

The Relationship Between Rate of Cardiovascular Disease and Immunization among Adults over 65

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Introduction

Those who are diagnosed with heart disease or other chronic health conditions are at high risk of complications due to a vaccine-preventable illness, especially at older ages. (Boey et al., 2020).

Many vaccine hesitant individuals believe vaccines pose higher risks to their health than the reward of immunization is worth. (Schmidtke et al., 2022)

Research Questions

 Are individuals with cardiovascular disease (CVD) more likely to become immunized?
Does the recency of the individual's medical visits influence this relationship?
What influence do other lifestyle choices have on the relationship between CVD and immunization?

- It is unknown how an individual's chronic health conditions, specifically cardiac disease,
 - influence immunization decision-making.

Methods

Sample

Participants ages 65+ (n=115,791) were

interviewed over telephone through the Behavior Risk Factor Surveillance System (BRFSS), a statelead survey that collects information about health related high-risk and preventative behaviors. This sample is taken from the 2021 survey.

Measures

- Participants were surveyed as to whether they had ever been told they had angina or coronary heart disease to determine Cardiovascular Disease (CVD) diagnosis in this analysis. 10.7% (n=12,373) of the population responded yes.
- To determine immunization, those who had either ever received the pneumonia vaccine or received the influenza vaccine within the past year were categorized as positive for immunization (81.6%). Those with neither were categorized as non-immunized (18.4%).



No other vaccines were surveyed in the BRFSS dataset.

Bivariate

 Chi-Square analysis showed that CVD diagnosis was significantly associated with increased rate of immunization. (p = <0.0001).
There was ~7% increase in the immunized population when participants had CVD (88.1% vacc.) vs when they did not (80.7% vacc.).

Multivariate

 Logistic regression analyses demonstrated that gender, education, exercise, and doctor visit recency had no impact on the relationship between CVD and



Figure 1: The Relationship Between CVD and Immunization Rate based on Doctor Visit Recency



Discussion

Cardiovascular Disease Yes No

Those who are diagnosed with CVD are significantly more likely to acquire immunization than those who are not diagnosed.

Although the recency of doctor visits markedly increased the chances of a participant receiving immunization , it did not impact the relationship between CVD and immunization.

Further research should delve into other co-morbidities such as obesity or COPD.

References

Immunization rates (OR 1.757, p = <0.0001).

- Doctor visit recency had a larger independent impact on immunization rates than CVD when
 - comparing visits within the past year vs never visiting (OR 7.506,
 - p=<0.0001.)
- Education level also independently impacted immunization rate, but to a lesser extent than doctor visit recency (OR 3.603, p=<0.0001).</p>



Figure 2: CVD vs Immunization Categorized by Participant's Education Level

Cardiovascular

Behavioral Risk Factor Surveillance System (BRFSS) - Healthy People 2030 | Health.gov. (n.d.). https://health.gov/healthypeople/objectives-anddata/data-sources-and-methods/data-sources/behavioral-risk-factorsurveillance-system brfss#:~:text=The%20Behavioral%20Risk%20Factor%20Surveillance,survey% 20was%20established%20in%201984. Boey, L., Bosmans, E., Ferreira, L. B., Heyvaert, N., Nelen, M., Smans, L., ... Vandermeulen, C. (2020). Vaccination coverage of recommended vaccines and determinants of vaccination in at-risk groups. *Human Vaccines* & Immunotherapeutics, 16(9), 2136–2143. https://doi.org/10.1080/21645515.2020.1763739 Ornish, D., Brown, S. E., Billings, J. H., Scherwitz, L. W., Armstrong, W. T., Ports, T. A., McLanahan, S. M., Kirkeeide, R. L., Gould, K. L., & Brand, R. J. (1990). Can lifestyle changes reverse coronary heart disease?: The Lifestyle Heart Trial. The Lancet (British edition), 336(8708), 129-133. https://doi.org/10.1016/0140-6736(90)91656-U Schmidtke, K. A., Kudrna, L., Noufaily, A., Stallard, N., Skrybant, M., Russell, S., & Clarke, A. (2022). Evaluating the relationship between moral values and vaccine hesitancy in Great Britain during the COVID-19 pandemic: A crosssectional survey. Soc Sci Med, 308, 115218. https://doi.org/10.1016/j.socscimed.2022.115218 Williams, S. E. (2014). What are the factors that contribute to parental vaccine-hesitancy and what can we do about it? *Human Vaccines* & *Immunotherapeutics*, 10(9), 2584–2596. https://doi.org/10.4161/hv.28596