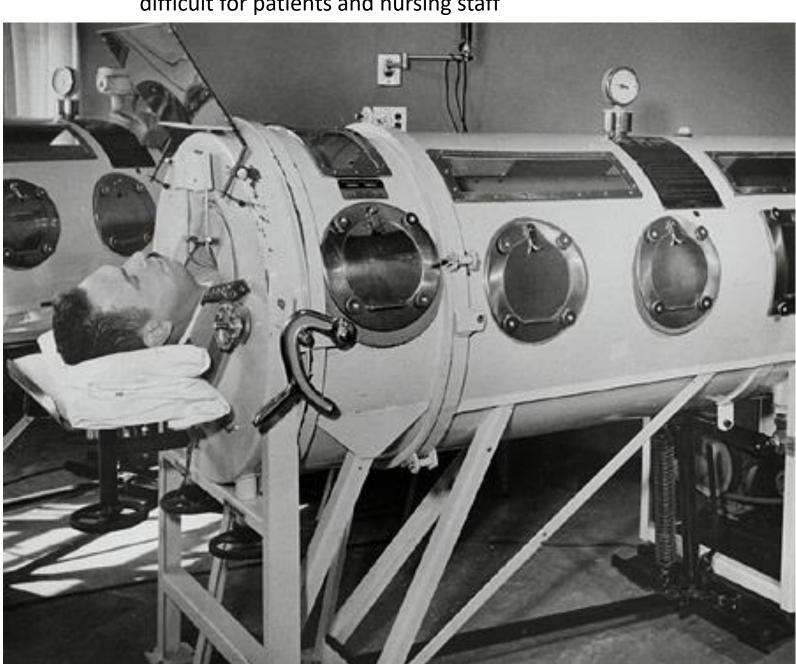


Iron lung developed

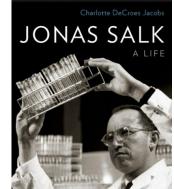


Iron lung: difficult for patients and nursing staff





## June 1936: Jonas Salk, MD



- In medical school Salk becomes intrigued by a seeming paradox
  - It is possible to immunize against tetanus and dipheria using toxins produced by these microbes after they were rendered harmless by chemicals
  - Viral immunizations required actual infection with live virus; vaccines made from killed viruses wouldn't work or would confer only fleeting antibody response
- While in medical school Salk shows that mice injected with inactivated influenza virus would create a measureable antibody response against influenza.

## Polio Vaccine

JOIN THE MARCH DE DIMES

- Everyone is waiting for a vaccine against this paralytic scourge!
- Enter the March of Dimes, born as the National Foundation for Infantile Paralysis (NFIP).
- 1943 the NFIP awarded a grant that included Albert Sabin, MD
- 1954: massive field trial involving 1.8 million schoolchildren known as "polio pioneers"
- Salk vaccine licensed on April 12, 1955.





The Celebration of the President's Birthday for the National Foundation for infantile paralysis







# April 12, 1955

 Announcement that an inactivated (Salk) Polio vaccine would be available for the public

 Many in the microbiology world still felt that an inactivated viral vaccine was not appropriate, and argued that we should wait for the attenuated polio

vaccine

- Argument
  - Polio virus entered through GI
  - Oral polio was best strategy
  - Inactivated only helped when

Polio in the bloodstream



# Pharmaceutical Industry Responds

- Salk does not patent his vaccine
  - "It belongs to the world"
  - Donated "public" money paid for his research
- 6 pharmaceutical companies were licensed to make inactivated polio vaccine
  - Within hours of its approval thousands of cartons of polio vaccine were rushed across the country.
  - Supply could not meet demand
  - Cutter Laboratories
    - Shipped 1 ton of vaccine within 72 hours of licensing

# April 25, 1955 (13 DAYS after licensing)

- Notification that a Chicago infant had been admitted with paralysis of both legs 8 days after polio shot
- More cases of active polio after immunization were reported in the next several days
  - All occurred within 10 days of inoculation
  - All were from vaccine supplied by Cutter Laboratories
  - Between April 18 and 27 approximately 400,000 children had received Cutter vaccine
- Soon secondary cases were reported following vaccination
  - Some of these patients were shedding virus

