



GLOBAL IMMUNIZATION NEWS

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30 June 2008

TECHNICAL INFORMATION

MATERNAL & NEONATAL TETANUS

30/06/08 from Jos Vandelaer, WHO/UNICEF Geneva:

In May 2008, Bangladesh was validated as having eliminated maternal and neonatal tetanus. Two separate community-based surveys, in Sunamganj and Rangamati districts, showed that NT incidence had fallen to below the elimination threshold level of 1 NT case per 1000 live births at district level. As these two districts had been chosen for their perceived higher risk for MNT, all other districts, perceived to be at lesser risk, can be considered to also have eliminated MNT. MNT elimination in Bangladesh is a major achievement: prior to the introduction of tetanus toxoid immunization, community-based surveys in the 1970s and early 1980s showed that in some areas of Bangladesh, between 24 and 41 per 1000 newborns died of neonatal tetanus, and that in these areas up to half of all neonatal deaths were due to NT. The progress has thus been enormous, mainly due to very high TT coverage in routine immunization (complemented by targeted TT SIAs), and to a better use of trained assistance during deliveries.

In June 2008, Himachal Pradesh and Gujarat became the 14th and 15th State in India that were validated as having eliminated MNT. All the 15 States and Union territories that have so far been validated in India have achieved MNT elimination with high coverage of routine TT immunization and/or clean deliveries practices, and without TT SIAs. It is still determined in which of the remaining States MNT has also been eliminated and where not, what action would be required to still achieve MNT elimination. A data review later in the year, possibly followed by additional surveys, may bring more clarity on this issue.

NEW & UNDER-UTILIZED VACCINES IMPLEMENTATION

30/06/08 from Patrick Zuber, WHO/HQ:

The Global Meeting on Implementing New and Under-utilized Vaccines was held in Montreux, Switzerland from 23-25 June 2008. The meeting was organized by the New and Under-Utilized Vaccines (NUVI) group of the Department of Immunization, Vaccines and Biologicals, Expanded Programme on Immunization (IVB/EPI), and was attended by over 100 participants from Ministries of Health, technical agencies, donors, industry, as well as UN agencies.

The plenary part of the meeting served as a forum to improve the understanding of practical issues and constraints faced by countries in introducing new vaccines. This was followed by specialized sessions focusing on rotavirus, pneumococcal, meningococcal and Japanese encephalitis vaccines and 6 cross-cutting issues related to new vaccines introduction, namely: disease surveillance, cold chain and logistics, middle income countries, vaccine product presentation, healthy vaccine markets and sustainable financing.

Through these plenary and break out sessions, the global plan of action was updated, and consensus was obtained on WHO HQ and regional priorities for the next 12-18 months, as well as developing a clearer understanding on roles and responsibilities of partners. Revised documents that reflect the meeting conclusions are currently being updated with participants to the meeting and will be finalized by end of August 2008.

POLIO

30/06/08 from Oliver Rosenbauer, WHO/HQ:

WHO Director-General makes polio eradication 'top operational priority' - *Full operational power of WHO to be mobilized to finish polio for good, as new outbreak in Nigeria spreads internationally*

WHO Director-General, Dr Margaret Chan has made polio eradication the agency's 'top operational priority'. Dr Chan said in her keynote address to an international audience of 20,000 Rotary members and representatives of the world's press at the annual Rotary International Convention: "Polio eradication is not just about eradicating polio, it is about our ability as a society to reach all children to attain the United Nations Millennium Development Goals." The announcement was made as Rotary International launched a US\$100 million fundraiser at the Convention, held this year in Los Angeles, USA.

Expressing the need for combined action across WHO, Dr Chan called on her senior staff at country, regional and headquarter levels, to ensure all administrative and operational bottlenecks within the Organization are unblocked. "The credibility of not just WHO, but of many other health initiatives, is on the line," she explained.

This new prioritization comes twelve months into the intensified polio eradication effort, which has brought Asia to the brink of eliminating type 1 polio – the most dangerous strain of the disease. However, international concern is growing over a new type 1 outbreak in northern Nigeria, which is now threatening the global progress. Over the past months, polio from northern Nigeria has already spread west to Benin, north to Niger and east to Chad; the risk of further spread from Nigeria is increasing due to the upcoming rainy season (typically associated with increased transmission of polio) and the anticipated large-scale population movements for the Hajj (pilgrimage to Mecca, Saudi Arabia) in the second half of the year. From 2003 to 2006, an outbreak in northern Nigeria spread to 20 previously polio-free countries, causing epidemics as far away as Indonesia and Yemen, and paralyzing 1,475 children across these countries.

