

Deviations from Schedule

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Acknowledgement

Slides stolen from lots of places

Global Child Mortality

2000- deaths <5 years
~ 9.6 million



Immunisation
WASH
Education



2014- deaths <5 years
~ 6.2 million
(despite increase in number of children
born)

Table 2: Comparison of Key Human Development Indicators.

No	Indicator	Ireland	Zambia	Uganda	Malawi	Mozambique
1	Population	4.5 m	13.5 m	34.5 m	15.5 m	23.9 m
2	Size	70,283 km ²	752,614 km²	241,038 km ²	118,480 km ²	801,590 km ²
3	Population density	65	17	136	129	29
4	Human Development Rank (out of 187)	7	164	161	171	184
5	GDP per capita (PPP\$)	40,697	1,430	1,217	794	885
6	Life Expectancy at Birth	80.6	49	54.1	54.2	50.2
7	Income Gini Coefficient	34.3	50.7	44.3	39.0	45.6
8	Maternal Mortality Rate	3	470	430	510	550
9	< 5 mortality per 1000 live births	4	141	128	110	142
10	Population <5 suffering from stunting	0	45.8%	38.7%	53.2%	47%

¹⁰ The Human Development Index is used to rank countries by level of human development. It ranges from 0, poor human development, to 1, which indicates a high level of development.

¹¹ *ibid*

Suggested rules for Catch-up

- Plan on available evidence of previous vaccinations
- Observe minimal intervals and age
- Interval between doses may be reduced
- Number of doses may reduce with age (e.g. PCV)
- Recommended vaccines change
- Never restart schedule (except Cholera)
- May give all vaccines at one visit
- Schedule next visit for after the minimal interval
- Check rules on interchangeability of vaccines
- Use optimal intervals when child is back on course

Late entrants

Unless reliable documentation



Assume to be unimmunised

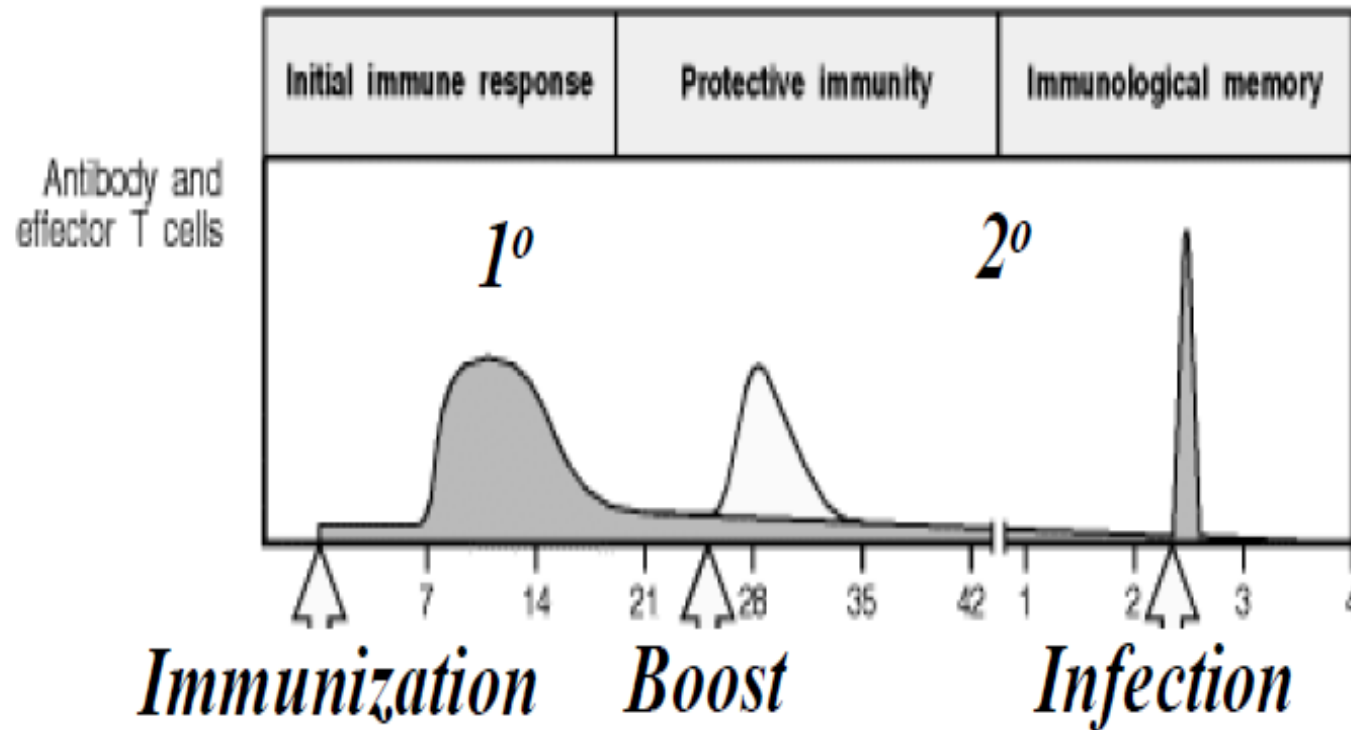


Catch-up programme

Gaps between vaccines

- To allow each immune response to develop – e.g primary immunisation (1 month)
 - allows 2nd response to be a true secondary response – faster, bigger and with higher affinity IgG
- To avoid immune interference
 - If another live vaccine is given while the immune system is making a primary immune response, activation of innate immune system may neutralise the second live vaccine.
 - Applies only to MMR, VZV, YF

Immune Response



General Issues

- Accelerated Primary Schedule recommended for children not immunised in 1st year of life
- 6in1, Men C, MMR can be given at the same visit – minimum 2.5cms apart
- Always give completed hand held record
- If serious local AEFI, assess before additional doses of that vaccine are given
- Adverse reactions should be notified to HPRA

- Records may not be accurate – accept with caution
- Inefficacy of vaccines may be due to :-
 - Improper storage or handling
 - Immune defects (e.g.severe malnutrition)

Summary

- No need to restart incomplete course
- Access information about schedules in other countries via websites
- Vaccinate late entrants according to new schedule