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Knowledge, attitude and practices of general practitioners and physician assistants regarding vaccinations in the elderly in Germany

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Background and Aim: Despite official recommendations and reimbursement by statutory health insurances, the coverage of vaccinations in persons of ≥ 60 years in Germany is not satisfactory. Advices of General Practitioners (GP) and Physician Assistants (PA) are known to influence vaccination uptake especially in this target group, alluding to the need to know more about possible predictors of advice-giving behavior in health care personnel to develop measures to improve it.

Methods: We conducted a nationwide survey, sending one questionnaire on vaccination related knowledge, attitude, and advice-giving behavior as well as other vaccination related practices for GP and one for PA to 4995 GP practices in Germany (netto-sample) to be returned by fax or prepaid mail. We performed multivariable logistic regression, defining the outcome as not advising at least one officially recommended vaccination at least once in the absence of a contraindication.

Results: of 4995 practices, 813 (16%) returned at least one questionnaire, equaling 774 GPs (16%) and 563 PAs (11%). Twenty-one percent of all participants stated to have at least once not advised an officially recommended vaccination to elderly patients with significantly less PAs than GPs declaring this ($p < 0.001$); the most common explanation given by both professions was having forgotten to advise. Most respondents declared to know (92%) and to trust (90%) the official recommendations, with significantly more GPs stating both ($p < 0.001/p = 0.005$). Multivariable predictors included the practice being located in West Germany (OR: 2.91, 1.72-4.92), and not advising routinely at regular intervals (OR: 2.8, 1.5-5.3).

Conclusions: in general, the subjective knowledge of and attitude towards officially recommended vaccinations for the elderly among German GPs and PAs are satisfactory. Since the main reason to not advise vaccinations among our study population is forgetting to do so rather than disagreeing with the recommendation we recommend an improved implementation of recall-systems.