"I will not permit another setback," commented Dr Chan. "Of every ten children paralysed by type 1 poliovirus this year, eight are in Nigeria. In some parts of the country, more than a quarter of the children have never been vaccinated. This is an operational problem, and it can be solved. It must be solved." Key to solving the operational problem is full political engagement and ownership, in particular in the highest-risk states and Local Government Areas (LGAs) in the north of the country. It is local ownership which will ensure every child is reached during every immunization campaign.

In her closing remarks at the Convention, Dr Chan personally thanked all 1.2 million Rotarians worldwide for their steadfast commitment to ridding the world of this ancient scourge. "Together, we will finish polio, forever," she concluded.

For further information on the Global Polio Eradication Initiative and the Rotary International Convention, please visit www.polioeradication.org.

ROTAVIRUS

30/06/08 from Robin Biellik, PATH: The 8th International Rotavirus Symposium was held in Istanbul, Turkey, during 3-4 June 2008, and was well attended with over 400 participants from 67 countries, including two senior government officials from each of the GAVI eligible countries in EURO, plus representatives of the Sabin Vaccine Institute, PATH's Rotavirus Vaccine Program, CDC, Gates Foundation, GAVI Alliance, UNICEF and WHO. Highlights included updated rotavirus burden of disease data, updates on available rotavirus vaccines, the first presentation of interim results from the clinical efficacy trial of GSK's Rotarix® vaccine in South Africa, the first presentation of impact data revealed through the analysis of rotavirus disease surveillance data in the USA post vaccine introduction, lessons learned from rotavirus vaccine introduction in Latin America, and current data from intussusception surveillance in the USA and Latin America.

Proceedings of the meeting will be published in due course. In the meantime, a meeting report and key presentations will be accessible shortly on the website of the Sabin Vaccine Institute at www.sabin.org. Further details on the meeting's highlight are available in the June issue of the Rotavirus Update Newsletter at <http://www.rotavirusvaccine.org/news.htm#Newsletters>

STRATEGIC ADVISORY GROUP OF EXPERTS ON IMMUNIZATION (SAGE)

30/06/08 from Alison Brunier, WHO/HQ:

WHO's Strategic Advisory Group of Experts on Immunization (SAGE) met on 8-10 April 2008 in Geneva. Issues discussed in depth included: the expansion of work to prequalify vaccines and further strengthen national regulatory authorities; the elimination of epidemic meningococcal meningitis A in Africa; the challenges faced by lower middle-income countries in financing new vaccines; and the consolidation of all WHO recommendations relating to vaccine administration.

Expanding vaccine prequalification and strengthening NRAs

SAGE urged WHO to continue its work in these areas, recognizing that sustained functionality of the NRA in countries with manufacturers supplying vaccines to the United Nations is a critical factor in ensuring

continued availability of prequalified vaccines. It encouraged countries to continue to release regulatory experts to support these areas of work. It noted that prequalified vaccines are used to immunize 53% of the global child population.

Eliminating epidemic meningococcal meningitis A in Africa

An "investment case" to be submitted for funding to the GAVI Alliance for the elimination of epidemic meningococcal meningitis A, which severely affects sub-Saharan countries in the "meningitis belt" was presented to SAGE. It consists of: introducing a WHO-prequalified monovalent conjugate A vaccine in countries at risk; purchasing polysaccharide and conjugate A vaccines for a stockpile; strengthening surveillance and carrying out risk and impact assessments; and building capacity at country level. The total cost of the investment is US\$ 570 million, of which US\$ 370 is to be requested from the GAVI Alliance. SAGE indicated general support for the investment case.

Meeting the financial challenges of lower middle-income countries

The challenges faced by lower middle-income countries in maintaining the same levels of access to new vaccines and immunization technologies as those low income countries receiving financial and technical assistance from international agencies such as the GAVI Alliance was discussed at length. SAGE members recognized that, without addressing the challenges in this group of countries, the Millennium Development Goals and Global Immunization Vision and Strategy (GIVS) targets are unlikely to be met. Many options for addressing these issues were discussed, including the possible procurement by UNICEF of vaccines for this group. SAGE encouraged WHO to continue the discussion with countries and partners in order to identify feasible solutions.

