



17TH WORLD CONGRESS ON PUBLIC HEALTH 2023 May 2-6 ROME ITALY

ABSTRACT BOOK



Abstract book by:





ORGANISING COMMITTEE

CMC

The three organising partners of the 17th World Congress on Public Health established a Congress Management Committee (CMC) consisting of representatives of WFPHA, SItI, ASPHER and the PCO. The CMC has the full managerial and financial management responsibility for the Congress.

Chair: Walter Ricciardi

Members:

Luis Eugenio de Souza – WFPHA
 Bettina Borisch – WFPHA
 Marta Lomazzi – WFPHA
 Italo Angelillo – SItI
 Antonio Ferro – SItI
 Roberta Siliquini – SItI
 Carlo Signorelli – ASPHER
 John Middleton – ASPHER
 Robert Otok – ASPHER

ICC

The International Congress Council (ICC) consisted of the Congress Management Committee and international public health experts representing various regions of the WFPHA, international health organisations, European health non-governmental organisations and Italian universities and institutes. The ICC in particular develops, in consultation with the CMC, the scientific programme including subthemes and plenary programme of the WCPH and identify speakers/panellists/moderators of the plenary sessions.

Chair: Walter Ricciardi

Members:

Mohannad Al Nsour (Jordan)
 Elena Alonzo (Italy)
 Woldekidan Kifle Amde (South Africa)
 Yaneer Bar-Yam (USA)
 Maurício Barreto (Brazil)
 Stefan Buttigieg (Malta)
 Mary Codd (Ireland)
 Kasia Czabanowska (The Netherlands)
 Maria Saenz Del Rocio (Costa Rica)
 Enrico Di Rosa (Italy)
 Alberto Fedele (Italy)
 Rok Hrzcic (Slovenia)
 Gregory Kolt (Australia)
 Rüdiger Krech (WHO)
 Jose M. Martin-Moreno (Spain)
 Alison McCallum (United Kingdom)
 Martin McKee (United Kingdom)
 Michael Moore (Australia)
 Jean Marie Okwo Bele (Congo)
 Gaetano Pelissero (Italy)
 Gaetano Privitera (Italy)
 Srinath K. Reddy (India)
 Malabika Sarker (Bangladesh)
 Luca Gino Sbrogiò (Italy)
 Ines Siepmann (USA)
 Giorgio Solimano (Chile)
 Emanuele Torri (Italy)
 Paolo Villari (Italy)
 Francesco Vitale (Italy)

ISC

The International Scientific Committee (ISC) consists of experienced public health experts from around the world nominated by WFPHA, SItI and Aspher. It mainly advises the ICC on scientific matters of the conference and contributes to the scientific evaluation of the conference. We would like to thank the ISC for their support.

