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Letter to the Editor

COVID-19 vaccination status and related process of care outcomes

Dear Editor,

We would like to share ideas on the publication "COVID-19 vaccination status and related process of care outcomes among U.S. adults with Active Epilepsy-National Health Interview Survey, United States, 2021 [1]." According to Kobau et al., in 2021, the receipt of one COVID-19 vaccine among U.S. people with current epilepsy was comparable to that of those without a history of epilepsy [1]. According to Kobau et al., persons aged 18–44 years with current epilepsy were considerably less likely to have reported receiving two COVID-19 immunizations than their counterparts without a history of epilepsy [1]. Adults with active epilepsy had similar experiences and outcomes regarding COVID-19 testing and accessing health treatment throughout the COVID-19 pandemic, according to Kobau et al. [1]. According to Kobau et al., this study provides baseline estimates of select COVID-19 outcomes among U.S. people with active epilepsy to guide interventions and future research [1].

Regarding the vaccine hesitancy among the cases with underlying epilepsy, the most important concern is the reliability of a vaccine and in this regard, two health agencies, the WHO and the FDA, are the most trusted organizations to approve a vaccine against COVID-19 [2].

Efforts to broaden vaccination acceptability deserve praise. Concerns are voiced each time a new COVID-19 vaccination is created and made accessible to the general population. Residents may experience anxiety if they learn that a harmful effect is present. How well the COVID-19 vaccination is received can be significantly influenced by community trust in the public health system [3]. Patients with underlying illnesses, such as epilepsy, are given priority when it comes to vaccine allocation in our environment in Indochina. The COVID-19 vaccination is given to registered epilepsy cases during a follow-up appointment for their neurological condition [4]. Knowledge about immunizations may occasionally cause local vaccination resistance. The public's waning confidence in regional public health management systems must be taken into account when analyzing resistance in any setting [3]. The underlying local COVID-19 vaccination regulations have a substantial impact on the rate of immunization uptake. The mandatory vaccination policy is in place in many developing nations in Asia, and it may help to boost adoption but it might also be related to stress and hesitancy in some specific populations [4]. The rollout of the vaccine has also been flexible in our particular setting, Cambodia, shifting from a strategy of prioritizing risk groups and crucial workers to one of expanding the campaign from population centers to rural areas and gradually expanding the target age group, which includes patients with underlying neurological diseases [5]. Cambodia has attained 95% primary series coverage as a consequence of the government's strong commitment and adaptable reaction [5].

Additionally, as environmental factors and the timing of the COVID-19 epidemic change, so does the pattern of resistance [6]. Therefore, in the context of the study, the history of the COVID-19 outbreak must be covered. Even if the pandemic's circumstances altered, it does not seem likely that the vaccination's acceptance rate would change. The identified pattern of reluctance may be useful for future research.

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Consent for publication

Agree.

Authors' contributions

AK 50% ideas, writing, analyzing, approval for submission.
VW 50% ideas, supervision, approval for submission.

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Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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