Consolidating WHO recommendations on vaccine administration

SAGE was presented with a summary of work recently undertaken to consolidate all current WHO recommendations for vaccine administration — an initial step in a wider effort to support countries in updating and optimizing their immunization schedules. SAGE welcomed this work, indicating that it adds clarity to complex recommendations. The Group made concrete recommendations on what further work is required.

Additional topics discussed were: recommendations on use of the pneumococcal polysaccharide vaccine, the WHO Categorization of Vaccine-preventable Diseases Project and WHO activities related to influenza.

The full report of the meeting was published in the WHO Weekly Epidemiological Record on 30 May 2008: <http://www.who.int/wer/2008/wer8322.pdf>

PUBLICATIONS

WHO PUBLISHED DOCUMENTS

30/06/08 from Mario Conde, WHO/HQ: A new document from WHO's Department on Immunization, Vaccines & Biologicals (IVB) is available, titled *The Initiative for Vaccine Research Report: 2006-2007*, (WHO/IVB/08.11).

This report looks at the activities and achievements of the Initiative for Vaccine research during 2006-2007 towards its mission to accelerate the development and effective use of optimal vaccines and technologies against infectious diseases of public health importance.

http://whqlibdoc.who.int/hq/2008/WHO_IVB_08.11_eng.pdf

GAVI-RELATED INFORMATION

REVIEW PROCESS

Next Review Dates:

PROPOSAL REVIEWS - ISS, INS, New Vaccines & Measles 2nd Dose:

Second Review: The deadline for receiving applications was **2 May 2008**. The applications were reviewed from **6-15 June 2008**.

Third Review: The deadline for receiving applications is **25 September 2008**. The applications will be reviewed from **23-31 October 2008**.

HSS REVIEWS

Second Review: The deadline for receiving applications is **12 September 2008**. The applications will be reviewed from **3-15 October 2008**.

MONITORING REVIEW

The deadline for receiving annual progress reports was **15 May 2008**. The annual progress reports were reviewed from **16-30 June 2008**.

COUNTRY INFORMATION¹ BY REGION

AMERICAS

REGIONAL INFORMATION

30/06/08 from PAHO:

Vaccination Week in the Americas 2008:

Vaccination Week in the Americas (VWA) is an initiative of the countries of the Americas, supported by the Pan American Health Organization (PAHO) to sustain political commitment for immunization programs and promote a culture of prevention. One of the principal objectives of VWA is to reduce inequities in health by targeting vulnerable populations with vaccination activities, including indigenous communities and remote and border areas. In April 2008, VWA celebrated its 6th anniversary with a goal of reaching over 62 million children, adolescents, and adults throughout the Region. Forty-four countries and territories participated in the initiative this year, engaging in a wide variety of vaccination activities and/or social communication campaigns. These activities included:

- Vaccination campaigns among indigenous communities in Brazil, Panama, Argentina and Colombia,
- Yellow fever campaigns in Paraguay, Colombia and Trinidad and Tobago,
- Seasonal influenza campaigns in Brazil, Colombia, Chile, Paraguay, Venezuela and Grenada
- A massive hepatitis B campaign in Peru which aimed to vaccinate 10.5 million children, adolescents and health workers.
- Efforts to administer all antigens in thirteen countries throughout Latin America and the Caribbean in order to complete schedules
- Social communication campaigns in Costa Rica, Uruguay and throughout much of the Caribbean
- Additionally, within the framework of VWA, Ecuador, El Salvador, Guatemala, Honduras, Nicaragua, and Panama have been conducting follow up campaigns with the measles-rubella (MR) vaccine to capitalize on the success of this initiative to "reach the unreached" and thereby prevent the buildup of susceptible individuals over time. Collectively, these campaigns will protect over 6 million children aged 1-6 years against measles and rubella and strengthen elimination efforts in the Americas. In El Salvador, children aged 12-18 years are being vaccinated as a result of the analysis of susceptible population cohorts. Mexico also conducted a measles rubella campaign throughout the week (see below).

