

## 5-in-1 vaccine to be introduced in Kerala, TN

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In a big boost to immunisation efforts, a high-level technical advisory group has recommended expansion of the costly Hepatitis B vaccine throughout the country and its inclusion in the Universal Immunisation Programme (UIP) and a limited introduction of pentavalent vaccine in the vaccination programme of Tamil Nadu and Kerala.

Lower respiratory tract illness is one of the major causes of child mortality and morbidity. The pentavalent vaccine is expected to reduce deaths caused due to Hib pneumonia and meningitis.

The decisions were taken at a recent meeting of the National Technical Advisory Group on Immunisation (NTAGI), chaired by Union Health Secretary K Sujatha Rao and co-chaired by Director General of Indian Council of Medical Research (ICMR) and Secretary of Department of Health Research VM Katoch.

NTAGI recommended that pentavalent vaccine, a combination of Hepatitis B, Hib and DPT vaccines, be introduced in the immunisation programmes of Tamil Nadu and Kerala as these



The pentavalent vaccine is expected to reduce deaths caused due to Hib pneumonia and meningitis. Besides expansion of the costly Hepatitis B vaccine throughout the country and its inclusion in the Universal Immunisation Programme has been recommended

States have better vaccine delivery systems and Adverse Events Following Immunisation (AEFI).

The group also recommended that the data gathered after immunisation in these two States be analysed after a year before its expansion in other States.

The ICMR will prepare a protocol for surveillance of Hib meningitis in selected hospitals to understand the trend over time. The advisory group also recommended that surveillance system be strengthened to ensure immediate

management of AEFIs and the National Centre for Disease Control (NCDC) would lead the efforts in that direction.

The minutes of the NTAGI meeting said, "In view of the disease burden and availability of safe and efficacious vaccine, the expansion of Hepatitis B vaccine should be carried out all across the country as part of Universal Immunisation Programme. Before rolling out in newer areas, there should be a plan for training and micro-planning.

Simultaneously, multi-centred impact study on carrier rate of Hepatitis B will be conducted by the ICMR.

The advisory group meeting was unanimous about the need for a Multi-year Strategic Plan 2010-17 for Universal Immunisation Programme and a national vaccine policy for comprehensively addressing vaccine-preventable disease surveillance. The group was also unanimous about creation of a National Immunisation Authority as the current technical structure of only three technical officers managing the immunisation programme in the entire country is a daunting task.

The Indian Institute of Management, Ahmedabad is conducting a study on the HR (Human Resource) structure required for immunisation programme in the country and the group demanded that this study should be expedited.

Others who attended the NTAGI meeting included Director General Health Services Dr RK Srivastava, former DG OF ICMR Dr NK Ganguly, Head of Department of Pediatrics of AIIMS Prof AP Dubey and experts from WHO, PGIMER, UNICEF and immunisation consultants.

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