# Investigation

- Investigation revealed
  - Cutter protocol, while approved, varied from the Salk protocol; shrinking testing for live virus from 5 times during processing, to 2.
  - Precipitation in Cutter vaccine allowed virus to survive.
- All companies had some difficulty with the viral inactivation
  - Lots with active virus were simply discarded
  - No requirement to report tainted lots







THE

# utter

HOW AMERICA'S FIRST POLIO VACCINE LED TO THE GROWING VACCINE CRISIS

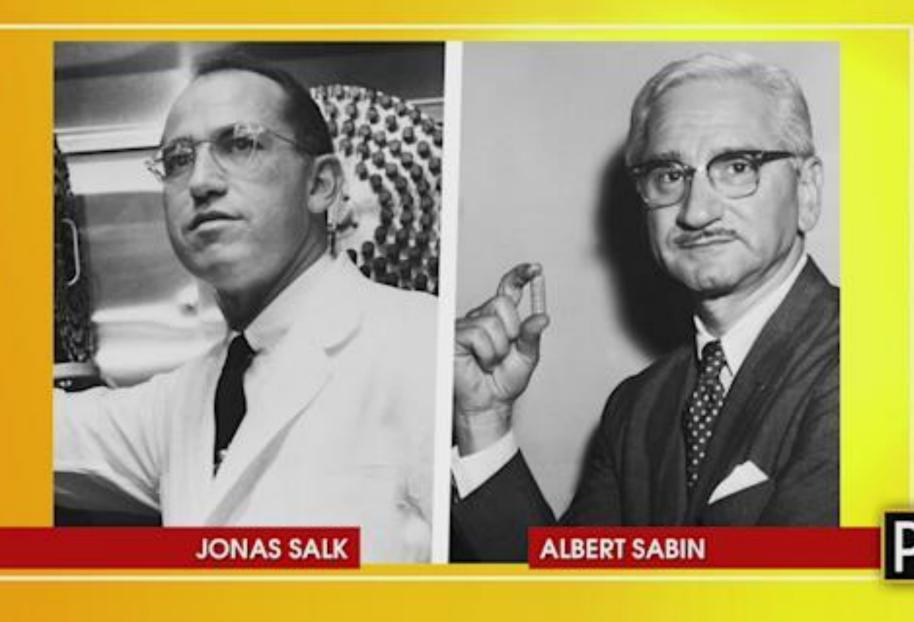
Paul Offit, M.D.

## Result of Cutter incident

- Between April 17 and June 30, 1955
  - 260 individuals contracted polio from the Cutter vaccine
    - 94 among those vaccinated
    - 126 Family members of those vaccinated
    - 40 community contacts of those vaccinated
  - 11 Died
  - 75% suffered some sort of disability
- Millions of children went unvaccinated due to fear of the vaccine affects DISTRUST!
  - July 1955: Massachusetts suffered a polio epidemic
    - Approximately 4,000 contracted polio
    - 1,700 were paralyzed

## Public confusion

- By mid May manufacturers had been inspected and lots of vaccine released, but by this time the public was confused and distrustful
- Patients turned to their family doctors for advice
  - Physicians had received no information on the problem, they knew no more than the public
- Sabin, working on an attenuated live virus vaccine, testified that the Salk vaccine needed to be completely overhauled
  - Attenuated live viral vaccine would be safer and more effective
  - Two polio vaccine "camps:"
    - Inactivated vs live attenuated



# Live attenuated Polio Vaccine

- Sabin continued to work on the live attenuated polio vaccine
- Licensed in 1961, Sabin lobbied to have his "sugar cube vaccine" be the primary vaccine for polio
- Sabin argued that even those who were fully vaccinated with the Salk vaccine should receive the Oral vaccine, as there was no proof Salk vaccine provided lifelong immunity.
- 1962 oral vaccine is the vaccine of choice in US
  - Ease of administration
  - Less cost
  - Skilled nursing not needed