Finally, during VWA 2008, in an effort to promote Pan-Americanism and international cooperation for public health, nine launching events were held on bi-national or tri-national borders. These events counted with the participation of high ranking authorities from multiple sectors including the president of Panama, Martín Torrijos, Regional Directors of UNICEF and UNAIDS, members of the Executive Management of PAHO, Ministers and Vice-Ministers of Health, representatives from the United States Department of Health and Human Services and the Centers for Disease Control and Prevention, internationally acclaimed musicians and many local leaders and health workers, among others.

In 2008, VWA and its sister initiative, European Immunization week (EIW), gained the support of WHO Director-General, Dr. Margaret Chan. Together these two WHO Regions are leading the way towards a future Global Vaccination Week.

¹ HSS= Health Systems Strengthening;
ICP = Inter Country Programme;
ISS = Immunization Services Support;
INS = Injection Safety Support;
NVS = New Vaccine Support;
DQA = Data Quality Audit;
DQS = Data Quality Self Assessment;
FSP = Financial Sustainability Plan;
RED = Reach Every District;
cMYP = Fully costed multi-year plan;

Towards Comprehensive Cervical Cancer Prevention and Control: Region of the Americas:

PAHO convened a scientific cervical cancer meeting in Mexico City on 12-14 May 2008, with participation of 28 countries of Latin America and the Caribbean and support by WHO, Sabin Vaccine Institute, and CDC. Participants representing Ministries of Health unanimously agreed to the Mexico City Resolution Towards Accelerated Prevention and Control of Cervical Cancer. This resolution serves as a call to action for countries and PAHO to do the following:

Accelerate the comprehensive prevention and control of cervical cancer, particularly using evidence-based strategies;

Strengthen existing health promotion, screening, diagnosis, follow-up, and treatment services for cervical cancer detection; and

Negotiate affordable vaccine prices so the vaccine can be introduced and sustained into country programs.

Capacity Building Workshop on Health Systems Strengthening for Immunization

On 21-22 May in Havana, Cuba, GAVI-eligible countries met at the III Regional Health Systems Strengthening Workshop. As part of the technical support for GAVI HSS proposal development, PAHO organizes Regional Workshops to share experiences; build national team's capacities for planning, project monitoring and evaluation; and provide specific technical assistance based on country needs for the preparation/implementation of proposals.

The specific objectives of the III Regional Workshop were to:

- Strengthen the capacities of the teams in charge of the preparation/implementation of HSS proposals with regard to: monitoring and evaluation, supervision, design of interventions of continuing education/training and organization and management of health services networks.
- Give technical support for the formulation of action plans for the implementation of GAVI HSS.
- Identify needs for additional technical support for the execution of the activities and agree on next steps.

Countries shared their experiences on effective interventions at the Health System level to improve and sustain vaccination coverage and access to maternal and child health services. Critical areas and initiatives for the strengthening of health services' networks and the reduction of gaps to improve access to maternal and child care and to immunization services were discussed. Two of the main aspects for which countries require support are: monitoring and evaluation and human resources development. A community of practice for all those involved in the preparation and implementation of GAVI HSS proposals will be established as a means to continuously provide resources and exchange experiences in these and other topics.

***COSTA RICA**

30/06/08 from PAHO:

The Regional protocol for documenting the interruption of endemic measles and rubella virus circulation was reviewed in Costa Rica on 15-16 May 2008. The meeting included participants from Costa Rica's Ministry of Health and Social Security Fund (CCSS), and international experts from the World Health Organization (WHO), Centers for Disease Control and Prevention (CDC), and Dr. Louis Cooper, Columbia University and former president of the American Academy of Pediatrics. After two days of presentations on measles and rubella vaccination coverage, surveillance, and EPI program data, participants discussed the next steps for Costa Rica for reaching the goal of elimination. In addition, recommendations were made for modifications to the regional protocol which will be updated and presented to an expert review committee in July 2008. Prior to the meeting, Dr. Oscar Arias Sánchez, President of Costa Rica and Nobel Peace Prize winner (1987), signed an executive decree on 14 May 2008 which created a national committee responsible for the analysis of the evidence for documenting measles and rubella elimination in the country.

***GUATEMALA**

30/06/08 from PAHO:

An immunization data quality self-assessment (DQS) was conducted in May 2008. The country evaluated the quality of the information system, the accuracy, completeness and timeliness of coverage data. Findings and recommendations were presented to the Minister of Health who created a committee to develop and implement a plan of action in order to improve the information system and implement the recommendations. A representative from the Caribbean accompanied the DQS in order to learn the methodology and implement it as a complement to PAHO's EPI evaluation methodology.

