

What childhood diseases are actually vaccine-preventable?

Last updated: 14 April 2019

https://dickatlee.com/vaccines/maine/nass_vaccine_disease_relevance.html and PDF

(Analysis courtesy of Dr. Meryl Nass, M.D., blogging at <https://anthraxvaccine.blogspot.com>)

Below is the list of **15 infectious diseases** for which vaccines are recommended as part of the childhood vaccine schedule in the United States, **grouped by color** according to the relevance of vaccines for their prevention. (A sixteenth, **rotavirus**, does have a vaccine at 2 & 4 months, but because rotavirus only causes diarrhea and is not expected to cause severe illness/death, the CDC does not collect information on US case numbers.)

These diseases **cannot spread casually** from person to person, so children are at **no risk** from them.

These diseases have been **wiped out** in the United States, and there have not been any new cases that originated in the US for many years.

These diseases **cannot be wiped out**, nor can herd immunity be achieved, because available vaccines only protect against some strains. In fact, sometimes vaccinations against some strains cause infections from other strains to *increase* in incidence.

These diseases **can't be stopped from spreading** because the vaccines aren't effective enough.

Only two vaccine-preventable illnesses are left.

| Disease | don't spread | wiped out | can't wipe out | can't stop spread | potentially preventable | CDC 2019 Schedule (if done on time) 70 doses through age 18 |
|---|--------------|-----------|----------------|-------------------|-------------------------|---|
| Diphtheria | | + | | | | 2,4,6,12-18mo, 4-6,11-12yr |
| Haemophilus influenzae, type B | | | + | | | 2,4,6,12-18 mos |
| Hepatitis A | [1] | | | | | 12-24 mos (2 doses) |
| Hepatitis B | [2] | | | | | birth, 1-2,6-18 mos |
| HPV | | | [3] | | | 11-12 yrs |
| Influenza | | | | [4] | | 6 mos, annual |
| Measles | | | | | [5] | 12-15 mos, 4-6 yrs |
| Meningococcal disease, type ACWY | | | [6] | | | 11-12,16 yrs |
| Mumps | | | | [7] | | 12-15 mos, 4-6 yrs |
| Pertussis | | | | [8] | | 2,4,6,12-18mo, 4-6,11-12yr |
| Pneumococcal disease, certain serotypes | | | + | | | 2,4,6,12-15 mos |

| | | | | | | |
|------------------------|--------------|-----------|----------------------------|-------------------|-------------------------|---|
| Polio | [9] | | 2,4,6-18 mos, 4-6 yrs | | | |
| Rubella | [10] | | 12-15 mos, 4-6 yrs | | | |
| Tetanus | [11] | | 2,4,6,12-18mo, 4-6,11-12yr | | | |
| Varicella (chickenpox) | [12] | | 12-15 mos, 4-6 yrs | | | |
| Disease | don't spread | wiped out | can't wipe out | can't stop spread | potentially preventable | CDC 2019 Schedule (if done on time) 70 doses through age 18 |

Notes *

- [1] According to the [American Academy of Pediatrics](#), **Hepatitis A** affects particular at-risk populations of adults, children only in very specific cases; appropriate on a case-by-case basis, but not for universal use.
- [2] **Hepatitis B** is only transmitted by needles or sex, not on day 1; any protection has waned by any time of exposure.
- [3] **HPV** vaccine covers only a small proportion of HPV strains; evidence is mounting of higher-virulence strain replacement.
- [4] **Influenza** vaccine has been only 40% effective on average over last 12 years.
- [5] If given after 15 months of age, 2 doses of **measles** vaccine should be 97% effective initially, with only mild waning over time. In Maine in 2017, there was only one case (the first in 20 years), imported by an unvaccinated female in the 15-24 age range. The last U.S. death was in a 14-year-old bone marrow transplant patient.
- [6] Kids carry **meningococcal** bacteria in their noses despite being vaccinated.
- [7] Most **mumps** cases are caused not by lack of vaccination, but by vaccine failure -- either primary or secondary. In Maine in 2017 there was only 1 case: a vaccinated female in the 15-24 age bracket. There have been no U.S. mumps deaths in recent years.
- [8] Most **pertussis** cases are caused by vaccine failure: in Maine in 2017, 66% of the 410 documented cases were up to date on vaccination, 83% had at least one dose and only 6% were under a year old. Of the 10 deaths nationally, it is not clear if any were from Maine.
- [9] The last 3 U.S. **polio** cases occurred due to live-vaccine strain polio.
- [10] All recent **rubella** cases have come from overseas, and there have been none in Maine since 2008.
- [11] **Tetanus** only occurs in contaminated wounds; 30 U.S. cases/year, only one of which in 2017 was in Maine (unvaccinated female, age range 15-24).
- [12] Of 198 **varicella** cases in Maine in 2017, 40% were among children (of whom 70% were vaccinated); 8% were in the 15-24 age bracket; no Maine deaths (nationwide: only about 1/year).

* The statistics in these notes were obtained from the Maine CDC and the federal CDC and collated by Dr. Meryl Nass, MD on February 8, 2019.