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**DOCTORS AND MEDICAL STUDENTS KNOWLEDGE ABOUT FAKE  
VACCINES CONTRAINDICATIONS**

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**Background.** Many situations are perceived as a false contraindication to vaccines. As anaphylaxis is the only universal permanent contraindication to all vaccines, there are many temporary contraindications usually connected with fever. However, they might be also a worsening of chronic state or immunodeficiency. We checked the knowledge about vaccine contraindications among doctors and medical students.

**Aim of the study:** to evaluate why the vaccination process is deferred when there is no contraindications – is it a result of lack of knowledge or personal own beliefs.

**Materials and methods.** A questionnaire including 13 clinical situations was created and conducted in pediatric departments by leaving the questionnaire. Additionally, the survey was shared in Facebook groups, where medical students and doctors were members. Mainly the participants of the research were pediatricians, family medicine or general physicians.

**Results and discussion.** Of 318 survey participants, we analyzed 152 (47.8%) responses from physicians of various specialities, where 95 (62.5%) work in hospitals and 57 (37.5%) work in outpatient clinics. The remaining 161 (50.6%) respondents were medical students. The 1.6% was a nonresponse rate. Despite the fact that none of our cases were contraindication for vaccination, interviewees find it different. The 173 (54.4%) of respondents (42.2% physicians vs 56,07% students) would postpone the booster jab of DTP vaccine during antibiotic therapy for pharyngitis. A sizable proportion of respondents – 136 (42.8%) find that children during adjuvant chemotherapy for ALL should not be vaccinated to pneumococci. 123 (38.7%) of 318 interviewees, where 44 (35.8%) are physicians would postpone MMR vaccine during mild diarrhea. There is a noticeable proportion of vaccinators who would not vaccinate the patient with allergy to egg albumen to influenza virus (58/318;18.2%). 317/319 (99.4%) were supporters of vaccinations. The 187 (58.8%) of interviewees are not seeing the patients and 219 (68.9%) of the study participants do not qualify for vaccination.

**Conclusion.** The study shows that there are many situations which are fake contraindication for vaccination. Responses related to the postponement of vaccination may result from lack of knowledge. Most of the participants do not qualify for vaccination and work mainly in hospitals, where children are not vaccinated which may be another reason for the results obtained. Another group of respondents is not seeing any patients daily, thus it could also contribute to the results. Generally, the knowledge about vaccine contraindications could be more common among health care providers and future physicians to recognize if the disqualification to vaccination is essential. Difference in results between „paper” surveys and online was not noticed. Anti-vaccination trend on the internet in our research was not detected.