

Vaccinations and Internationally Adopted Children:

With the recent outbreak of measles in Disneyland and the now debunked publications that linked vaccinations to autism, parents are discussing vaccinations more than ever with friends, family and their medical providers. So what is a parent to do when it comes to vaccinations and their internationally adopted child?

First, for families traveling to other countries, we recommend to visit a travel health clinic to advise on vaccinations that are specific to certain travel regions and to talk more about your individual health concerns that may impact what precautions are needed. All of your close contacts at home should also see their primary care clinic or travel clinic and get up to date on the needed vaccinations as well. For adult travelers and household contacts, MMR, Hepatitis A, Hepatitis B, PCV and Hib may need to be updated.^{1,2} Adults may not recall if they were immunized to measles, mumps, and rubella. Adults born prior to 1957 are presumed immune since measles and mumps were so widespread during that time. Adults born after 1957 should try to locate their childhood vaccine records prior to travel. If they have had two documented vaccinations in their lifetime, they are presumed immune. If unsure, adult travelers can check titers to measles, mumps, and rubella, or repeat the vaccine series.

In 2009, the CDC and ACIP issued an update recommending Hepatitis A vaccination for all close contacts of adoptees from a country with a high prevalence of Hepatitis A, who have not had the series before.¹ Hepatitis A vaccination is now part of the routine immunization schedule for all children but some countries do not have this vaccination available, or children may not have responded to the vaccine even if given due to a number of factors in institutionalized care.

While traveling, the best way to keep yourself well is good hand-washing and common sense food and water safety for eating, drinking and bathing. For family members that are traveling from the USA, a travel clinic may recommend empiric treatment of moderate or severe traveler's diarrhea with antibiotics. If your adopted child is ill while you are still there in country, however, we do not recommend to treat with antibiotics until you have seen a medical person to do a good examination of the child to get an accurate diagnosis.

For a variety of proposed reasons, many internationally adopted children did not mount natural protection to vaccines that were documented as received. Depending on where they were in the world and the kind of vaccination, up to 50% of new adoptees do not have sufficient immunity to hepatitis B, Hib, measles/mumps/rubella (MMR), diphtheria/tetanus (DT) or polio.^{3,4} Because the immunity levels vary so much, once your child is home, our recommendation is to test for the presence of protective antibody levels to standard vaccinations given in the child's country of origin, and to infections the child may have obtained through natural disease, e.g., hepatitis A virus. Testing for these antibody levels after the child arrives in the United States allows your primary care person to do catch-up vaccinations for those that are needed, and yet also leads to fewer unnecessary shots for a child that did respond to vaccinations given or has already had the disease.

Immunizations are essential to your child's health and the risks of undervaccination have been magnified by the recent outbreaks. With immigration and other travel, we are realizing how small our world has become and that it is necessary to protect our children and family members against these vaccine-preventable diseases that have would otherwise kill and cause disability in thousands of children every year. Immunizations and vaccination protection can be one of the tools to help you move forward as a healthy family and healthy community.

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3. Staat MA, Stadler LP, Donauer S, Trehan I, Rice M, Salisbury S. Serologic testing to verify the immune status of internationally adopted children against vaccine preventable diseases. *Vaccine.* 2010;28(50):7947-7955.
4. Van Schaik R, Wolfs TF, Geelen SP. Improved general health of international adoptees, but immunization status still insufficient. *Eur J Pediatr.* 2009;168(9):1101-1106.