

A trip to Singapore, an opportunity to vaccinate a transplanted patient

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A 42-year-old man presents to the Travel Medicine clinic in Verona (Italy) for a consultation regarding an 11-day trip, 3 to Malaysia and 8 to Singapore. During the medical history assessment, it emerged that the patient suffers from cystic fibrosis and underwent a kidney transplant and two lung transplants. The patient is receiving dual immunosuppressive

therapy to prevent rejection with tacrolimus and mycophenolic acid, Pancrelipase with meals, metoprolol, ursodeoxycholic acid, acetylcysteine, azithromycin, calcitriol, prednisone, slow-acting insulin 12 IU, and rapid-acting insulin with meals.

In accordance with destination and epidemiological risk, pre-travel counseling is provided, providing information on the prevention of the most common diseases and the specific recommended vaccinations. At the same time, considering the patient's immunocompromised condition, a more in-depth assessment was conducted in accordance with the literature, guidelines, and regional recommendations regarding the active and free offer of specific additional vaccines for individuals with chronic diseases and immunosuppression.

Following vaccination counseling, the DTP-Polio, Meningococcal ACWY, Hepatitis A, and Inactivated Typhoid vaccinations were administered simultaneously, and appointments were scheduled for the other vaccinations indicated for each disease.

During subsequent appointments, in addition to completing the started vaccination cycles, free vaccinations against Meningitis B, Herpes Zoster, Pneumococcus, Haemophilus Influenzae, and Papillomavirus were administered.

This case illustrates how access to travel medicine services can also represent an important opportunity for vaccinating vulnerable individuals at high risk of developing vaccine-preventable diseases. It is therefore important that travel clinic health professionals be trained to properly manage this specific, more complex group of travelers.