## ALBERT B. SABIN, 1906~1993

Albert B. Sabin developed the oral, live-virus polio vaccine at the University of Cincinnati College of Medicine and Children's Hospital Research Foundation, where between 1939 and 1969, he conducted his most significant research. His vaccine has nearly eradicated the dreaded "infantile paralysis" that killed or maimed millions of children. Dr. Sabin, who considered Cincinnati his home, made many other significant medical discoveries here, particularly in the area of tropical diseases. Presidents and royalty worldwide honored him, including President Bill Clinton who said he was "one of the great heroes of American medicine." His numerous awards include the U.S. National Medal of Medicine (1970), Presidential Medal of Freedom (1986), Medal of Liberty (1986). Order of Friendship among Peoples awarded by the President of the Supreme Soviet of the U.S.S.R.



THE OHIO BICENTENNIAL COMMISSION THE INTERNATIONAL PAPER COMPANY FOUNDATION THE OHIO HISTORICAL SOCIETY 34-31 2003

# TODAY IS

"Knock-Out the Crippler" with

SERVING FROM IT A.M. to 7 P.M. IN 60 LOCATIONS

On May 25th, 84% of the population of Omaha took advantage of the Sabin Oral Sunday Vaccine Program. In this 84%, the vital preschool age groups in the Greater Omaha area were completely covered. BUT DON'T FORGET!! . . . Polio knows no age limitations, it could strike anyone, young or old. Don't take a chance . . . start today with your Sabin Oral Vaccine Program. This is your opportunity to receive greater immunity more quickly against Types I, II, III of the Polio Viruses. Let us all strive for a goal of 100% participation of all the people in Greater Omaha.

"Polio Punch" will be available at any of the SOS Centers listed below. It is not necessary that you go to the center nearest you, however it is recommended that you ds. The locations have been selected following a study of area and population. This will assure the most orderly and even flow through each Center.

#### SOS CENTER LOCATIONS

Foreign Hills North Star St. hologham 4000 Nurth NSA Dr., Inclugion, Natio. Mary Lawrence Works (Mrs. Acres) Months and the North STA St. Mayor Varantilli North Straft St. Description of the last August Tales Elementary - Yalles, Yales, Number 1994 Bear 199 Complete and the Section Co. Servings-2004 Monalife Avenue Dilan Europey-Other, Hele Ferrendam (MESSELE EDG St. Build hills - 1606 Sawaking St. Lathrage of Diff Lathrage St. Berner Windschaft Mingle St. Resident State St. College (Miller) (Miller) March 4046 Str. Changed Committee (19th No. 19 10th St. Paralleles - Sept. Starte State St., E. Constru Laboratoria March 1968 St. Independ Wilson 884 and Warter

Hillian St. and Water Water Nils-4523 Warten Avenue Performance State State State St. William Hilland Till Hamilton St. Providence State Provider Str. Langu-Diller Franklin St. Enforcement of the Mayoria State Str. Barriera - Barriera Vista Sentencett forti tie Arme Mahamata North (8th Annua Congress Weekend Chrismothic and Supposed Street and Person Standard Standards Standards

Control Streets - \$1000 Production Warterly Highwall Principle and Parish Washington-Hill Mayberry St. Section 200 Seeds Stor St. Management of the State State Str. Secure William State and Wildred Barby Reserved Will Search work for

Annie of the Sand State Str. But Chauthi had be to Audiorated Sauce (Med So. Outside - 1881 West Control Book Yespen-190 Food Constraint trailing 199 St. According 10 to Street for But. Affermental Visco St. Addition 4040 South 19th Avenue Seefs Street world fifth and "F" She Milwell High-Miller & Holes Colonian - #Dng and Colonian Str. Ratifice, Nation Address Factor of the GOA Market No. 100 Fig. Configuration Seed Seed Seed See Madagement With Madison St. Pagelline (High-HI)) South Washington Pagelline, Hole: Belleva Jr. High-Missier and Washington Str., Belleva, Hole.



