



## European Academy of Paediatrics Research in Ambulatory Settings Network

### Survey on Refusal to Vaccinate

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#### **Background:**

Refusal to vaccinate (RtV) has been identified as an increasing problem in some countries. Most of the evidence addressing this issue comes from the U.S., where rates of refusal are rising. Concern about safety is the principal reason why parents refuse immunizations. Higher income, well educated parents, white race, a belief in a low severity of vaccine preventable diseases are additional characteristics common among those who refuse vaccinations.

#### **Aim of our study:**

To estimate the burden of RtV in European countries, and to describe European primary care paediatricians' perceptions and attitudes on vaccination refusal in their practices.

#### **Methods:**

A web based questionnaire with items covering several aspects of refusal to vaccinate was sent to 395 paediatricians, all members of the primary care research network of the European Academy of Paediatrics (EAPRASnet).

#### **Results:**

A total of 380 paediatricians from 23 countries answered the questionnaires, of which 342 (90%) were considered valid. 64% of respondents were 50 yrs or older, with almost equal gender distribution. Most (71%) paediatricians considered any form of RtV as a minor or negligible issue. The rate of total vaccination refusal was estimated to be less than 1% by 86% of the paediatricians. Partial refusal or alternative schedules was rated as less than 1% in 47% of practices and as 1-5% in 38% of practices. MMR and HB were the most frequently refused vaccines. Fear of adverse events was the most common argument for vaccination refusal. Half of paediatricians feel that refusal "harms" the relation between them and the families. Only 35% of the paediatricians ask families to sign a declaration of refusal, and 86% document it in the medical record. Strategies used by paediatricians to approach this problem were "soft line" (68%), "hard line" (17%) and mixed (15%). Most of the paediatricians (64%) think that care should continue despite refusal, while 9% consider families should switch to another paediatrician.

#### **Conclusions:**

Total vaccine refusal is considered a minor problem by primary care paediatricians, but refusal of some vaccines and request of alternative schedules is more common. MMR and HB are rated as most frequent among refused vaccines. Fear of adverse events is the commonest argument. The majority of paediatricians showed a preference for a "soft line" approach when dealing with this problem. Though half admit that refusal harms the relation between them and the family, most do not consider refusal as a justifiable reason for dismissing patients or referring them to another health care provider. Paediatricians should be trained and prepared to adequately manage vaccination refusal.