Talk to your cardiovascular patients about the flu shot

Why talk about the flu shot?

- Over 91,000 Americans a year die from heart attacks and strokes triggered by the flu.
- There is a surge in cardiovascular mortality each flu season during high flu activity.
- The American Heart Association (AHA) and The American College of Cardiology (ACC) recommend an annual flu vaccine in injection form for cardiovascular patients “with coronary and other atherosclerotic vascular disease”.
- The AHA and ACC equate “influenza vaccination with cholesterol screening, blood pressure, and other modifiable risk factors” as secondary prevention.
- Post-acute coronary syndrome patients who received flu vaccination saw a significant reduction in major adverse cardiac event—9.5 percent vs 19.3 percent in unvaccinated patients.
- The Centers for Disease Control and Prevention (CDC) indicates that less than half of Americans with high-risk cardiac disease receive the flu vaccine.

Lead by example – get your flu shot.

How can you improve flu vaccination rates in patients with cardiovascular disease?

- Recommend a flu shot - studies have shown that a strong recommendation by providers increases flu vaccination rates.
- Have the vaccine readily available during cardiology and other clinic visits.
- Incorporate vaccinations as a routine part of patient care.
- Talk with your patients about flu and flu vaccine.
- Encourage your patients to learn more at the Veterans Health Library or on the VA flu website.

Reduce your patients’ risk of death by heart attack and stroke by up to 50%.

Learn more:

Persons at High Risk for Flu Complications – **Prevention and Control of Seasonal Influenza with Vaccines,** Recommendations of the Advisory Committee on Immunization Practices — United States, 2016–17 Influenza Season, *Recommendations and Reports* / August 26, 2016 / 65(5);1–54;

www.cdc.gov/mmwr/volumes/65/rr/rr6505a1.htm?s_cid=rr6505a1_w#persons_risk_medical_complications

Influenza and Cardiovascular Disease: A New Opportunity for Prevention and the Need for Further Studies; Mohammad Madjid, Morteza Naghavi, Silvio Litovsky and S. Ward Casscells. Circulation. 2003;108:2730-2736; originally published online November 10, 2003; doi: 10.1161/01.CIR.0000102380.47012.92.

http://circ.ahajournals.org/content/108/22/2730

Association Between Influenza Vaccination and Cardiovascular Outcomes in High-Risk Patients: A Meta-analysis; Udell JA, Zawi R, Bhatt DL, et al. JAMA. 2013;310(16):1711-1720. doi:10.1001/jama.2013.279206.

http://jamanetwork.com/journals/jama/fullarticle/1758749

Influenza Vaccination as Secondary Prevention for Cardiovascular Disease: A Science Advisory From the American Heart Association/American College of Cardiology; Matthew M. Davis, Kathryn Taubert, Andrea L. Benin, David W. Brown, George A. Mensah, Larry M. Baddour, Sandra Dunbar, Harlan M. Krumholz. Journal of the American College of Cardiology Volume 48, Issue 7, 3 October 2006, Pages 1498–1502.

www.sciencedirect.com/science/article/pii/S0735109706022200

Recommend, as appropriate, pneumococcal vaccine for chronic heart disease patients, including heart failure, and cardiomyopathies.

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