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Factors contributing to pneumococcal, COVID-19 and influenza vaccine uptake among people living with HIV in Belgium



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Background

People living with HIV remain at risk of complications from vaccine-preventable diseases despite antiretroviral therapy. This study aims to investigate pneumococcal, COVID-19, and influenza vaccine coverage in people living with HIV in Belgium and identify factors associated with vaccine uptake.



 Single center retrospective study

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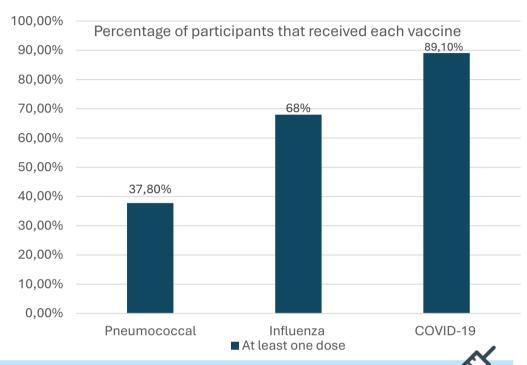
Vaccines that were studied :

- -Pneumococcal conjugate vaccines (PCV13, PCV20)
- -Pneumococcal polysaccharide vaccine (PPV23)
- -Influenza vaccines
- -COVID-19 Vaccines

Conclusion

While COVID-19 vaccine uptake is high, vaccination coverage for influenza and pneumococcal disease remains insufficient. Vaccine uptake was primarily associated with age, nadir CD4, and number of consultations. Vaccine adherence was particularly low among intravenous drug users. Those findings are consistent with other existing studies

Results



Factors associated with higher vaccine uptake



Age (>50) OR 2,66 (1.2 - 6.4) p= 0,027 Number of consultations OR 1,2 (1.1 - 1.4) p = 0,0004

Factor associated with lower vaccine uptake





IV drug use OR 0,12 (0.028 - 0.59) p= 0,004 Nadir CD4 OR 0,99 (0.998, 0.9999) p = 0,037

about vaccine coverage among PWH^{1,2}. Addressing the financial barriers to vaccination and implementing targeted educational campaigns and reminder systems could enhance vaccine uptake.

References

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> BMI OR 1,0 (0,96 – 1,1) p = 0,46

Smoking status OR 1,19 (0,54 – 3,01) p = 0,682

Gender OR 1,1 (0,53 – 2,1) p = 0,88

Factors that had no significant impact on vaccine uptake



ADDITIONAL KEY INFORMATION

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