

Comment on “Addressing Vaccine Uptake in Trauma Patients”

Hinpetch Daungsupawong, PhD,* and Viroj Wiwanitkit, MD†

We would like to comment on the publication “Trauma as a Public Health Moment: Addressing Vaccine Uptake in Trauma Patients.”¹ This Chicago-based study looked into trauma inpatients’ coronavirus disease 2019 (COVID-19) immunization status and their experiences with discrimination in health care settings. A mixed-methods approach was used in the study, which included qualitative interviews and a survey. According to the survey data, just 40% of trauma patients who participated had received all recommended COVID-19 vaccinations. Individuals with higher earnings and greater concerns about COVID-19 were those who had gotten at least one dose of the vaccination. Furthermore, a reduced chance of vaccination was linked to greater Experiences of Discrimination Scale scores.

A couple of the study’s shortcomings are its small sample size and its short research duration. The findings’ ability to be applied broadly may be impacted by these limitations. Regarding the way forward, it is critical to take into account patients’ rights

to vaccinations and the medical team’s decision-making process when it comes to surgical treatments. According to the study, vaccination campaigns for trauma victims should concentrate on allaying fears, educating people about the advantages and safety of the vaccine, and focusing on any discriminatory experiences that may have an impact on their decision to get vaccinated.

Nonetheless, it is questionable if immunization promotion should take precedence right now given the emergency situation trauma victims find themselves in. To evaluate the possible advantages and disadvantages of vaccination for trauma patients as well as the ideal time to vaccinate in an emergency, more research is required.

REFERENCES

1. Keegan GE, Alexander R, Ogunnowo S, et al. Trauma as a public health moment: addressing vaccine uptake in trauma patients. *Ann Surg Open.* 2023;4:e356.

*From the Private Academic Consultant, Phonhong, Lao People’s Democratic Republic; and †Research Center, Chandigarh University, Mohali, Punjab, India.

H.D.: 50% ideas, writing, analyzing, and approval. V.W.: 50% ideas, supervision, and approval.

Disclosure: The authors declare that they have nothing to disclose.

Reprints: Hinpetch Daungsupawong, Private Academic Consultant, Lak52, Phonhong, Vientiane, 10000, Lao People’s Democratic Republic.
E-mail: hinpetchdaung@gmail.com

Copyright © 2024 The Author(s). Published by Wolters Kluwer Health, Inc. This is an open-access article distributed under the terms of the Creative Commons Attribution-Non Commercial-No Derivatives License 4.0 (CCBY-NC-ND), where it is permissible to download and share the work provided it is properly cited. The work cannot be changed in any way or used commercially without permission from the journal.

Annals of Surgery Open (2024) 1:e387

Received: 25 December 2023; Accepted 8 January 2024

Published online 9 February 2024

DOI: 10.1097/AS9.0000000000000387