Assessment of cetyltrimethylammonium bromide-based method for the extraction of soil-transmitted helminths DNAs from stools for molecular diagnostic of soil-transmitted helminth infections	554
Early identification of Clostridium Difficile patients in the Emergency Department: Observational study in acute care hospital in Sicily.....	555
A point prevalence survey on healthcare-associated infections in an acute care hospital in central Italy: preliminary results	555
Oral Adverse Events of COVID-19 Vaccines in Europe: Analysis of EudraVigilance Database.....	555
Wastewater surveillance of sars-cov-2 variants in Italy: a powerful tool for tracking the spread of sars-cov-2 variants/subvariants in the population.....	555
Seroprevalence of SARS-CoV-2 specific antibodies in Portugal May 2020 - June 2022: results of four serial seroepidemiological surveys	556
Prevalence study on healthcare-related infections and the use of antibiotics in humanitas mater domini	556
The relationship between increased hospital length of stay and accessibility to care settings with lower levels of complexity in Italy.....	556
Agroecology versus agribusiness: An experience of popular health surveillance against the impacts of agribusiness in a region of Brazil	556
Analysis of violence reports in the town of nova iguaçu/state of Rio de Janeiro/Brazil, from 2014 to 2020.	557
Household survey as a tool for detecting the determinants of health: de facto census survey in rural settlements of shamakhi region, azerbaijan	557
Popular surveillance of pesticides	557
Excess mortality associated with voc-specific covid-19, flu and extreme temperatures: A comprehensive time-series analysis approach to estimate attributable mortality during the covid-19 pandemic in Portugal.....	557
New incidence of lung cancer in Hanoi in the period 2015 - 2019	558
The future of health impact assessment- setting the Research Agenda	558
Public health surveillance: lessons from the pandemic.....	558
Challenges in the surveillance of chronic diseases in an era of big data	559
Impact of the COVID-19 vaccination on the trend of COVID-19 in Ireland: a joinpoint regression analysis	559
Development of a road map to scale up the uptake and utilization of Influenza vaccine in 22 countries of Eastern Mediterranean Region.....	559
Human Papillomavirus vaccination delivery systems within National and Regional Immunization Programs: a systematic literature review	559
Cape Verdean immigrant parents report very low knowledge of HPV: an urgent call for culturally grounded and sensitive education to reduce HPV-associated cancers and disparities	560
Children and young people's understanding of vaccines in the United Kingdom.....	560
Immune responses to the adjuvanted recombinant zoster vaccine in immunocompromised patients	560
Early Results on safety of monkeypox vaccine using active surveillance, a bicentric study in Italy.....	560
Attitudes towards vaccinations in Italian cohort of IBD patients.....	561
Efficacy and safety of quadrivalent conjugate meningococcal vaccines: a systematic review and meta-analysis	561
Barriers and strength factors of adult immunization plans in seven countries of the European Region	561
Analyzing COVID-19 vaccine hesitancy among Nepalese people: a cross-sectional study at National level.....	562
Immunize BC's informed choice program	562
Characteristics of effective educational interventions targeting healthcare workers to improve advising about vaccinations for older adults: a systematic review.....	562
The use of test-negative case-control studies to determine the effectiveness of influenza vaccination in pregnancy: results from a systematic review and meta-analysis.....	562
Understanding the barriers to HPV vaccine uptake: an exploration of the Canadian landscape on HPV immunization programming opportunities.....	563
Vaccination coverage in diabetic patients in the Lombardy region.....	563
Determinants of vaccine hesitancy towards pediatric and adolescent vaccinations and interventions aimed at contrasting that issue in Europe: an overview of systematic reviews	563
Vaccination hesitancy among parents of school children in the United Arab Emirates: a cross-sectional study.....	563
The vaccination coverage rate in under-five children in Nasiriyah (Iraq) before and during the COVID-19 pandemic.....	564
Prevalence of observed BCG scar in a cohort of health care workers from three Lusophone sub-Saharan African countries: cross-sectional comparative study	564
Vaccination among HIV+ patients: an Italian cross-sectional survey.....	564
Hospital-Territory Vaccination Center: pilot study on a multidisciplinary model for administration of recombinant zoster vaccine in fragile patients	564
Human Papillomavirus (HPV) vaccination recovery campaign in Emilia-Romagna region, Italy: impact on vaccination coverage in women up to 25 years	565
Routine immunization of older adults and frail people during the SARS-COV2-pandemic in Italy: a national survey by Italia Longeva	565
Pediatric COVID-19 vaccine hesitancy based on parents' attitudes towards mandatory and recommended vaccination in Southern Italy	565
The frequency of missed opportunities for simultaneous vaccination and their impact on vaccination of children in The Gambia	566
Kids boost immunity: inspiring learning through global citizenship.....	566
Exploring waning COVID19 vaccine effectiveness against reinfections in the pediatric population: a retrospective population analysis	566
Potential side effects after paediatric anti-COVID19 vaccination in subjects with existing comorbidities, congenital and otherwise	566
Sustained effect of pneumococcal vaccination in the Stockholm area: a follow up between 2012 and 2016.....	567
COVID-19 Pandemic and the increasing measles attack rate among under-five children in Gezira state, Sudan, 2020-2022	567
A pilot experience of a clinic for the evaluation of contraindications to vaccine administration: results from the first year of activities in Puglia, Italy	567
Determinants of timely administration of the hepatitis B vaccine birth dose in Senegal in 2019: Secondary analysis of the demographic and health survey.....	567

negatively associated with vaccination uptake and positively with hospitalization with confirmed influenza. Overall, studies were considered at low/moderate risk of bias using the ROBINS-I tool.

