Flu vaccine should NOT be mandatory for health care workers, doctor argues

By ACSH Staff — January 10, 2013

If we weren’t infuriated before reading Dr. Marc Siegel’s latest column [1] arguing against making the flu vaccine mandatory for health care workers, we certainly are now. (Dr. Siegel is an associate professor of medicine and medical director of Doctor Radio at NYU Langone Medical Center).

With the 2013 flu season living up to predictions of being one of the worst flu seasons in years, Rhode Island recently became the first state to require that all health care workers interacting directly with patients receive the flu shot. And the number of hospitals mandating flu vaccines for health care workers has risen from a couple of hospitals in 2005 to more than 400 today. But according to Dr. Siegel, these mandates are not warranted, even taking into account the severity of the flu this season.

He says that when you decide not to get a flu shot, the risk is that you or someone near you will get sick. But for health care workers, the price is increasingly a pink slip.

For the health care workers, it may be a pink slip, but for vulnerable patients, the price may be prolonged hospital stays or even death, says ACSH’s Dr. Gilbert Ross. Siegel says that encouraging people and education are the ideal way to increase vaccination rates, but clearly this isn’t working people continue to resist getting vaccinated and patient health is being compromised.

Siegel says that mandatory vaccines do have their place but mandates should be reserved for situations where a vaccine can play a major role in fighting back a clear public health risk. In the case of seasonal flu, neither the risk of the disease nor the benefit of the vaccine is big enough to warrant forcing health care workers to receive it. But he forgot to mention that the 2005 study [2] he used to draw these conclusions was done using a population defined as elderly (65 years of age and older). This study is not really generalizable to the whole population and shouldn’t be used as a basis for arguing against mandatory flu vaccination for health care workers.

Siegel’s last point is that the yearly flu vaccine is generally only 60 percent effective against the prevailing strains, stating that as a reason not to make flu vaccination mandatory for health care workers. We don’t even know where to start with that one. Certainly 60 percent is far better than no protection. We are totally perplexed as to why a physician would argue against a public health measure like mandating flu shots for health care workers, says ACSH’s Dr. Elizabeth Whelan.

Dr. Bloom wonders whether Dr. Siegel had the flu when he wrote this op-ed. The conclusions that Dr. Siegel has reached are bizarre in so many ways that I don’t know where to start.

He notes, First, given recent news that tents are being set up in Pennsylvania to care for flu
patients that can't even get into a hospital because they are already filled with other flu patients, anything to discourage flu vaccination at this time is grotesquely ironic to say the least.

Second, Dr. Siegel is ignoring one of the basic tenets of medicine: risk vs. benefit. Even if the 2005 study is correct (and I would bet my life that it isn't) the magnitude of the benefit of flu vaccines may be debated, but the risk is zero. This is as close to a no brainer as you can find in medicine.

Finally, he adds, We have become so obsessed with our rights, that people forget that rights are not absolute. No one has the right to a job. It is a privilege. Common sense dictates that you do not go near hospitalized patients if you have the flu. I cannot imagine any rational argument against this.

ACSH's Dr. Ruth Kava adds, Even if infected workers weren't a vector for the flu, the fact that they would have to stay home while ill would mean that there were fewer workers to care for sick patients. That would not be a desired outcome!

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