***MEXICO**

30/06/08 from PAHO:

On 24 March, President Felipe Calderón launched a mass rubella elimination campaign to initiate the vaccination of more than 20 million individuals aged 19-29 years throughout 2,338 municipalities in 30 States. The target age group was identified through an analysis of rubella susceptible cohorts in 2006 and

the results from a seroprevalence study within the framework of the 2006 National Health Survey. The campaign aims to achieve the ambitious goal of reaching coverage >98% in each municipality and age group through intense and indiscriminating MR vaccination. As of 9 May, the country had reached 99% coverage. Rapid coverage monitoring has been implemented to verify campaign coverage and vaccinate those who were not reached during the official campaign period. (For more information: http://www.paho.org/English/AD/FCH/IM/NL_RubellaWatch2008_01e.pdf)

EUROPEAN REGION

REGIONAL INFORMATION

30/06/08 from EURO:

21st annual meeting of the European Regional Commission for the Certification of Poliomyelitis Eradication

The independent panel of international public health experts in the "European Regional Commission for the Certification of Poliomyelitis Eradication", which monitors the Region's polio-free status, came together during their 21st annual meeting in Copenhagen, from 9 to 11 June.

The Commission verified that the polio-free status of the European Region remains unchanged. However, they warned that the risk of importation of a wild poliovirus into the Region remains high due to frequent travel between polio-endemic countries and Europe. In addition, there are some geographical areas and subpopulations with low immunization coverage where the wild poliovirus could be transmitted if introduced. The current global situation calls for the strong political commitment of all countries to stop poliovirus transmission.

All 53 Member States of the WHO European Region were certified as polio-free in June 2002, and in November 2008, the Region will celebrate its 10th year since the last indigenous case of polio was reported in Turkey.

WESTERN PACIFIC

CAMBODIA

30/06/08 from WPRO: A joint regional WHO/UNICEF mission took place to Cambodia 4-6 June 2008 to review with Ministry of Health, WHO and UNICEF country staff the current situation of and further progress towards maternal and neonatal tetanus elimination (MNTE). To date 52 out of 77 Operational Districts (OD) and 244 factories implemented three rounds of tetanus toxoid (TT) supplementary immunization activities (SIAs) between 1999-2008; through which 1,341,959 (72%) of the child bearing age women (CBAW) received TT3+, excluding 155,446 who were not eligible to be vaccinated during the third round due to their previous TT vaccination status. Current focus of the programme is on further strengthening routine immunization and neonatal tetanus (NT) surveillance while at the same time collaborating with Mother and Child Health (MCH) services to promote clean delivery and cord care practices. Achievement of MNTE is targeted by end 2008; with subsequent external validation.

LIST OF MEETINGS & KEY EVENTS RELATED TO IMMUNIZATION

Regional Meetings & Key Events Related to Immunization: July 2008 onwards					
Title of Meeting	Start	Finish	Location	Responsible Partner	Region
Jul-08					
WPRO Regional Technical Advisory Group (TAG) meeting	07-Jul	11-Jul	Manila, Philippines	WPRO	WPR
SEAR Immunization Technical Advisory Group meeting (SEAR ITAG)	14-Jul	15-Jul	Bangkok, Thailand	SEARO	SEAR
GAVI Regional Working Group Meeting for the Western Pacific	July	July	Manila, Philippines	WPRO	WPR
Aug-08					
SEAR EPI Program Manager and ITAG Meeting	20-Aug	22-Aug	Kathmandu	SEARO	SEAR
PAHO Meeting of the Technical Advisory Group on Vaccine-Preventable Diseases	3Q 2008	3Q 2008	tbd	PAHO	PAHO
Sep-08					
GAVI South East Asian Regional Working Group Meeting	22-Sep	23-Sep	Bhutan	SEARO	SEAR
Oct-08					
PneumoADIP and Hib Initiative Surveillance Networks Investigators	4Q 2008	4Q 2008	tbd	WHO/HQ	Global
GAVI Regional Working Group Meeting for East & South Africa	01-Oct	02-Oct	Nairobi, Kenya	AFRO (E&S)	AFR
GAVI Independent Review Committee Meeting for HSS proposals (Submission Deadline: 12 September 2008)	03-Oct	15-Oct	Geneva	GAVI	Specific
EMRO Measles Inter-Country Meeting for Priority Countries (GAVI Eligible, Iraq and Lebanon)	21-Oct	23-Oct	Dubai, UAE	EMRO	EMR
GAVI Independent Review Committee Meeting for ISS, INS, NVS and Measles 2nd Dose proposals (Submission Deadline: 25 September 2008)	23-Oct	31-Oct	Geneva	GAVI	Specific
EMRO Measles Inter-Country Meeting for Remaining Countries	26-Oct	28-Oct	Dubai, UAE	EMRO	EMR
EMRO 24th RTAG Meeting	29-Oct	29-Oct	Dubai, UAE	EMRO	EMR
Nov-08					
Strategic Advisory Group of Experts (SAGE) meeting	04-Nov	06-Nov	Geneva	WHO/HQ	Global
EMRO Bacterial Meningitis and Pneumococcal Regional Surveillance Networks Follow-Up meeting	11-Nov	13-Nov	Casablanca, Morocco	EMRO	EMR
Meeting of the Caribbean Expanded Program on Immunization Managers	17-Nov	21-Nov	tbd	PAHO	PAHO
GAVI Eastern Mediterranean Regional Working Group Meeting	18-Nov	20-Nov	Cairo, Egypt	EMRO	EMR
Dec-08					
WPRO RCC Meeting	02-Dec	03-Dec	tbd	WPRO	WPR

