



## Tina Q. Tan

Attending Physician, Division of Infectious Diseases; Medical Director, International Adoptee Clinic; President, Lurie Medical/Dental Staff, Ann & Robert H. Lurie Children's Hospital of Chicago; Professor of Pediatrics, Northwestern University Feinberg School of Medicine, Chicago, Illinois, USA; Immediate Past President, Infectious Diseases Society of America (IDSA)

“Infections are just a plane, bus, train, and boat ride away,” given the massive and effective means of transportation that are currently available globally”

Citation:

Respir AMJ. 2026;4[1]:88-89.  
<https://doi.org/10.33590/respiramj/076TM94Q>

**Q1** Over the course of your career, your role has evolved from frontline clinician to national and international thought leader in infectious diseases and immunization policy. How has your understanding of respiratory disease management changed over time, particularly in relation to prevention, multidisciplinary care, and public health preparedness?

My understanding of respiratory disease management has definitely increased substantially over time, and I really emphasize the importance of vaccinating to protect against diseases if a vaccine is available. Healthcare providers in all areas of practice should provide information to their patients on the benefits and importance of vaccines against pertussis, influenza, COVID-19, respiratory syncytial virus (RSV), and pneumococcal disease.

**Q2** Several recent US respiratory studies have examined the long-term pulmonary impact of viral respiratory infections in children, including post-COVID-19 respiratory sequelae and RSV-associated morbidity. From your perspective, what are the most important lessons clinicians should take from these emerging findings, and how should they influence pediatric respiratory practice?

These studies really illustrate that these diseases are serious and not benign, and they can cause serious sequelae that may last a very long time. The findings should motivate healthcare practitioners to find available ways to prevent patients from developing these diseases,

with vaccination being the most effective tool. The providers should take the time and make the effort to explain that vaccination is very safe and effective and is the best method for protecting patients against disease.

**Q3** Recent US-based research has also highlighted the growing challenge of antimicrobial resistance in respiratory infections and the importance of vaccination strategies in reducing severe respiratory disease burden. Which findings from these studies do you believe are most likely to change clinical practice in the coming years, and why?

The findings that are most likely to have an impact on clinical practice are those regarding the development of resistance to all common oral antibiotics. This will be most important in situations where a patient is placed on an antibiotic “just in case” they have a bacterial infection, when they really have a viral infection, and in countries where antibiotics are available over the counter and where patients are frequently placed on antibiotics “just in case.” The findings also emphasize the importance of preventing patients from developing diseases for which vaccines are the most effective tool.

**Q4** Many respiratory challenges, including vaccine inequity, antimicrobial resistance, and the resurgence of vaccine-preventable respiratory illnesses, extend far beyond national borders. How do you see the relationship between pediatric respiratory care in the US and broader global health trends?

“Infections are just a plane, bus, train, and boat ride away,” given the massive and effective means of transportation that are currently available globally. Organisms that cause respiratory infections can easily spread around the world. For example, this has been seen with measles, where unvaccinated individuals contract the disease while they are abroad and bring it to the US. This has occurred with pertussis, mycoplasma, RSV, influenza, and COVID-19, to name a few organisms. Many countries are not fortunate enough to be able to vaccinate against all the diseases and provide vaccines for people of all ages, as we are able to do here in the US. Vaccine-preventable diseases endemically circulate in these countries and increase the risk of unvaccinated individuals acquiring them.

Last year, I gave several keynote lectures at the Puerto Rico Infectious Diseases Society (SEIPR) Annual Meeting, one of which was on the importance of vaccines for persons of all ages. After the lecture, I was asked by multiple adult infectious diseases practitioners if they should get a tetanus, diphtheria, and pertussis vaccine because they now understand that they are at risk for pertussis. Following this Meeting, I gave several keynote lectures at the Japanese Infectious Diseases

Society Annual Meeting. Three weeks prior to the Meeting, I was contacted by the chair of the session and asked if I could give a lecture on pertussis and pertussis vaccines, given that a massive pertussis epidemic had just started in Japan. I gave the lecture and was swamped by healthcare providers asking if they should get a pertussis vaccine for themselves and for their families. It is evident that more vaccine education is needed for adult providers.

**Q5** Given your work in international patient services, travel medicine, and adoption medicine, what global respiratory health issues do you believe deserve greater international collaboration and policy attention over the next decade?

The global respiratory health issues that deserve greater international collaboration and policy attention include pertussis, influenza, RSV, COVID-19, pneumococcal disease, diphtheria, tuberculosis, and mycoplasma. One of the biggest issues worldwide is a massive increase in vaccine hesitancy. The American Academy of Pediatrics (AAP)'s Global Immunization Advocacy Pediatric Advisory Committee, which I chair, has been working for years to put together training on vaccines to address vaccine hesitancy for healthcare practitioners in other countries and increase vaccination rates of all available vaccines in the country. This has been very successful at increasing the ability of healthcare providers to address vaccine hesitancy, discuss the importance of vaccines with parents, and increase vaccination rates.

**Q6** Looking ahead, which innovations or developments in respiratory medicine and infectious disease prevention are you most excited about, from next-generation vaccines and monoclonal antibodies to advances in diagnostics, surveillance, or precision medicine?

The innovations and developments that I am most excited about include the development of technology to produce next-generation vaccines and monoclonal antibodies, major advances in our ability to make diagnoses more rapidly, and increased development of local, statewide, and nationwide surveillance and precision medicine programs. All of these will provide increased protection for people of all ages against potentially serious infections.

**Q7** As respiratory medicine continues to evolve in the post-pandemic era, what do you hope the future of pediatric respiratory care will look like, and what areas of research or clinical practice do you believe will define the next generation of progress?

My hope for the future of pediatric respiratory care is that effective vaccines continue to be developed, precision diagnostic testing becomes available, and that healthcare practitioners continue to be strong vaccine advocates and utilize vaccines to protect their patients.

**My hope for the future of pediatric respiratory care is that effective vaccines continue to be developed**