#### AN SOS CENTER IS LOCATED NEAR YOU

But, to speed up the process the administration of the areal receive progress, fill and the pre-registre two flores below and bring it with you. It will see

If an order to will out flow in the process desire after the dead

SARN ORAL POLIC SANDNESS/SON

FOR COMPLETE PROTECTION, NOT AND ALL WOMENS OF YOUR TOWNS WAS

TOTAL GOOD NOT 21

THE RESIDENCE AND IN

TOT I GOOD SPID-GOLIN

We can love that or classifies his management not property.

MONEY AND ADMINISTRATION OF THE ART AND ADMINISTRATION ADMINISTRATION AND ADMINISTRATION ADMINISTRATION ADMINISTRATION ADMINISTRATION AND ADMINISTRATION ADMINISTRATION ADMINISTRATION ADMINISTRATION ADMINISTRATION AND ADMINISTRATION ADMINIS

This Advertisement Sponsored As A Public Service By

Benetisging High-Americans, Rade

Byran Road Co., Inc.

Mutual of Omaha United of Omaha

Northwestern Ball Talephone Co.

Onaha National Bank

Nebrada Irva Electrical Council Members

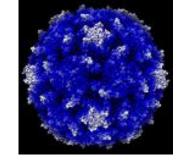
Northern Natural Gas

Wray M. Soott Co.

## Adverse events to live Polio Vaccine

- By June of 1962 reports of paralysis in patients who had received the oral polio vaccine began to surface.
  - These cases were investigated
  - Vaccine Associated Paralytic Polio (VAPP)

# Polio Vaccines Introduction & Uptake



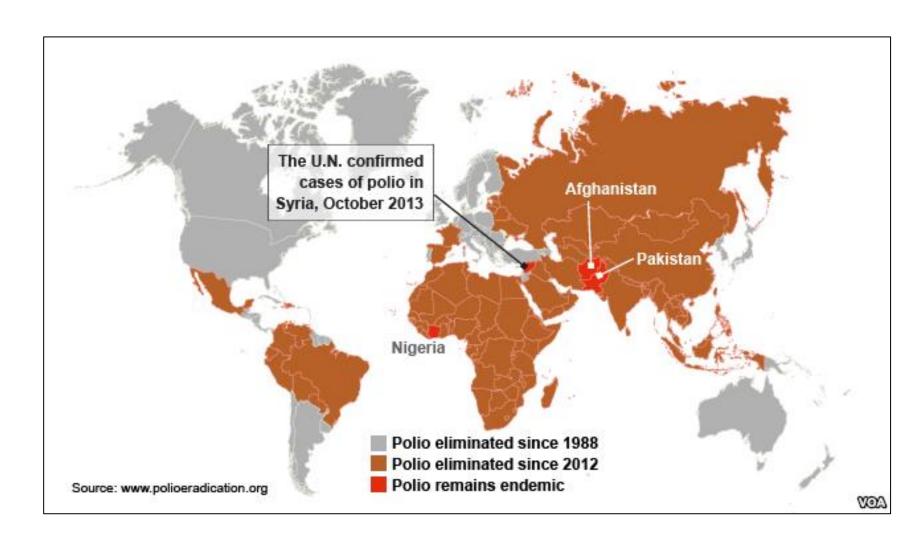
#### IPV

- Injectable inactivated polio vaccine
- Jonas Salk developed in 1953, commercially 1955

