Hepatitis B Immunization Uptake amongst Medical Laboratory Staffs in Turkana County

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4TH IPNET-K SCIENTIFIC CONFERENCE AT ENASHPAI RESORT-NAIVASHA



Background

- > Hepatitis B Virus infection poses a global public health threat
- > Horizontal transmission in healthcare setting
- > HCWs exposed annually -5.9%
- >HCWs infection four-fold higher than general population

Objectives

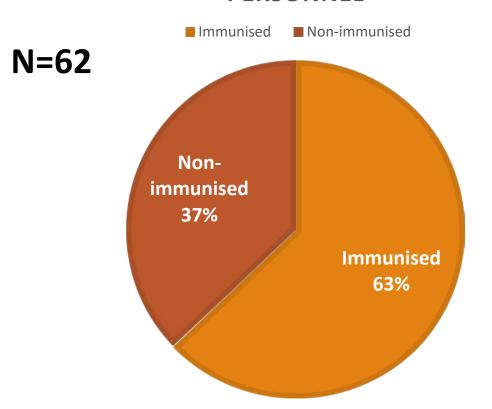
- >To determine immunization status of laboratory personnel
- To know the number of staffs who had NSI in the last six months
- To identify the number of staffs who checked their postimmunization serological titres.
- > To know the most common reason for not immunizing

Method

Self-administered questionnaires were distributed to all laboratory staffs

Results and Discussion

IMMUNE STATUS OF THE LABORATORY PERSONNEL



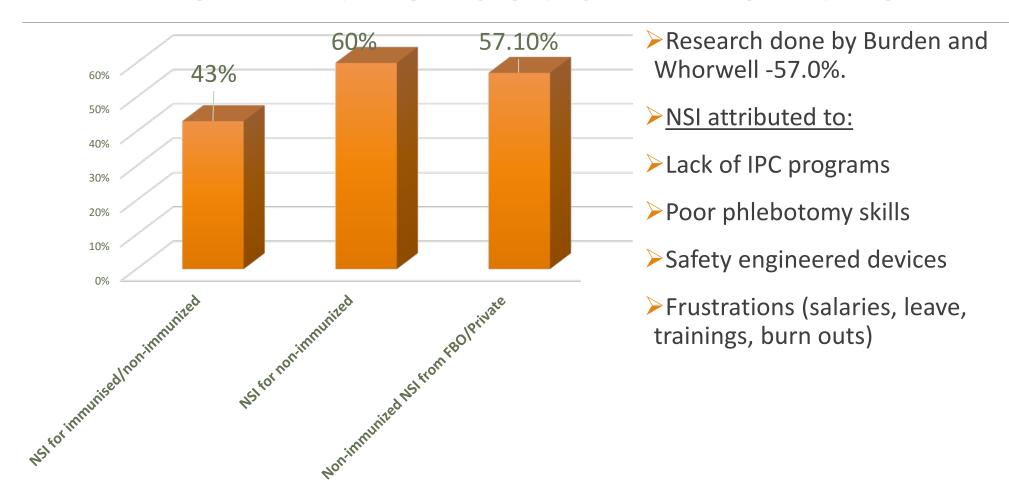
CONSISTENT WITH:

➤ Prospective study at India Institute of Medical Sciences - 62%.

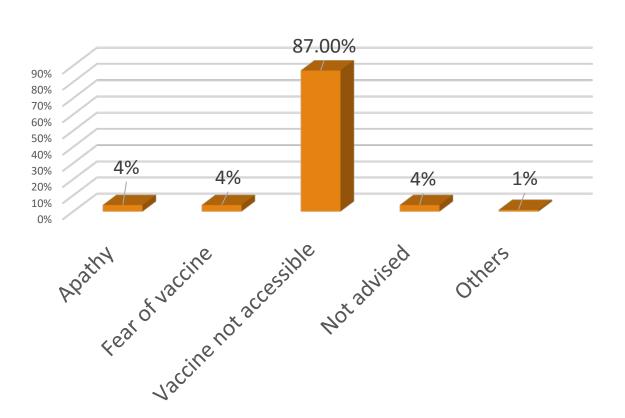
INCONSISTENT WITH:

Study at Johannesburg showed 30.6% of HCWs were immunized.

NSI in the last six months

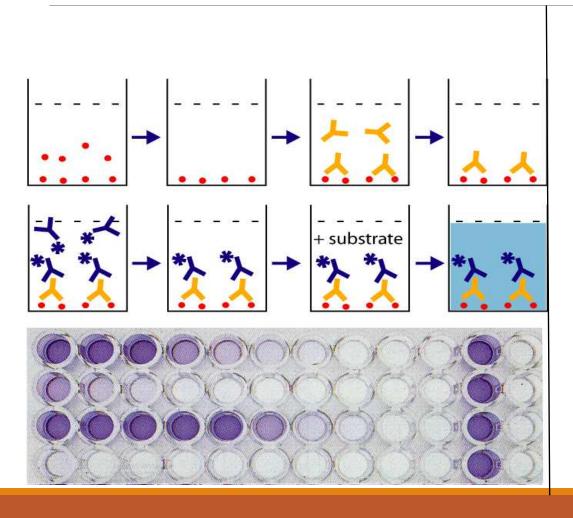


Reasons given for not receiving the vaccine



- ➤ Poor accessibility attributed to:
- > Vaccine distribution to all facilities
- ➤ Distance and terrain of the region
- ► Restricted only to staffs in CRH
- ➤ Cost implication if accessed OTC
- ➤ Not a must during recruitment process
- ► Educational campaigns

Post Serological Titers



- > 100% of the staffs did not check their post-immunization serological titres.
- ➤ Done after 1-2 months —CDC
- ► Identifies Responder and Non-responder

Reasons for not doing post-serological titres:

- Ignorance
- Incomplete vaccination
- Non-availability of checking facilities
- Cost implication

Conclusion and Recommendation

Conclusion

- Poor compliance to HB vaccination for FBO/private facilities
- Laboratory personnel not protected due to:
- ✓ lack of structured health promotion programmes
- ✓ Poor budget allocation
- ✓ lack of management support
- ✓ poor health and safety standards
- ✓ Limited access to occupational health care services

Recommendation

- Vaccine should be accessible, available

and affordable

- Implementation of IPC programs
- Post immunization serological titres done
- > Educational campaigns through CMEs,
 - OJT and workshops

Thank You

- **♦** MOH
- **♦ IPNET-K**
- ♦ CMLC-Turkana
- ♦ Doris Bota
- ♦ All Conference

Participants

