



# GLOBAL IMMUNIZATION NEWS

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**28 May 2008**

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## TECHNICAL INFORMATION

### COSTING TOOLS FOR HEALTH

**28/05/08 from Henrik Axelson, WHO/HQ:**

Several international development partners (including NORAD, UNFPA, UNICEF, UNAIDS, UNDP, WHO, World Bank, USAID through the Health Systems 20/20 and BASICS Projects, and the Partnership for Maternal, Newborn and Child Health/ PMNCH) have recently concluded the first phase of a work program that provides technical assistance to countries in the use of costing tools related to the health MDGs. The main outputs of the work program are as follows:

1. A **technical review** that assesses the technical validity and user-friendliness of 13 costing tools. The technical review has been conducted by Bitran and Associates and PATH.
2. A **technical consultation** in Senegal in January 2008, which provided a forum for users of the tools, tool developers, and the external reviewers to discuss experiences with using the tools and identify ways of strengthening the tools and the process of applying them at the country-level.
3. An **informal consultation** hosted by UNFPA in New York in February 2008 to plan a course of action to implement the recommendations of the meeting in Senegal.

Documentation and further information can be accessed through the recently launched **costing tools website** hosted by PMNCH: [http://www.who.int/pmnch/topics/economics/costing\\_tools/en/index.html](http://www.who.int/pmnch/topics/economics/costing_tools/en/index.html)

During the technical consultation in Senegal countries expressed the need for guidance materials to empower countries to manage the costing tools process, incl. definition of purpose, tool selection, analysis, and presentation of results. It is envisioned that such materials will be developed in a second phase of the costing tools work program, beginning in the second half of 2008.

For questions about this work program, please send an email to [axelsonh@who.int](mailto:axelsonh@who.int) or [costingtools@who.int](mailto:costingtools@who.int)

### POLIO

**28/05/08 from Oliver Rosenbauer, WHO/HQ:**

**World Health Assembly urges continued intensification of polio eradication effort - Asia on verge of eliminating most dangerous strain of disease, but new outbreak in Nigeria threatens progress in Africa**  
*21 May 2008* - Convening this week in Geneva, Switzerland, the Health Ministers of the 193 countries of the World Health Assembly (WHA) urged a continued intensification of the polio eradication effort, to rapidly finish the disease once and for all.

The call comes on the heels of 12 months of data presented to the WHA, demonstrating the impact of the intensified eradication effort that was launched at a global stakeholder consultation in February 2007. Characterized by sustained dialogue with and engagement of Heads of State and Government, the effort has seen the wide-scale application of new tools (such as monovalent oral polio vaccines which protect children at least twice as fast against specific serotypes than the traditionally-used trivalent vaccines) and new eradication tactics tailored to the unique challenges in each of the four remaining endemic countries (Nigeria, India, Pakistan and Afghanistan). Asia is today on the verge of eliminating type 1 polio, the most paralytic strain of the disease, as all three Asian endemic countries are reporting record-low levels of transmission of this serotype.

At the same time, however, delegates expressed concern at this year's resurgence of type 1 polio in the northern states of Nigeria, where this year has seen an eight-fold increase in cases caused by this serotype

compared to the previous year (167 cases in 2008, compared with 23 cases for the same period in 2007). Nigeria now accounts for 85% of type 1 polio cases in the world and could soon be the only country with indigenous type 1 poliovirus.

The new outbreak in Nigeria has occurred because upwards of 20% of children remain un-immunized in key high-risk areas in the north of the country. To reverse this trend, delegates called for increased political engagement and full ownership at every level, to ensure every child is consistently reached with the oral polio vaccine, during every immunization campaign. From 2003 to 2005, a similar population immunity profile in northern Nigeria led to international spread of the disease to 20 countries, causing outbreaks in places as far away as Indonesia and Yemen, and paralyzing nearly 1,500 children for life. Virus of Nigerian origin from that period is still circulating in Chad and parts of the Horn of Africa. Experts cautioned that the already high risk of renewed international spread of poliovirus from Nigeria is increasing due to the upcoming rainy season and the large-scale population movements expected for the Hajj (pilgrimage to Mecca) in the second half of the year.

Addressing the WHA in her opening remarks, World Health Organization (WHO) Director-General Dr Margaret Chan underscored the importance of finishing polio once and for all. "In our global (polio eradication) efforts, we are seeing renewed international action coming out of the urgent global stakeholder consultation I convened early last year. I have visited each of the four remaining polio-endemic countries, to observe first-hand the tremendous efforts being undertaken, often under very challenging conditions. We must finish the job. We are too close to allow success to slip through our fingers."

