

Immunizer Profile: Peggy Allan, Public Health Nurse



Corner Brook, Newfoundland and Labrador

Peggy Allan (left) and Dr. Susan Gillam (right), Chief Executive Officer of Western Health, reviewing some promotional materials for National Immunization Awareness Week 2010. Dr. Gillam is a former public health nurse and a strong advocate of vaccination programs.

Peggy Allan is employed by Western Health Authority located in Corner Brook, NL, nestled in the beautiful Bay of Islands. She has been a public health nurse throughout her career and currently holds the position of Communicable Disease Control Nurse with responsibilities for the immunization program in the region. When she began work as a public health nurse, the immunization program was an important part of her role; she feels that it saved the lives of many Canadians. In her career, she has witnessed the implementation of several vaccine programs, such as Haemophilus influenzae B (Hib) vaccine, that have had a significant impact on the survival of many Canadian children. Ms. Allan notes that, prior to the introduction of Hib vaccine, Haemophilus influenzae type b bacteria was the most common cause of bacterial meningitis and a leading cause of other serious invasive infections in young children, with a case fatality rate of 5%. Before the universal immunization program was introduced in Canada, there were about 686 cases per year¹; now there are only rare cases.

Meningitis caused by this pathogen had a devastating impact on the children whom it affected and their families. Peggy can still recall babies in this community who contracted this disease and whose lives were cut short as a result. To see the impact of this particular vaccine has been very rewarding for Peggy. Public health nurses have certainly played a big part in reducing the incidence of disease through the Hib immunization program.

These programs and statistics have motivated Ms. Allan during her career. Diseases that once had a very negative impact on the lives of Canadians have now been brought under control. Prior to the introduction of measles vaccine in Canada, measles outbreaks produced 300,000-400,000 cases per year. Among these cases in Canada, an estimated 1 of every 3000 cases resulted in death². The current 2 doses of measles, mumps and rubella (MMR) vaccine introduced in Canada in the mid-1990s have not only interrupted the transmission of measles in Canada but helped bring us closer to measles elimination. More recently, the introduction of pneumococcal, meningococcal meningitis group C and varicella vaccine will also reduce the burden of these illnesses among the population.

Ms. Allan says, "I feel very proud to have been part of a team of immunizers who have played a role in the success of these vaccine programs." She adds that, in Newfoundland and Labrador, the vaccine programs were also supported by Dr. Faith Stratton, Provincial Chief Medical Officer of Health. She commended Dr. Stratton's insight through the years by overseeing the implementation of many of these vaccine programs.

Reflecting on the success of Canada's national immunization programs, Ms. Allan congratulates the Canadian Public Health Association on the occasion of its 100th anniversary.

¹ National Advisory Committee on Immunization: *Canadian Immunization Guide*, 7th edition, 2006, p. 172 http://www.phac-aspc.gc.ca/publicat/cig-gci/pdf/cig-gci-2006_e.pdf

² *ibid.*, p. 228



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