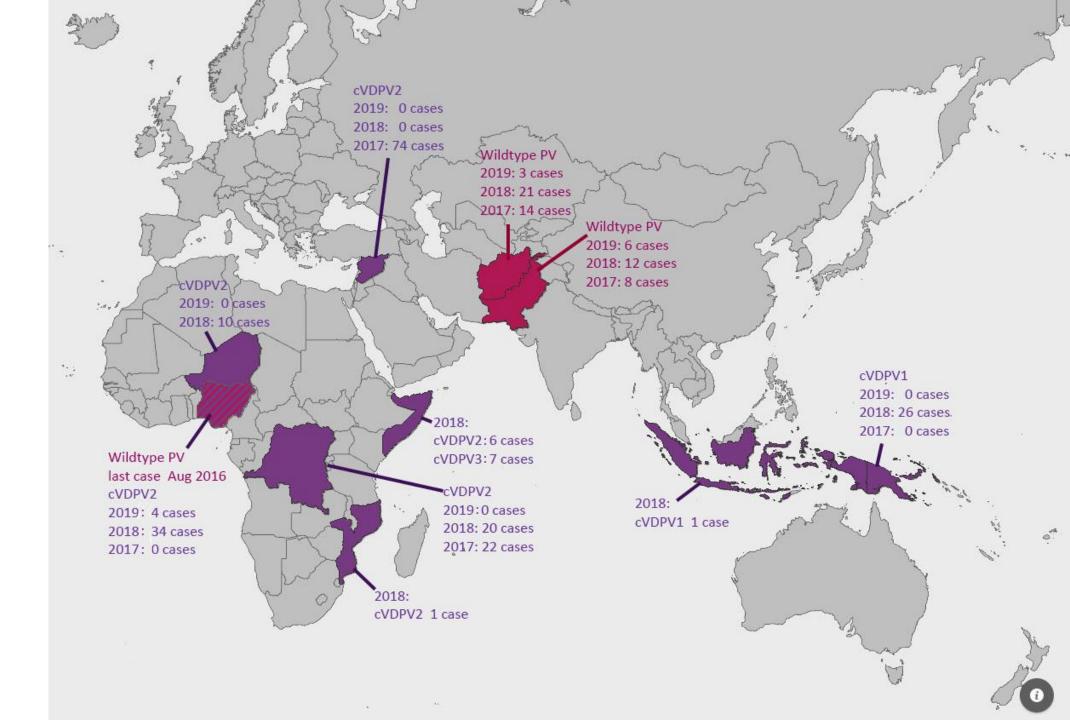
### OPV

- Oral polio vaccine, live attenuated vaccine
- Albert Sabin develops in 1957, commercially 1961
- Easier to give
- 1955-1957 Incidence of polio in US falls by 85-90%
- 1979: last case of wild polio virus in US, last case of smallpox in the world

# There Is Still Danger That Polio Can Return



Upheaval in world makes it worse, not better.



# Poliomyelitis: Vaccine Policy Changes in the **United States**

Oral poliovirus vaccine (OPV)

1961-1989: 9 cases of vaccine-associated paralytic poliomyelitis (VAPP) per year Last imported case

1990-1999: 59 cases of VAPP

> Last case of VAPP

1961

1970

1993

1997 1999 2000

Last case of indigenously acquired wild poliovirus

Policy change from OPV to inactivated poliovirus vaccine (IPV) followed by OPV

> **Exclusive IPV** schedule adopted

# Vaccines in the public eye



# Vaccine Hesitancy

- WHO definition: "...a complex and rapidly changing global problem that requires ongoing monitoring."
- This used to be called the Vaccine NO movement
- This is not a US phenomenon, nor is it new
- Why are people so afraid of something that is so good for them?
  - November 28, 2016 Google Hits
    - Vaccine No: 57,300,000
    - Vaccine Hesitancy: 91,100

# Reported Morbidity, Vaccine-Preventable Diseases, & Vaccine Adverse Events in US

Disease	20th Century Annual Morbidity*	2000†	2010 <sup>1</sup>	% Reduction (2010)
Diphtheria	175,885	4	0	100
Measles	503,282	81	63	>99
Mumps	152,209	323	2612	98
Pertussis	147,271	6755	27,538	86
Polio (wild)	16,316	0	0	100
Rubella	47,745	152	5	>99
Congenital rubella syndrome	823	7	0	100
Tetanus	1314	26	26	96
Invasive HIB disease	20,000	167	240	99
Total	1,064,845	7515	30,484	97.4
Vaccine adverse events	0	13,497‡	~28,000²	††

HIB=Haemophilus influenzae bacteria.