EMRO Rotavirus Regional Surveillance Network Follow-Up Meeting	16-Dec	18-Dec	Amman, Jordan	EMRO	EMR
2009 Meetings					
Strategic Advisory Group of Experts (SAGE) meeting	07-Apr	09-Apr	Geneva	WHO/HQ	Global
PAHO Sub-Regional Meeting of the Central American Region, Mexico and the Spanish Caribbean on Vaccine Preventable Diseases	08-Jun	11-Jun	tbd	PAHO	PAHO
PAHO Sub-Regional Meeting of the Andean and Southern Cone Regions on Vaccine Preventable Diseases	10-Aug	13-Aug	tbd	PAHO	PAHO
Strategic Advisory Group of Experts (SAGE) meeting	27-Oct	29-Oct	Geneva	WHO/HQ	Global
Meeting of the Caribbean Expanded Program on Immunization Managers	16-Nov	20-Nov	tbd	PAHO	PAHO

LINKS RELEVANT TO IMMUNIZATION

GLOBAL WEBSITES

Department of Immunization, Vaccines & Biologicals, World Health Organization

<http://www.who.int/immunization/en/>

WHO New Vaccines Hib website

<http://www.who.int/nuvi/hib/>

GAVI Alliance Website

<http://www.gavialliance.org/>

IMMUNIZATIONbasics (JSI)

www.immunizationbasics.jsi.com

PATH Vaccine Resource Library

<http://www.path.org/vaccineresources>

UNICEF Supply Division Website

http://www.unicef.org/supply/index_immunization.html

UNICEF Supply Division Product Menu for GAVI Vaccines

http://www.unicef.org/supply/files/Product_Menu_2007.PDF

Hib Initiative Website

<http://www.hibaction.org/>

Japanese Encephalitis Resources

http://www.path.org/vaccineresources/japanese_encephalitis-resources.php

Malaria Vaccine Initiative

<http://www.malariavaccine.org>

Meningitis Vaccine Project

<http://www.meningvax.org/index.htm>

PneumoADIP

www.preventpneumo.org/

RotaADIP

<http://www.rotavirusvaccine.org/>

RHO Cervical Cancer (HPV Vaccine)

<http://www.rho.org>

WHO/ICO Information Center on HPV and Cervical Cancer

<http://www.who.int/hpvcentre/en/>

SIGN Updates

www.who.int/entity/injection_safety/sign/en/

Technet

<http://www.technet21.org/>

REGIONAL WEBSITES

New Vaccines in AFRO

<http://www.afro.who.int/newvaccines/>

PAHO's website for Immunization

<http://www.paho.org/english/ad/fch/im/Vaccines.htm>

Vaccine Preventable Diseases in EURO

<http://www.euro.who.int/vaccine>

New Vaccines in SEARO

<http://www.searo.who.int/en/section1226.asp>

Immunization in WPRO

http://www.wpro.who.int/health_topics/immunization/

Produced by WHO, in collaboration with UNICEF and the GAVI Alliance:

