

# European Respiratory Society Annual Congress 2012

**Abstract Number:** 3351  
**Publication Number:** P2874

**Abstract Group:** 10.2. Tuberculosis

**Keyword 1:** Vaccination **Keyword 2:** Public health **Keyword 3:** Primary care

**Title:** Administration of BCG vaccination: Survey of practice in the Mersey region, UK

Mr. Sean 29170 Mackin S.Mackin@student.liverpool.ac.uk<sup>1</sup>, Dr. Syed M.H. 29171 Kazmi murtaza.kazmi@gmail.com MD<sup>2</sup>, Mr. Nick 29172 Coombes N.Coombes@student.liverpool.ac.uk<sup>1</sup>, Dr. Mohammed 29190 Hussain mohammed.hussain@lhch.nhs.uk MD<sup>2</sup>, RN. Clifford 29194 Bisacre clifford.bisacre@liverpoolCH.nhs.uk<sup>3</sup> and Prof. Peter 29191 Davies peter.davies@lhch.nhs.uk MD<sup>2</sup>.<sup>1</sup> School of Medicine, University of Liverpool, United Kingdom, L69 3GE ; <sup>2</sup> Respiratory Medicine, Liverpool Heart and Chest Hospital, Liverpool, United Kingdom, L14 3PE and <sup>3</sup> TB Centre, Liverpool Community Health, Liverpool, United Kingdom, L15 2HE .

**Body:** Background A UK wide survey in 2005 showed wide variation in BCG practice and that the providers were uncertain in various aspects of the administration. The National Institute of Clinical Excellence (NICE) published guidelines in 2006, which along with Department of Health guidance aimed to standardise practice. We intended to assess regional BCG service 6 years later. Method 4 TB centres providing BCG vaccination across Mersey region were contacted and data regarding current practice of BCG administration was collected. Results The adherence to the guidelines was recorded as compliance. See table.

QUESTIONS	GUIDELINES COMPLIANCE (%)
Administration of BCG at sites other than upper arm	50%*
Re-vaccination in the absence of BCG scar in children	100%
Prior assessment of HIV status	100%
Prior evaluation of anaphylaxis risk	100%
Availability of resuscitation equipment	75%
Formal training of staff in paediatric resuscitation	100%

\* The other sites used were right upper arm or upper thigh. Reasons included patient preference or confusing scar. There were no recorded episodes of anaphylaxis in the past 12 months. All centres referred patients with severe adverse local reactions appropriately. Conclusions Our survey demonstrates that NICE recommendations and their implementation were essential in elucidating areas of uncertainty in the administration of BCG vaccination and subsequently the practice is now uniform across the Mersey region. We intend to extend this survey to national level.

