

Worry, Anxiety, Concern and Inflated Statistics

THE CDC'S "RECIPE" FOR CREATING "HIGHER DEMAND FOR INFLUENZA VACCINE"

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When most people think of the Centers for Disease Control and Prevention (CDC), they think of an organization within the Department of Health and Human Services whose primary focus is the health of American citizens. However, a recent review published in the *British Medical Journal*¹ calls that role into question.

The paper, "Are U.S. Flu Death Figures More PR Than Science?" questions the CDC's recent claim that "about 36,000 people per year in the United States die from influenza" (www.cdc.gov/flu/about/disease.htm). The Harvard University grad student who authored the review goes on to compare this figure with other information published by the CDC. He points to the fact that the CDC's National Center for Health Statistics (NCHS) published data showing "(b)etween 1979 and 2002 an average [of] 1,348 flu deaths per year (range 257 to 3006)." He goes on to note that even considering the CDC's own modeling program, only 8,097 deaths per year would be "described as flu or flu associated."²

But perhaps the most startling aspect of the author's comments is his reference to a presentation made by the associate director for communications of the CDC's National Immunization Program. The presentation was made during the 2004 Influenza Vaccine Summit, co-sponsored by the American Medical Association and the CDC. The presenter gives the seven-step "recipe" for creating greater demand for flu vaccinations. The following is excerpted from his PowerPoint presentation:³

"Recipe" That Fosters Higher Interest and Demand for Influenza Vaccine

1. Influenza's arrival coincides with immunization "season" (i.e., when people can take action)
2. Dominant strain and/or initial cases of disease are:
 - Associated with severe illness and/or outcomes
 - Occur among people for whom influenza is not generally perceived to cause serious complications (e.g., children, healthy adults, healthy seniors)
 - In cities and communities with significant media outlets (e.g., daily newspapers, major TV stations)
3. Medical experts and public health authorities publicly (e.g., via media) state concern and alarm (and predict dire outcomes) - and urge influenza vaccination.
4. The combination of '2' and '3' result in:
 1. Significant media interest and attention
 2. Framing of the flu season in terms that motivate behavior (e.g., as "very severe," "more severe than last or past years," "deadly")
5. Continued reports (e.g., from health officials and media) that influenza is causing severe illness and/or affecting lots of people - helping foster the perception that many people are susceptible

to a bad case of influenza.

6. Visible/tangible examples of the seriousness of the illness (e.g., pictures of children, families of those affected coming forward) and people getting vaccinated (the first to motivate, the latter to reinforce).
7. References to, and discussions of, pandemic influenza - along with continued reference to the importance of vaccination.

Implications of "Recipe"

- A large component of consumer demand for flu vaccination is contingent upon things we can't control (e.g., timing, severity, extent, duration of the disease and resulting illness).
- Vaccination demand, particularly among people who don't routinely receive an annual influenza vaccination, is related to heightened concern, anxiety, and worry. For example:
 - A perception or sense that many people are falling ill;
 - A perception or sense that many people are experiencing bad illness;
 - A perception or sense of vulnerability to contracting and experiencing bad illness

Influenza Immunization Communication Challenges (2)

- Some component of success (i.e., higher demand for influenza vaccine) stems from media stories and information that create motivating (i.e., high) levels of concern and anxiety about influenza.
- Inducing worry, raised anxiety, and concern in people brings forth a number of issues and presents many dilemmas for health care professionals.

And Can Leave You Searching for the "Holy Grail" of Health Communication (Lanard and Sandman, 2004)

The belief that you can inform and warn people, and get them to take appropriate actions or precautions with respect to a health threat or risk without actually making them anxious or concerned. (Remember the quiz?)

This is not possible. Rather "*This is like breaking up with your boyfriend without hurting his feelings. It can't be done.*"

One has to wonder why a federal agency would have to resort to "(i)nducing worry, raised anxiety, and concern in people" to get them to buy the flu vaccine. Is this truly about public health? If so, why the obviously inflated figures? At what point will our government accept the will of the people regarding their own health? At what point are the means no longer justified by the end?

Reference

1. Doshi P. Are U.S. flu death figures more PR than science? *British Medical Journal*, Dec. 10, 2005;331:1412.
2. Thompson WW, Shay DK, Weintraub E, et al. Mortality associated with influenza and respiratory syncytial virus in the United States. *Journal of the American Medical Association* 2003;289:179-86.
3. Nowak D. *Planning for the 2004-05 Influenza Vaccination Season: A Communication Situation Analysis*: www.ama-assn.org/ama1/pub/upload/mm/36/2004_flu_nowak.pdf.

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