Conclusions: Pooling data from RWE to estimate IVE against severe outcomes in pregnant women is crucial to inform vaccination policy. While TND offers notable advantages in estimating IVE – such as minimizing outcome misclassification of the disease –, novel well-conducted TND are needed to provide reliable estimates of IVE according to influenza subtype and vaccine type. Finally, surveillance systems that incorporated TND should expand data collection to better account for pregnancy.

Popul. Med. 2023;5(Supplement):A1991
DOI: 10.18332/popmed/165506

Understanding the barriers to HPV vaccine uptake: an exploration of the Canadian landscape on HPV immunization programming opportunities

Cordell Neudorf¹, Thilina Bandara², Mika Rathwell¹, Jaspreet Saini³

¹Urban Public Health Network, University of Saskatchewan, Ottawa, Canada,

²School of Public Health, University of Saskatchewan, Saskatchewan,

Canada, ³Canadian Partnership Against Cancer, Canada

Background and Objectives: The Canadian partnership against cancer has provided funding to the urban public health network to assess the landscape of HPV immunization coverage, barriers, and opportunities at a sub-jurisdictional level, in order to achieve the target of 90% HPV immunization to support the work of the action plan to eliminate cervical cancer in Canada by 2040. This work has involved engaging local public health organizations across Canada to uncover high-resolution quality improvement targets of investment for underimmunized populations.

Methods: This project uses a mixed-method design to understand barriers and facilitators to increasing HPV immunization uptake at a sub-provincial level. Stakeholders were engaged from across Canada and analysts were placed in four local public health units, to extract sub-provincial level HPV programming insights. HPV immunization data was collected at a sub-provincial level, and in some cases, down to a postal code or school level. Coverage rates were then linked to socio-demographic indicators where possible to identify pockets of under-immunization. To further determine barriers and facilitators, surveys, focus groups, and interviews took place with caregivers and providers.

Results: Preliminary results indicate the availability of HPV immunization data is highly variable across Canada, as is HPV immunization programming. Barriers to immunization have been identified at both individual (e.g. Lack of healthcare provider recommendation, misinformation) and systems-level (e.g. Absence of a national immunization registry) in participating regions to varying degrees.

Conclusions: Understanding how barriers and facilitators impact HPV immunization uptake at a local level is critical to implementing innovative policies and programming. Findings will be reported by region and/or subgroup, as well as aggregated nationally to inform recommendations made to CPAC on ways to address inequities in access and uptake.

Popul. Med. 2023;5(Supplement):A1992
DOI: 10.18332/popmed/165520

Vaccination coverage in diabetic patients in the Lombardy region

Catia Borriello¹, Danilo Cereda¹, Sara Piccinelli², Giovanni Cicconi², Roberta Lattanzio², Chiara Marrocu², Sudwaric Sharma², Riccardo Vecchio³

¹Directorate General Welfare Region Lombardy, Milano, Italy, ²Department

of Biomedical Sciences for Health, University of Milano Statale, Italy,

³Department of Public Health, Experimental and Forensic Medicine, University of Pavia, Italy

Background and Objective: Diabetes mellitus is associated with an increased incidence of infections and a greater severity and frequency of related complications. In particular, the risk of hospitalization and death from infectious causes in this category of patients is double compared to euglycemic subjects. The vaccinations provided for by the National Vaccine Prevention Plan and recommended by the Italian Diabetes companies are the anti-flu, the anti-pneumococcal, the new recombinant anti-zoster, the anti-diphtheria, tetanus, and pertussis and the anti-SARS-COV2 vaccine. The goal of this work is determining the vaccination coverage for the main recommended vaccinations and for COVID-19 in the Lombard diabetic population. **Methods:** A chi-square test has been used to assess: whether the presence of diabetes influenced the choice to get vaccinated or not: the test was used to verify if the observed frequencies in one or more categories correspond to the expected frequencies, if the null hypothesis were true, if there are differences in terms of vaccine doses made on the basis of the type of diabetes. A statistical significance level of p-value <0.05 (5%) was

used initially and, later, more conservatively p-value <0.02 (2%) due to the practical application of the correction Bonferroni hypothesis.