For further information on the Global Polio Eradication Initiative, please visit [www.polioeradication.org](http://www.polioeradication.org).

## VACCINE PROCUREMENT

**28/05/08 from Sarah Schmitt, WHO/HQ:** In May 2008, a combined WHO/HQ and EMRO Vaccine Procurement Assessment was conducted in Pakistan. The objective of the assessment was to perform an assessment of the new Government of Pakistan vaccine procurement system to provide recommendations on strengthening the vaccine procurement system, and to identify follow-up activities for further system strengthening.

A pre-established format was used to process all relevant information for the evaluation. Pakistan recently began self procuring all of the EPI vaccines with the exception of pentavalent vaccines which are procured with the assistance of GAVI. The assessment involved documentation reviews and face-to-face meetings with WHO, NHI, MoH, NRA, NCL, EPI, UNICEF and Central Medical Stores. A set of recommendations on vaccine procurement functions, legislation, forecasting, vaccine management, coordination, capacity building and NRA were identified and discussed during a debriefing with representatives of all concerned entities.

## GAVI-RELATED INFORMATION

### ADVANCED MARKET COMMITMENT

**28/05/08 from the GAVI Alliance:**

Work is underway to determine the optimal terms for a pilot Advance Market Commitment (AMC), designed to protect children and save lives. Pneumococcal diseases kill more than 1.6 million people worldwide each year, including at least 800,000 children. Ninety-nine percent of these deaths occur in the world's poorest countries. The most effective way to prevent these deaths is to ensure children have access to effective, safe and affordable vaccines.

In April, the AMC partners provided a series of briefings for developing countries, manufacturers, civil society organizations and to update stakeholders on the process to date and some of the key considerations. The donors also asked a group of health and economic experts and implementing agencies, called the implementation working group (IWG), to provide recommendations for AMC terms, building on the work of the independent Economic Expert Group (EEG). The IWG received inputs from developing countries, industry, civil society organizations and donors to inform their work. Donors met with the IWG in May and were briefed on progress. Work continues and the next update will be given in June.

The donors would like to express their appreciation to those who have informed this work. Throughout the development of the AMC, input has been sought and received from hundreds of stakeholders; these diverse perspectives have been of great value. A summary of this consultation and advisory process is available at [www.vaccineamc.org](http://www.vaccineamc.org).

### HIB INITIATIVE

**28/05/08 from Judy Heck, Hib Initiative:** The progress of GAVI-eligible countries continues in the adoption of Hib vaccine. This May, seven countries submitted application to the GAVI Alliance for Hib vaccine support: 3 countries from Africa; 1 from Europe; 2 from South Asia; and 2 from South-East Asia. This brings the total to 60 out of 72 (83%) low income countries that have introduced or applied for Hib vaccine. This

represents approximately 43.2 million infants with access to Hib vaccine once those countries who have applied begin using the vaccine.

An important study (Bradford Gessner et al. 2008) on Hib disease burden and cost-effectiveness of Hib vaccine in Indonesia was just published in the Pediatric Infectious Disease Journal this May 2008. The analysis showed among other findings that routine infant Hib vaccination would prevent a large burden of childhood illness and death in Indonesia. Researchers stated, "Even without external funding support, Hib vaccine will be a highly cost-effective intervention in either a monovalent or pentavalent presentation based on commonly used benchmarks."

Two post introduction evaluations were recently conducted in Sierra Leone and Ukraine to assess introduction of Hib vaccine into the childhood immunization program. The evaluations went smoothly and provided key lessons for countries considering switching vaccine formulations. In Sierra Leone, the country transitioned from liquid DPT 10-dose vials to fully liquid formulation of DTP-HepB-Hib in 1-dose vials. Ukraine switched from liquid-lyophilized monovalent Hib vaccine to lyophilized ten-dose tetravalent (DTP-Hib) vaccine. Summaries and lessons learned are available in the May 2008 issue of the Hib Focus newsletter (<http://www.hibaction.org>).

## REVIEW PROCESS

### **Next Review Dates:**

#### **PROPOSAL REVIEWS - ISS, INS, New Vaccines & Measles 2<sup>nd</sup> Dose:**

**Second Review:** The deadline for receiving applications was **2 May 2008**. The applications will be 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 will be reviewed from **16-30 June 2008**.

