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Karafillakis, E; Larson, HJ; (2018) The paradox of vaccine hesitancy among health-care professionals. *Clinical microbiology and infection*. ISSN 1198-743X DOI: <https://doi.org/10.1016/j.cmi.2018.04.001>

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Accepted Manuscript

The paradox of vaccine hesitancy among healthcare professionals

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PII: S1198-743X(18)30326-4

DOI: [10.1016/j.cmi.2018.04.001](https://doi.org/10.1016/j.cmi.2018.04.001)

Reference: CMI 1279

To appear in: *Clinical Microbiology and Infection*

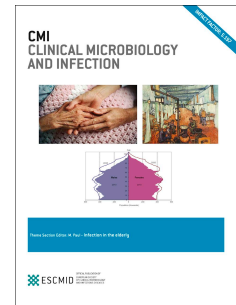
Received Date: 1 February 2018

Revised Date: 1 April 2018

Accepted Date: 3 April 2018

Please cite this article as: Karafillakis E, Larson HJ, The paradox of vaccine hesitancy among healthcare professionals, *Clinical Microbiology and Infection* (2018), doi: 10.1016/j.cmi.2018.04.001.

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Invited Commentary

The paradox of vaccine hesitancy among healthcare professionals

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15 **Commentary**

16 The article “General practitioners’ perceptions of vaccination controversies: a French
17 nationwide cross-sectional study” by Le Maréchal et al in this issue of *Clinical Microbiology
18 and Infection*¹ highlights a finding that is becoming increasingly common across studies
19 globally. Paradoxically, while healthcare professionals (HCPs) remain among the most
20 trusted information source by the public, some of them are losing confidence in vaccines².
21 While the number of hesitant HCPs remains low compared to an overall majority of
22 professionals who support vaccination, their proportion and motives vary from one country to
23 the next, and their influence on patients can be substantial. In France, for example, the
24 proportion of general practitioners favourable to vaccination decreased from 85% in 1994 to
25 77% in 2009³. Research shows that, despite a broader environment of distrust, the public
26 still trusts their healthcare professionals (HCPs), whether general practitioners, pharmacists,
27 or paediatricians⁴. Given their influential role, HCPs who lack confidence in vaccination risk
28 jeopardising attempts to improve public confidence, and may also be less likely to
29 recommend vaccination to patients as well as decide not to vaccinate themselves and/or
30 their children¹.

31 The research which has been conducted on reasons for HCP vaccine hesitancy confirms
32 that confidence-building needs attention¹. The nature of HCP concerns, among those who
33 are hesitant, are similar to those of their patients. The similarity of issues around the safety
34 and effectiveness of vaccines could indicate that some HCPs are influenced by the fears,
35 stories and accounts of their patients⁵. Many HCPs are also seeking information online
36 about vaccination, either to find more “objective” information about concerns or, as Le
37 Maréchal’s study found, to better understand their patients’ fears and concerns. This
38 exposure to questioning and ambiguous information available online, especially in the
39 context of a post-fact era, can influence HCP’s own confidence in the safety and benefits of
40 vaccination.

41 New communication technologies, such as social media, have exacerbated the spread of
42 public as well as HCP concerns about vaccination. Examples of cases where social media
43 platforms – such as Facebook, YouTube, or WhatsApp – have contributed to vaccine
44 confidence crises are as widespread as they are varied. They include, for instance, the
45 worldwide spread of anxieties about human papillomavirus vaccination side effects through
46 YouTube, the propagation of documentaries such as Andrew Wakefield’s film “*Vaxxed, the*
47 *film they don’t want you to see*”, and negative WhatsApp campaigns against measles-rubella
48 vaccination in South India – all amplifying public anxiety around vaccines.

49 Re-establishing HCPs’ trust in vaccination is a challenging and time-consuming undertaking.
50 Although interventions designed to improve confidence in vaccination often focus on
51 communication between HCPs and their patients⁶, it is clear from the emerging research,
52 such as the Le Maréchal study, that more communication and trust building is needed with
53 HCPs themselves.

54 In terms of building HCP confidence it is important to understand, as with parents, whether
55 HCPs respond better to emotionally-appealing personal stories or more empirical scientific
56 information. Additionally, if HCPs are to regain trust in public or government health
57 authorities, it is also key to include and engage them in decision-making for vaccine
58 recommendations and/or policies as well as in the design of communication materials,
59 particularly around new vaccines⁷.

60 Efforts to support HCP endorsement of and confidence in vaccination is essential to restore
61 and maintain vaccination as a “norm” among the health community¹. While regularly
62 updated, and easy to access information addressing the more common concerns about
63 vaccines can help support HCPs, the information should not solely focus on the vaccine
64 issues, but should also seek to understand *why* certain parents might be hesitant to
65 vaccinate¹. Advice and experience on how to communicate with and respond to hesitant
66 parents, as well as working with groups of HCPs to build confidence, is crucial to prevent the

67 emergence of clusters of hesitant HCPs, and the risks of confidence declines among their
68 patients.

69 While listening to the public in order to understand their concerns about vaccination is
70 important, taking the time to listen to HCP concerns, is equally important. The burden of
71 addressing public and parent hesitancy cannot be placed on health professionals, without
72 first taking the time to understand and address their own concerns and build their
73 confidence.

74

75 **Conflict of interest:** Along with public funding sources, The Vaccine Confidence
76 Project(VCP) has received funding from GSK and Merck to convene research symposia.

77 **Funding:** None.

78

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