Results: Of the total diabetic subjects, 264058 subjects (46.19%) received the influenza vaccine, 60980 (10.67%) patients received the pneumococcal vaccine, 15137 (26.25%) received the meningococcal vaccine, 4132 (0.72%) received a type of anti-Herpes Zoster vaccine. **Conclusions:** The vaccination coverage in diabetic population, excluding the recent anti-SARS-COV2 vaccination campaign, is currently insufficient. In general, this study has demonstrated a significant correlation between the presence of diabetes and adherence to vaccinations. Adherence is greater among patients with type 2 diabetes than in patients with type 1 diabetes: this is likely related to the presence of more comorbidities among patients with type 2 diabetes.

Popul. Med. 2023;5(Supplement):A1993
DOI: 10.18332/popmed/165552

Determinants of vaccine hesitancy towards pediatric and adolescent vaccinations and interventions aimed at contrasting that issue in Europe: an overview of systematic reviews

Alessandro Durbano¹, Giuseppina Moro¹, Maria Ferrara², Elisa Langiano², Alessandra Sannella², Sonia Pinto¹, Alex Pivi¹, Sara Sbaragli², Maurizio Esposito², Elisabetta Vito², Roberta Siliquini^{3,4}

¹Department of Public Health Sciences, University of Turin, Turin, Italy,

²Department of Human, Social and Health Sciences, University of Cassino

and Southern Lazio, Cassino, Italy, ³Department of Public Health Sciences,

University of Turin, ⁴A.O.U. City of Health and Science of Turin, Italy

Background and Objective: Vaccine hesitancy represents a relevant threat to global health. Specifically, vaccine hesitancy has shown an increase in the last two decades in Europe. The present overview aimed to describe determinants of vaccine hesitancy and interventions to reduce vaccine hesitancy or increase vaccine uptake among children and adolescents in Europe.

Methods: We developed a comprehensive search strategy to find the latest existing systematic reviews on the following databases: PubMed, Embase, and Epistemonikos, including only papers published in 2017 or after. The search was performed in 2022. Only papers about determinants or interventions addressed to parents, children, or adolescents were considered eligible. Each article was screened at least by two authors, blinded to each other's decisions. This overview has been conducted within the project "VAX-TRUST, addressing vaccine hesitancy in Europe" (This project has received funding from European Union's Horizon 2020 research and innovation program under Grant Agreement No. 965280).

Results: A total of 3363 records were screened. The final set of selected papers consisted of 28 systematic reviews. We examined the overlap of the systematic reviews within the overview using the CCA index obtaining the value of 1.39%, thus suggesting a low overlap. A total of 232 European primary studies contained in the systematic reviews were identified (212 observational studies and 20 experimental studies, including 15 RCTs and 5 quasi-experimental studies). Preliminary analyses showed that safety and trust concerns were the most frequently reported hesitancy determinants and the implementation of school programs involving nurses and general practitioners was the most frequently reported effective intervention.

Conclusions: This overview mainly highlighted issues in trust and safety concerns and suggested that school programs can be effective in the European context. It is essential to continue to study the reasons for vaccination hesitancy and to search for methods to decrease the phenomenon.

Popul. Med. 2023;5(Supplement):A1994
DOI: 10.18332/popmed/165557

Vaccination hesitancy among parents of school children in the United Arab Emirates: a cross-sectional study

Anusha Sreejith¹, Aya Hassan², Anusha Sreejith¹

¹Department of Community Medicine, College of Medicine, Gulf Medical

University, Ajman, United Arab Emirates, ²Abu Dhabi Vocational Education

and Training Institute, Abu Dhabi, United Arab Emirates
Background and Objectives: Parental vaccine hesitancy may hinder routine vaccinations of children and increase the risk of vaccine-preventable infections. This study was conducted to assess the prevalence and determinants of parental vaccine hesitancy in the United Arab Emirates. **Methods and Materials:** This cross-sectional study was conducted among 446 the parents using a self-administered questionnaire. Parents Attitudes about Childhood Vaccines (PACV) survey tool was used to assess the vaccine hesitancy and WHO's Vaccine Hesitancy Survey Questions were used to seek information about the factors. Data analysis was done using SPSS version 28. Chi square test was used to find the association and binary logistic regression was used to determine the factors.