The Impact of a Pharmacist-Led Meningitis Vaccination Program for the College-Aged Population in Texas

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Background

• In the United States, an estimated 1,400 - 2,800 cases of meningitis occur annually, causing severe illness and death. College students, especially those residing in dormitories, are at increased risk for meningococcal disease.1
• In May 2011, the state of Texas issued a mandate requiring all entering college students younger than 30 years of age to be immunized for meningitis before the 2012 semester.2
• A national community pharmacy implemented a program offering meningitis vaccine services in over 700 locations throughout the state to help students comply with the mandate.

Methods

• The program entailed development of educational and marketing materials, training of personnel, arrangement of standing orders, and initiation of an “all-day, everyday” offering of the meningitis vaccine.
• The study population included patients aged 16 to 29 years, with a meningitis vaccination administered in Texas, and a date of service from January 2011 through January 2012.
• We analyzed Walgreens pharmacy claims data to calculate the total number of meningitis vaccinations administered, and the penetration of the program into medically underserved areas.

Results

• The pharmacy provided 16,604 meningitis vaccinations to the study population. The number of vaccinations increased dramatically year-over-year from 41 in January 2011 (pre-mandate) to 11,229 in January 2012 (post-mandate).
• The proportion of meningitis vaccinations provided in medically underserved areas increased from 12.2% in January 2011 to 39.6% in January 2012 (p<0.01).

Timeline of State Mandate & Meningitis Program

Meningitis Vaccinations Administered to Study Population in Medically Underserved Areas (MUAs)

Conclusions

• This pharmacist-led meningitis vaccination program expanded convenient access to immunization services to assist college students in complying with a Texas state mandate.
• The significant increase in the proportion of vaccinations provided in medically underserved areas demonstrates that the program provided vaccine services where most needed.
• The above findings illustrate how community pharmacies can support state governments and improve public health.

References:
2 Davis et al. "De. S.B. 1107. In: Board THEC, ed. 82R9026 KSD-F2011."