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News

Paraguay's EPI successfully completes training on fIPV administration

Sonia Arza F., Mirian Medina, Leticia Núñez, Zuluy Suárez, PAHO-Paraguay (EPI)

Paraguay's EPI successfully completed a series of trainings on fractional dose IPV (fIPV) in December 2017. There were 19 trainings at the national level and 250 at the sub-national level, consolidating efforts to sustain the goals achieved to date, and addressing challenges faced during the measles and rubella post-elimination era and the global polio elimination strategy.



fIPV training in Paraguay. Credit: Ministry of Health, Paraguay.



fIPV training in Paraguay. Credit: Ministry of Health, Paraguay.

With the premise that *"no country is exempt from the entry of diseases imported from other latitudes, but we can prevent their spread in our territory,"* the strategic axes served were: high homogeneous vaccination coverage; maintaining high surveillance indicators for preventable diseases, and; activating an eloquent, effective and efficient rapid response team, for prompt intervention to interrupt any chain of transmission.



fIPV training in Paraguay. Credit: Ministry of Health, Paraguay.

The capacity at the operational level to administer fIPV via intradermal administration was evaluated in the field and informed the development of the training on fIPV .

The entire process was financed by the country itself as a sign of empowerment and sustainability. In the same way, primary immunization registries and vaccination notebooks for boys and girls were adapted, prepared and consolidated.



fIPV training in Paraguay. Credit: Ministry of Health, Paraguay.

The fIPV guidelines were also incorporated into the National Vaccination Standards in its third edition, updated in the last five years, preparing responses where needed, and informed by the head of the study, Prof. Dr Sonia Arza.

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Denmark campaign rebuilds confidence in HPV vaccination

When Eigil Rosegar Poulsen first heard about the controversy over the human papilloma virus (HPV) vaccination in Denmark, he became quite upset. Still, the debate sparked a desire to share his story.

In 2010 Eigil lost his wife, Trine, to cervical cancer—a disease caused by the HPV virus—leaving him to raise their three daughters alone. Though the WHO-recommended vaccine against the most common types of the virus was only introduced in Denmark's child vaccination schedule in 2009, far too late for his wife to benefit, Eigil is a strong advocate for vaccination.

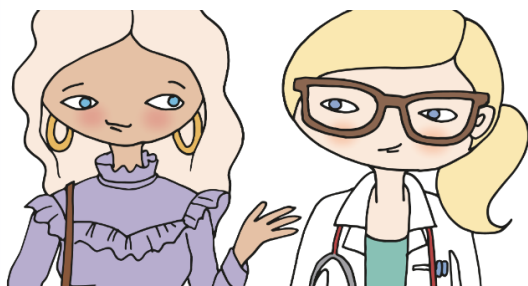
"It's fantastic that you can manage a disease as serious as cervical cancer with a vaccine. But it has made me sad to see the debate," he says. "Nobody wants to experience what we have been through. And if that can be avoided with a vaccine, I find it hard to understand why parents would opt out."

Opting out, however, has become a big problem in Denmark. Since 2014, HPV vaccination coverage among 12-year-old Danish girls has dropped dramatically from around 90 % in previous cohorts to below 40 % due to safety concerns about the vaccine.

Reports were circulating in the media of symptoms, such as pain and tiredness, in girls who had the vaccine. An increasing volume of studies have since found these symptoms have no causal relationship to the vaccine.

To help understand why so many parents of girls around 12 years of age were postponing vaccination, the Danish Health Authority conducted an analysis in 2016. It found that nearly all parents who doubted whether to vaccinate their daughters had heard stories about the suspected side-effects, primarily through media and online.

A year later, the Danish Health Authority, the Danish Cancer Society and the Danish Medical Association launched the campaign, "Stop HPV, Stop Cervical Cancer," to help build confidence in the vaccine and remind people that the



Campaign material from Stop HPV - stop livmoderhalskræft in Denmark

risk of getting cervical cancer far outweighs the risk of adverse vaccine events. The campaign pitched articles about how to prevent cervical cancer to newspapers and lifestyle magazines throughout the country, and started a Facebook page to help answer parent questions and share stories, such as Eigil's.

