RESULTS

A total of 131 pregnant women admitted at the Emergency Room and/or at the Department of Obstetrics and Gynecology of University “Federico II” of Naples were enrolled from March and September 2016. A multiple choice questionnaire was proposed to those patients, in order to investigate their immunoprophylaxis profile and their perceived risk related to CRS.

One hundred patients (76,3% of the total) declared not to be vaccinated against rubella: 32 women (24,4%) among them said to have been affected by rubella, 2 patients (1,5%) assumed that vaccine is dangerous, 18 (13,7%) didn't think that vaccination is important and 53 (40,4%) declared not to be informed about; 24 missing data (18,3%). At the same time, 19 patients (14,5% of the total) declared to be vaccinated against Rubella and 12 patients (9,16% of the total) declared not to be informed about their serological status.

65 patients (49,6%) admitted to be not enough informed about the consequences of CRS: 49 of them (37,4%) stated to have not been informed about, while 19 from the same percentage (14,5%) told us to have been trained from the gynecologist but didn't care about. 66 patients (50,3% of the total) were informed yet about the consequences of CRS at the moment of the enrollment.

Moreover, 85 patients (64,8%) stated to be willing to vaccine themselves once conscious about the risk related to CRS, while 18 (13,7%) declare not to be in favor of vaccination anyway: 7 (5,3%) of them said to be scared about vaccination, 9 (6,8%) admitted not to be informed about risks related to vaccination side effects, 3 (2,2%) considered dangerous the vaccination. One patient (0,4% of the total) still doesn’t know if access to vaccination after receiving clarification about the risks related to CRS. 25 missing data (19,08% of the total).

57 (43,5%) of pregnant women ignored those information about rubella and CRS at the moment of the enrollment, as well as the importance of vaccination before or after the pregnancy, while 74 patients (56,4% of the total) were informed yet. Of them, 17 (12,9%) have been informed by their general practitioner, 30 (22,9%) by the gynecologist, 16 (13,7%) by their family members, 7 (5,3%) by TV programs, 15 (11,4%) by web sites, 2 (1,5%) by friends, 3 (2,2%) by other way. 54 missing data (41,2%).

The total amount of participants in the study found interesting those information.

Briefly analyzing those data, we figured out that the majority of our patients (76,3% of the total) were not vaccinated at the moment of enrollment justifying themselves to be not enough informed about or to have been still affected by rubella in the youth. Moreover, we got useful data on misinformation about congenital rubella syndrome (CRS) but at the same time, we are able to assume that, once informed, mostly of our patients (64,8% of the total) are willing to vaccine themselves against rubella. Regarding that, the statistical analysis conducted using SPSS 18.0 for Mac OS revealed a significant statistical difference at the chi square test (P= 0.002) between patients not vaccinated against rubella (76,3%) and a proportion of them that, after this campaign, could be interested in vaccining themselves (64,8% of the total). Among them, the brief sample that still prefer not to access to vaccination, despite this informative campaign, can’t explain the motivation of this choice (85,4% of the total) or stated to be not informed enough to take such an important decision (6,8% of the total): this means that is necessary to improve the capillary diffusion of those information. Focusing on pregnant women enrolled in the study who were yet informed about CRS consequences, we conducted a linear regression analysis to explain the relationship among the source of those information and the trust placed in from our patients in terms of access to vaccination and we figured out a strong, statistically significative correlation, between the figure of gynecologist or the family physician in carrying those information. The

weakest correlation is the word-of-mouth, this is why we decided to produce and distribute a vademecum (fact sheet) in order to improve this gap.

The total amount of interviewed patients assumed that this initiative is useful.