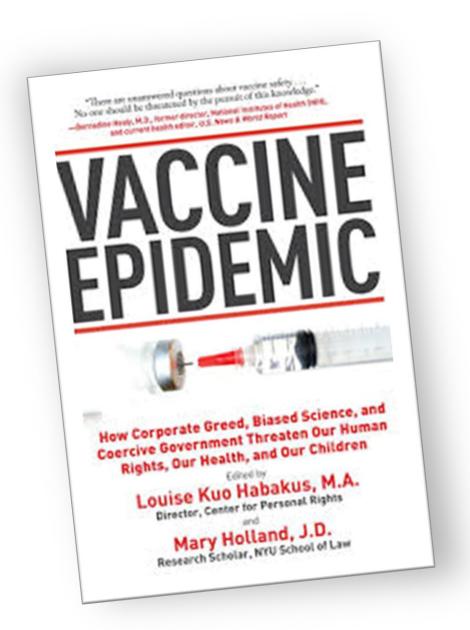


<sup>\*</sup>Maximum cases reported in prevaccine era and year. †Provisional. ‡Adverse events after vaccines against diseases shown on table=5296. ††Estimated because no national reporting existed in the prevaccine era. Adapted from original by Dr. Robert Chen.

<sup>1.</sup> http://www.cdc.gov/mmwr/preview/mmwrhtml/su6004a9.htm. 2. Unpublished CDC data.

# The True Epidemic

- The incidence of vaccine adverse events is approximately equal to the incidence of disease
- ~28,000 adverse events from over 220 million doses of vaccine per year are distributed in the United States



## Vaccines in the Public Mind

# Vaccines are victims of their own success

As incidence and fear of disease go down, fear of vaccine side effects become increasingly disconcerting

## Concerns

Too many routine vaccines

Too many shots at the same time

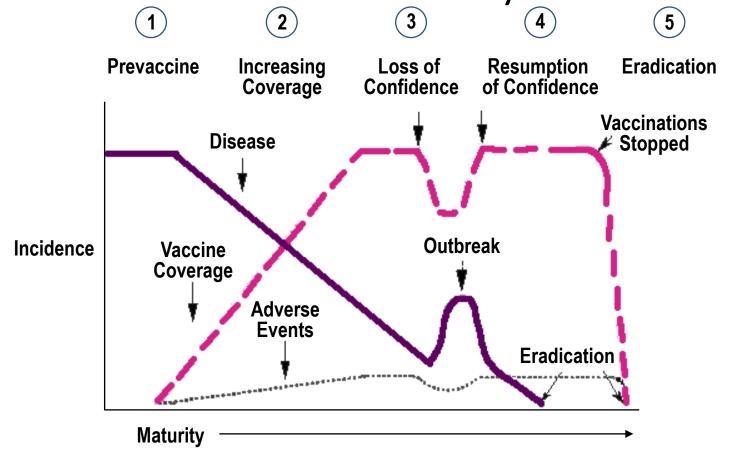
Too many side effects

Vaccine risk > disease risk

"What's in those vaccines?"

Mandatory vaccination

Evolution of Immunization Program and Prominence of Vaccine Safety



## Unintended Dilemma



Fear of Shot Consequences

What is my personal risk for an adverse reaction?





Fear of Disease Consequences

Is the risk of disease real for me?

# Summary

 In spite of their proven efficacy, vaccines continue to be distrusted and underutilized  Clinical guidelines are available for administration of adult vaccinations, but are not always followed

# Summary (cont.)

# Healthcare providers need to work together

- Help patients
   understand
   the need
   Dispel common
   misconceptions
   regarding
   vaccination
- Help make it
   easy to get
   vaccinations
   Increase the poor
   rates
   of adult
   vaccinations

Take every opportunity to ensure patients receive scheduled vaccines

And now...

# Back to Dr. Blackburn

