

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/medical-industry-feature/overcoming-obstacles-to-shingles-vaccination/13553/>

ReachMD

www.reachmd.com
info@reachmd.com
(866) 423-7849

Overcoming Obstacles to Shingles Vaccination

Dr. Caudle:

Welcome to ReachMD. I'm your host, Dr. Jennifer Caudle and joining me again today to discuss how we can overcome obstacles to shingles vaccination is pharmacist, Dr. Christopher Altman, Director of Immunization and Clinical Programs.

Dr. Altman:

Thank you for having me.

Dr. Caudle:

As a pharmacist, one obstacle often faced is a reluctance by patients to get vaccinated for shingles. From your perspective, how should we approach talking to patients 50 years and older about their risk for shingles?

Dr. Altman:

Stress to patients that, as they get older, they're more likely to get shingles. That's because their immune system declines as they age.¹⁻³ It doesn't matter how they feel, how much they exercise, or how good they are with their diet, they're still at risk for shingles.^{1,2,4} Patients aged 50 and older who have had chickenpox face an increasing risk, unless they've been vaccinated against shingles.^{1,3-5}

Dr. Caudle:

Another potential obstacle to vaccination may be patient concerns about the cost. So how should we talk to these patients?

Dr. Altman:

Whether they have private insurance or Medicare, the shingles vaccine is typically covered for most adults.⁶⁻⁸ Let your patients know you'd be happy to see if their insurance will pay for the vaccine, and it will only take a minute.

Dr. Caudle:

And how do you guide a patient who may be in a hurry and is concerned they don't have enough time to get the vaccine?

Dr. Altman:

Let your patients 50 years and older know they can receive their shingles vaccine right at the pharmacy.⁹ If they don't have time right then, schedule an appointment for them. The shingles vaccine can also be given by their primary care physician during their next office visit.

Dr. Caudle:

For those of you who are just tuning in, you're listening to ReachMD. I'm your host, Dr. Jennifer Caudle and today I'm speaking with Dr. Christopher Altman about overcoming obstacles to shingles vaccination. Before we continue the conversation on SHINGRIX vaccination for adults, let's review some information about SHINGRIX.

ReachMD Announcer:

Indication: SHINGRIX (Zoster Vaccine Recombinant, Adjuvanted) is a vaccine indicated for prevention of herpes zoster (shingles) in adults aged 50 years and older.

SHINGRIX is not indicated for prevention of primary varicella infection (chickenpox).

Important Safety Information: SHINGRIX is contraindicated in anyone with a history of a severe allergic reaction, for example, anaphylaxis, to any component of the vaccine or after a previous dose of SHINGRIX. There's additional Important Safety Information at the end of this video and at SHINGRIX hcp dot com. Please see the full Prescribing Information for SHINGRIX on this website.

Dr. Caudle:

Dr. Altman, let's discuss another potential obstacle. How would you counsel patients who want to check with their doctor prior to getting vaccinated with SHINGRIX?

Dr. Altman:

Once you've informed an appropriate patient that they're at risk for shingles, offer to make a call to their doctor for them. In most cases, you should be able to get an okay from their doctor on the spot.

Dr. Caudle:

And given the obstacles we've discussed, are there specific strategies you use to communicate with your patients about the shingles vaccine?

Dr. Altman:

I start by explaining to them that shingles is caused by the same virus that causes chickenpox, so I let my patients 50 years and older know that if they've ever had chickenpox, they could get shingles.^{1,4,5} And if they do get shingles, I explain that it's a painful, blistering rash that can be described as debilitating.¹ Since pharmacists often interact with patients at risk for shingles, it's important to inform appropriate patients 50 years and older that it's time to receive the shingles vaccine.⁹

Dr. Caudle

Before we close do you have any additional advice for pharmacists when it comes to addressing patient concerns and questions about the shingles vaccination?

Dr. Altman:

Remind patients 50 years and older that SHINGRIX is one way they can be proactive about their health. Tell your patients there are lots of things they can't prevent as the age, but they can do something about shingles, get vaccinated.⁹

ReachMD Announcer:

Here's additional Important Safety Information for SHINGRIX.

Review immunization history for possible vaccine sensitivity and previous vaccination-related adverse reactions. Appropriate medical treatment and supervision must be available to manage possible anaphylactic reactions following administration of SHINGRIX.

In a postmarketing observational study, an increased risk of Guillain-Barré syndrome was observed during the 42 days following vaccination with SHINGRIX.

Syncope, or fainting, can be associated with the administration of injectable vaccines, including SHINGRIX. Procedures should be in place to avoid falling injury and to restore cerebral perfusion following syncope.

Solicited local adverse reactions reported in individuals aged 50 years and older were pain (78%), redness (38%), and swelling (26%).

Solicited general adverse reactions reported in individuals aged 50 years and older were myalgia (45%), fatigue (45%), headache (38%), shivering (27%), fever (21%), and gastrointestinal symptoms (17%).

The data are insufficient to establish if there is vaccine-associated risk with SHINGRIX in pregnant women.

It is not known whether SHINGRIX is excreted in human milk. Data are not available to assess the effects of SHINGRIX on the breastfed infant or on milk production and/or excretion.

Vaccination with SHINGRIX may not result in protection of all vaccine recipients.

Dr. Caudle:

Great, and thank you so much for those helpful insights. As we come to a close, I'd like to thank my guest, Dr. Christopher Altman, for talking to us about overcoming obstacles to shingles vaccination.

References:

1. Harpaz R, Ortega-Sanchez IR, Seward JF. Prevention of herpes zoster: recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR*. 2008;57(RR-5):1-30.
2. Kimberlin DW, Whitley RJ. Varicella-zoster vaccine for the prevention of herpes zoster. *N Engl J Med*. 2007;356(13):1338-1343.
3. Levin MJ. Immune senescence and vaccines to prevent herpes zoster in older persons. *Curr Opin Immunol*. 2012;24(4):494-500.

4. Kilgore PE, Kruszon-Moran D, Seward JF, et al. Varicella in Americans from NHANES III: implications for control through routine immunization. *J Med Virol*. 2003;70(suppl 1):S111-S118.
5. Kawai K, Gebremeskel BG, Acosta CJ. Systematic review of incidence and complications of herpes zoster: towards a global perspective. *BMJ Open*. 2014;4(6):e004833
6. Data on file, GSK.
7. Managed Markets Insights & Technology, LLC, Database as of [October 2022].
8. Kirchhoff, SM. Selected health provisions of the Inflation Reduction Act. Congressional Research Service. Accessed November 16, 2022. <https://crsreports.congress.gov/product/pdf/IF/IF12203>
9. Prescribing Information for SHINGRIX.

Trademarks are property of their respective owners.



©2022 GSK or licensor.
SGXOGM220062 December 2022
Produced in USA.