"Much of the debate about the HPV vaccine takes place on Facebook, and this is where many parents get their information. This page is a way for us to reach out to the parents and create an opportunity for an open dialogue," says Louise Hougaard Jakobsen, consultant at the Danish Cancer Society. "We are open to all kinds of comments and questions we receive on the page and we seek to always be accommodating in our replies."

New data reveals that less than nine months into the campaign, uptake in the number of vaccines is already increasing. During the past year, twice as many girls – nearly 31 000 girls – have started the HPV vaccination programme compared to just over 15 000 in 2016.

More information on this story is available at this [link](#).



Stop HPV - stop livmoderhalskræft

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Past Meetings/Workshops

Cold chain training workshop in repair, electricity, refrigeration and handling of the Electronic Data Recorder in Peru

Samia Samad, PAHO-Peru and Doris Rojas Peña, Ministry of Health, Peru

Location: Four regions in Peru (Arequipa, Lima, La Libertad and Junín)

Date: October, November and December 2017

Participants: 175 technicians and nurses responsible for the cold chain at all levels of immunization management

Purpose: Ensure proper functioning of all cold chain equipment, for adequate conservation of vaccines with the optimum temperature at all stages of transportation and storage, from the national level to the point of administration.

Details: Expansion of the country's cold chain capacity has made it possible to improve vaccine conservation at all levels. This investment made by the country must be accompanied with effective equipment management through specialized, timely, and corrective maintenance by cold chain technicians in refrigeration and electricity.

To this end, PAHO's office in Peru coordinated four macro-regional workshops to reinforce the technical skills of cold chain personnel in the areas of electricity, refrigeration and management of the data recorder, together with the Executive Directorate of Immunization/General Directorate of Strategic Public Health/Ministry of Health.

The 40-hour classroom workshops were carried out through the National Industrial Work Training Service (SENATI), an institution accredited in the country, which provided professional training to the 175 workshop participants.

The minimum final grade for each participant was 13 points for a curriculum with topics about circuits, dashboards, maintenance of the fan motor, compressor motor, contactor, charger alarm circuit, electricity, high and low pressure circuit leak detection, fault detection solenoids, refrigerant gas charges, data recorder within the electrical system, management, programming, recording, reporting, reading analysis and breaks.

Given that 97% of the participants had received their certificate of approval with grades of 14.5, results were excellent at the end of the course, exceeding expectations from the organizers and raising the knowledge level on the subject.

PAHO's support for this training made it possible to ensure the preventive and corrective maintenance of the cold chain equipment for the Ministry of Health and for the country, ensuring that nurses responsible for the cold chain know the proper handling of the data recorder, evidenced as such in the monthly reports made at all levels of immunization management.



Cold chain training in Peru. Credit: PAHO/WHO.



Cold chain training in Peru. Credit: PAHO/WHO.



Regional new vaccines surveillance workshop

Jennifer Sanwogou, Octavia Silva, PAHO-Washington, DC

Location: Lima, Peru

Date: 6-8 December 2017

Participants: 65 participants from ten countries in the Region of the Americas attended a workshop in Peru on Regional New Vaccine Surveillance. The participants included the National Responsible for Epidemiology for New Vaccines Surveillance, the person at the national level responsible for laboratory for bacterial diseases and the PAHO immunization focal points for Argentina, Bolivia, Colombia, Ecuador, Honduras, Nicaragua, Paraguay, Peru and Venezuela.



Purpose: To discuss regional advances and challenges within the sentinel hospital epidemiological surveillance of bacterial pneumonia, bacterial meningitis and rotavirus, carry out data quality controls and discuss next steps for the Global New Vaccine Surveillance Network.

Participants from the Regional New Vaccines Surveillance Meeting, Peru, December 2017. Credit: PAHO/WHO.

Details: The two-day meeting was split into three main topics: general presentations from PAHO and sentinel hospitals about new vaccine surveillance in the Region, presentations and discussions on the new web-based system for vaccine surveillance and a review of data quality in the Region, as well as a practical training for the hospitals to investigate and describe their own data quality issues.

Starting in January 2018, sentinel surveillance data will only be received through the VINUVA cases tool. The PAHO team will be available to facilitate the use of this tool. Data in the Excel tool will no longer be accepted.

Main outcomes and recommendations from the meeting included:

- Data analyses should be done at the local level.
- Laboratory quality control results are now available through the Public Health England website (www.ukneqasmicro.org.uk).
- It is important to remember that sentinel surveillance is part of a joint effort of the clinical, epidemiological and laboratory staff, coordinated with the immunization teams, which at the regional level becomes evident given that the programme is part of the Regional EPI. This highlights the viewpoint that the function of immunization programmes is not only to vaccinate, but also to develop the immunization policies of their territories and to provide the evidence that is required in public health.
- PAHO/WHO needs to further investigate the need for offline access to the web-based system.

Thirteenth intercountry meeting of national managers of the Expanded Programme on Immunization and 17th intercountry meeting on Measles/Rubella control and elimination

Irtaza Ahmad Chaudhri, WHO EMRO

Location: Muscat, Sultanate of Oman

Date: 10-13 December 2017

Participants: The two meetings were attended by more than 140 participants, namely EPI managers, Surveillance officers, NITAG chairs as well as partners including UNICEF at headquarters, regional and country levels, CDC, EMPHNET, Gates Foundation and IFRC partners, in addition to WHO staff from headquarters, EMRO and countries.

Purpose:

- Review countries' progress towards achieving the regional immunization targets including routine immunization, Measles elimination and Hepatitis B control targets within the context of the Eastern Mediterranean Vaccine Action Plan (EMVAP);
- Brief participants on the latest updates for improving immunization programmes;
- Review countries' progress in implementation of national plans and discuss and update the key planned activities and need for TA for strengthening routine immunization, measles/rubella elimination and control, and Hepatitis B control programmes.

Details: The meetings were opened by WHO Representative for Oman, who read the message of Acting Regional Director EMRO. Regional and global updates on Immunization and Measles/rubella elimination were shared with participants. EPI managers shared their specific experiences including the experience of working in humanitarian situations. Measles outbreaks in low and high incidence countries and the challenges to reach elimination was also shared by several countries including Oman, Palestine, Somalia and Sudan. Group work was organized where countries were divided into four groups for routine immunization and five groups for measles. During this activity, countries shared their situation analysis, successes and challenges for the EPI programmes, activities planned for 2018-2019 as well as support needed from partners. Based on the deliberations of the meeting, draft recommendations were prepared and shared with the participants for their inputs.



Participants at the EPI Managers/MR meeting 10-13 Dec



Participants at the Gavi RWG meeting 15-16 December 2018

Inauguration and training of members of the National Immunization Advisory Group (NITAG) for Angola

[Jean Marie Kipela](#) and [Fekadu Lemma](#), WHO Country Office, Angola

Location: Luanda, Angola

Date: 8-11 January 2018

Participants: 32 participants: Newly appointed members of the NITAG, Vice Minister of Health for public health, Vice Minister of Health for curative services, the national Director of public health, representatives of country offices of WHO and UNICEF, the NITAG secretariat, and partners (WHO, UNICEF, and GAVI).



Purpose: - To officially launch the NITAG for Angola
- To train the members of the NITAG and the secretary in accordance with WHO guidelines.

Inaugural ceremony of the NITAG, chaired by excellencies Vice Ministers of Health Dr Jose Manuel Dias da Cunha and Dr.Valentim Altino de Chantal Matias



Closing remarks by her excellency, the Minister of Health of Angola Drª Sílvia Paula Valentim Lutucuta

Details: The Angolan NITAG was created in December 2017 through ministerial Order 000648/GAB.MIN/MS/2017.

On 8 January 2018, the Vice Minister for public health on behalf of the Minister of Health of Angola officially launched the NITAG. During this ceremony the representatives of WHO and UNICEF emphasized the importance of countries to be committed to vaccination as a priority and the need of an advisory body for better credibility and sustainability of the programme. The Angolan NITAG is composed of nine core members representing six areas of specialization, members of academic and professional associations.

The launching ceremony was followed by a three-day training workshop facilitated by an independent consultant Dr Antoinette Ba and the president of the Mozambique NITAG, Dr Jahit Sacarlal. The methodology used was plenary presentations, interactive practical demonstrations and group work. The training started with a briefing of participants about the GVAP, the regional and national immunization strategic plan.

For the basic training, the WHO training materials were used. The major topics covered were: global and national immunization landscapes and considerations for health systems, mode of operation for an efficient NITAG, the content of NITAG working documents and methodologies for issuing evidence-based recommendations. Time was also allocated for validation of the Angolan NITAG procedure manual and sharing of experiences from the Mozambique NITAG.

After the intensive three-day training workshop, the meeting was closed by developing the following recommendations for the way forward:

- Finalize the internal procedure manual
- Meet national MoH authorities to identify priorities
- Draft work plan for 2018
- Review working group terms of reference
- Develop terms of reference for the secretariat
- Strengthen the secretariat
- Organize the first NITAG meeting on 24-25 May 2018

Finally the workshop was closed by remarks of Her Excellency the Minister of Health of Angola Dr Sílvia Lutucuta.

Workshop to evaluate Paraguay's Expanded Programme on Immunization

Fabiana Michel and Luis Vera, Pan American Health Organization and Sonia Arza, Paraguay's Ministry of Health and Social Well-Being

Location: Asunción, Paraguay

Date: 19-22 January 2018

Participants: Technical teams from the EPI, epidemiological surveillance and from information subsystems from the EPI's 19 health regions, EPI national management, PAHO/WHO Representative in Paraguay and PAHO-Paraguay's immunization advisor

Purpose: To analyze the vaccination coverage reached by the health regions; analyze the surveillance indicators; strengthen participant knowledge in measles/rubella and polio surveillance in the post-elimination era, publicize the EPI Plan of Action for the first semester of 2018, among others.

Details: The evaluation identified important advances in EPI performance: opportunities for vaccination and supply management were improved and quality standards were met in relation to epidemiological surveillance indicators for vaccine-preventable diseases. Although there were many advances, there are still some challenges that will be refuted as long as high quality management is achieved at the operational level. In this way, more achievements will be added, mainly that of 95% coverage or more in all of the country's municipalities, with capacity being set in the three levels of programme management.



Participants at Paraguay's EPI evaluation. Credit: PAHO/WHO.

Immunization Information System: first meeting of regional focal points

Sebastien Antoni, Laure Dumolard, Marta Gacic-Dobo, WHO HQ

Location: Geneva, Switzerland

Date: 29-31 January 2018

Participants: Immunization/surveillance officers and data managers from all WHO Regional Offices and HQ, central IT, partners (US CDC, BMGF)

Purpose: Following an assessment of their immunization information systems, WHO HQ and Regional Offices agreed on the need to build a common integrated platform to improve the availability and use of immunization data. Each Regional Office nominated two focal points to be part of a working group assembled to provide technical guidance for this project, and hence, this was the first meeting of the working group. The scope and high-level characteristics of the future information system were defined and high-level implementation work started. A number of priority areas of work were identified and sub working groups were created to organize and move each of these areas of work forward. The first prototype version of the system, focusing on specific datasets, is expected by the end of 2018.

Resources

Special Issue of the Pan American Journal of Public Health expands on the journey of immunization in the Americas and celebrates the 40th anniversary of the EPI in the Region

This [special supplement](#) of PAHO's Pan American Journal of Public Health explores the past, present and future of immunization in the Region of the Americas through a variety of articles, detailing the colorful trajectories that have paved the way towards eliminating vaccine-preventable diseases like polio, rubella, congenital rubella syndrome and measles, but also exploring more recent immunization developments in the Region, such as the Vaccination Week campaign and the introduction of new vaccines like the HPV vaccine to the Region's immunization programmes. The supplement also discusses the future of immunization in the Region and the challenges to be overcome.

Health worker training modules on pneumococcal disease and PCV10 4-dose vial presentation

[Carine Dochez](#), Network for Education and Support in Immunization (NESI)/University of Antwerp, Belgium and [Jhilmil Bahl](#), World Health Organization, Headquarters

Presently used Pneumococcal Conjugate Vaccines (PCV) in national immunization programmes include PCV10 and PCV13. Pneumococcal Conjugate Vaccines are highly effective and protect against severe forms of pneumococcal disease, such as meningitis, pneumonia and bacteraemia.

PCV10 presentations currently in use include a single and two-dose vial without preservative. Recently a new presentation of PCV10 has been developed, a 4-dose vial with preservative. When countries start using the new four-dose presentation, healthcare workers need to be trained on the correct use of this new presentation, including the use and handling of PCV10 multi-dose vials in accordance with WHO multi-dose vial policy.

To facilitate this process, NESI/University of Antwerp in collaboration with WHO/HQ, developed training modules on pneumococcal disease and PCV10 new multi-dose vial presentation. The training consists of seven modules, including a pre- and post-test to measure the impact of the training programme. The total duration of the training is approximately three hours. Any country moving from the PCV10 mono- or two-dose vial to the four-dose vial can use the training modules to prepare the country for the change.

[Module 1: Pre-test questions](#)

[Module 2: Key facts on pneumococcal diseases](#)

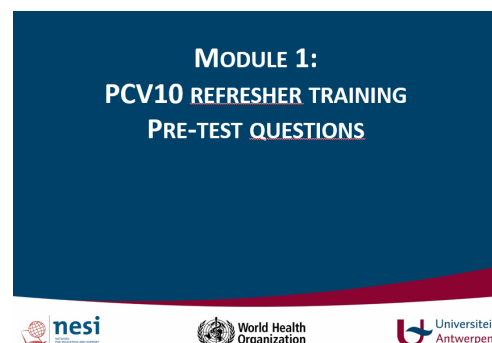
[Module 3: Key facts on pneumococcal vaccine](#)

[Module 4: Storage and handling of PCV10 4-dose vial](#)

[Module 5: Organizing an immunization session with PCV10 4-dose vial](#)

[Module 6: Communication with caregivers on pneumococcal disease and vaccine](#)

[Module 7: Post-test questions](#)



Development of visual aid for the multi-dose vial policy

Ana Elena Chevez, Eduardo Rivero, Nora Lucia Rodriguez and Elizabeth Thrush, PAHO

In light of the limited global supply of the inactivated poliovirus vaccine (IPV), the PAHO Immunization Unit wanted to find ways to help countries strengthen compliance with the Multi-dose Open Vial Policy of the World Health Organization (WHO). For this reason, a large magnet was designed that can be placed on the refrigerators of the vaccination centers.

The material highlights the recommended time a multi-dose vial should be used, according to the type of vaccine:

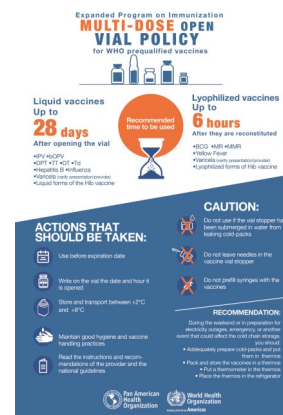
- Liquid vaccines up to 28 days after opening the vial: IPV, bOPV, DPT, TT, DT, Td, hepatitis B, influenza, varicella (verify presentation/provider) and liquid forms of the Hib vaccine.
- Lyophilized vaccines up to six hours after they are reconstituted: BCG, MR, MMR, yellow fever, varicella (verify presentation/provider) and lyophilized forms of Hib vaccine.

During the weekend of preparation for an electricity outage, emergency or another event that could affect the cold chain storage, you should:

- Adequately prepare cold-packs and put them in thermoses;
- Pack and store the vaccines in thermoses;
- Put a thermometer in the thermoses;
- Place thermoses in the refrigerator.

The magnet designs are available in English, Spanish and French, and can be found on [PAHO's webpage](#).

Additionally, if anyone is interested in adapting these materials for their own country/Region, please feel free to contact [Ana Elena Chevez](#), Regional Advisor on Polio, [Nora Lucia Rodriguez](#), Cold Chain Specialist, or [Elizabeth Thrush](#), Immunization Specialist.



Calendar

March

6-8	Immunization Practices Advisory Committee (IPAC)	Geneva, Switzerland
14-15	Gavi Board	Evian-les-Bains, France
20-22	Global Vaccine and Immunization Research Forum (GVIRF)	Bangkok, Thailand
20-22	EPI Managers' Meeting for East & Southern Africa	Kigali, Rwanda

April

17-19	Strategic Advisory Group of Experts (SAGE) on Immunization	Geneva, Switzerland
17-19	Third Meeting of the South-East Asia Regional Verification Commission for Measles Elimination and Rubella/CRS Control (SEA-RVC)	Kathmandu, Nepal
23-29	European Immunization Week	Across Europe

May

1-3	Teach to Reach: Innovative Methods for Immunization Training	Tanzania
21-26	71st World Health Assembly	Geneva, Switzerland

June

6-7	Global Advisory Committee on Vaccine Safety	Geneva, Switzerland
12-14	Global Task Force for Control of Cholera (GTFCC)	Annecy, France
26-28	Global Immunization Meeting (GIM)	Kigali, Rwanda
29-30	Regional Immunization Technical Advisory Group (RITAG)	Kigali, Rwanda

August

27-29	13th International Rotavirus Symposium	Minsk, Belarus
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October

23-25	Strategic Advisory Group of Experts (SAGE) on Immunization	Geneva, Switzerland
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December

5-6	Global Advisory Committee on Vaccine Safety	Geneva, Switzerland
6-7	Global NITAG Network meeting	Ottawa, Canada

Links

Organizations and Initiatives

American Red Cross
[Child Survival](#)

Agence de Médecine Préventive
[Africhol](#)
[EpiVacPlus](#)
[LOGIVAC Project](#)

Centers for Disease Control and Prevention
[Polio](#)
[Global Vaccines and Immunization](#)

Johns Hopkins
[International Vaccine Access Center](#)
[VIEW-hub](#)

JSI
[IMMUNIZATIONbasics](#)
[Immunization Center](#)
[Maternal and Child Health Integrated Program \(MCHIP\)](#)
[Publications and Resources](#)
[Universal Immunization through Improving Family Health Services \(UI-FHS\) Project in Ethiopia](#)

PAHO
[ProVac Initiative](#)

PATH
[Better Immunization Data \(BID\) Initiative](#)
[Center for Vaccine Innovation and Access](#)
[Defeat Diarrheal Disease Initiative](#)
[Vaccine Resource Library](#)
[Malaria Vaccine Initiative](#)
[RHO Cervical Cancer](#)

Sabin Vaccine Institute
[Sustainable Immunization Financing](#)

UNICEF
[Immunization](#)
[Supplies and Logistics](#)

USAID
[Maternal and Child Health Integrated Program](#)

WHO
[Department of Immunization, Vaccines & Biologicals](#)
[ICO Information Centre on HPV and Cancer](#)
[Immunization financing](#)
[Immunization service delivery](#)
[Immunization surveillance, assessment and monitoring](#)
[National Immunization Technical Advisory Groups Resource Center](#)
[SIGN Alliance](#)

Other
[Coalition Against Typhoid](#)
[Confederation of Meningitis Organisations](#)
[Dengue Vaccine Initiative](#)
[European Vaccine Initiative](#)
[Gardasil Access Program](#)
[Gavi the Vaccine Alliance](#)
[International Association of Public Health Logisticians](#)
[International Vaccine Institute](#)
[Measles & Rubella Initiative](#)
[Multinational Influenza Seasonal Mortality Study](#)
[Network for Education and Support in Immunisation \(NESI\)](#)
[TechNet-21](#)
[Vaccine Safety Net](#)
[Vaccines Today](#)

WHO Regional Websites

[Routine Immunization and New Vaccines \(AFRO\)](#)
[Immunization \(PAHO\)](#)
[Vaccine-preventable diseases and immunization \(EMRO\)](#)
[Vaccines and immunization \(EURO\)](#)
[Immunization \(SEARO\)](#)
[Immunization \(WPRO\)](#)

UNICEF Regional Websites

[Immunization \(Central and Eastern Europe\)](#)
[Immunization \(Eastern and Southern Africa\)](#)
[Immunization \(South Asia\)](#)
[Immunization \(West and Central Africa\)](#)
[Child survival \(Middle East and Northern Africa\)](#)
[Health and nutrition \(East Asia and Pacific\)](#)
[Health and nutrition \(Americas\)](#)

Newsletters

[Immunization Monthly update in the African Region \(AFRO\)](#)
[Immunization Newsletter \(PAHO\)](#)
[The Civil Society Dose \(GAVI CSO Constituency\)](#)
[TechNet Digest](#)
[RotaFlash \(PATH\)](#)
[Vaccine Delivery Research Digest \(Uni of Washington\)](#)
[Gavi Programme Bulletin \(Gavi\)](#)
[The Pneumonia Newsletter \(Johns Hopkins Bloomberg School of Public Health\)](#)