## COUNTRY INFORMATION<sup>1</sup> BY REGION

### **EUROPEAN REGION**

#### **REGIONAL INFORMATION**

**28/05/08 from EURO:**

#### **Successful European Immunization Week 2008**

From 21-28 April 2008, 33 countries participated in the European Immunization Week (EIW), which took place for the third time since its inception in 2005. EIW is a Region-wide initiative, led and coordinated by the WHO Regional Office for Europe, with partner organizations contributing to action at the national level. EIW aims to help Member States fulfill their obligations of universal immunization. Using a regional guiding

<sup>1</sup> 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;

framework, they address deficiencies in their country immunization programmes through numerous advocacy and communication activities.

The range of activities across the Region varied widely, from public awareness campaigns through concerts, exhibitions, musical campaigns and information campaigns, to the presentation of new immunization guidelines, the introduction of new vaccines and/or vaccination schedules, and preparing for supplementary immunizations campaigns. Outreach activities, including door-to-door visits to check immunization status and advocate for immunization as well as actual vaccinations were also organized.

Although measles cases in the Region have dropped over 90% in the last decade, measles remains an existent issue, and several countries focused their activities on measles elimination. Other targeted diseases during the Week were diphtheria, rubella and polio.

With the activities countries aimed to reach many different target groups. Several countries held workshops for health professionals, and many engaged politicians along with other key policy-makers through initiatives such as parliamentary seminars and round table discussions. Furthermore, parents, school teachers and young adolescents were targeted. But also less traditional target groups were addressed, including the military and religious leaders. A number of countries chose to focus on hard-to-reach groups such as migrant and minority communities.

Much press attention for EIW was generated through press conferences, interviews and organized TV and radio broadcasts about EIW. Some countries actually targeted the media with their EIW activities, through workshops for journalists and writing contests.

As part of the Week, Dr Marc Danzon, Regional Director for Europe, hosted Her Royal Highness (HRH) Crown Princess Mary of Denmark (patron of the Regional Office) in Ljubljana, Slovenia, on 23 April 2008 at a launching ceremony on behalf of all participating countries. Together with the First Lady of Slovenia, Mrs Barbara Miklic Turk, they addressed members of the diplomatic corps, health professionals and the mass media, about the importance of immunization in the WHO European Region and European Immunization Week.

EIW took place similarly with its sister initiative, The Vaccination Week in the Americas (VWA), coordinated by the Regional Office for the Americas (PAHO).

### **Joint WHO EURO meeting for Newly Independent States on Polio, Measles/Rubella and Influenza laboratory-based surveillance**

The Regional Office for Europe will organize the first joint annual meeting for national laboratories and epidemiologists responsible for poliovirus, measles/rubella and influenza surveillance in the Newly Independent States, from 26-28 May, in Tashkent, Uzbekistan.

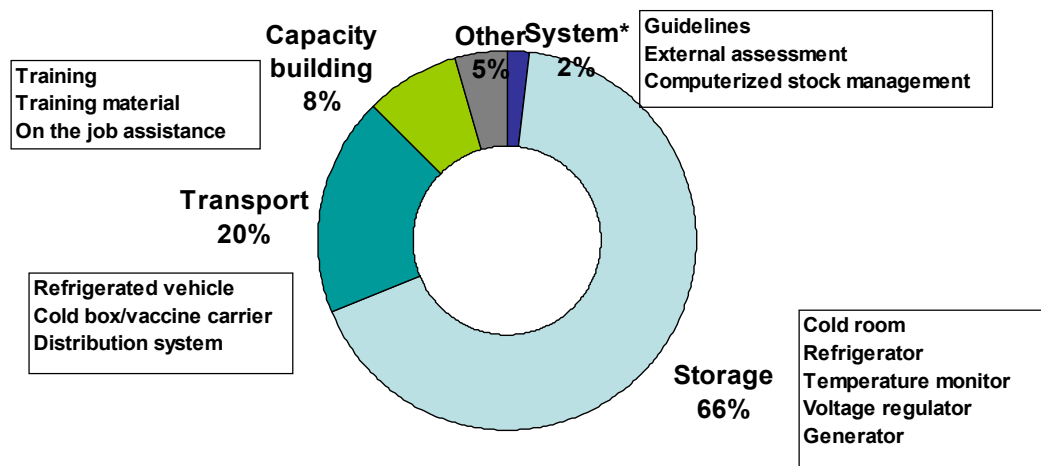
The meeting will provide an opportunity to strengthen communication and collaboration between the epidemiological and laboratory components of surveillance for targeted diseases. Participants will be updated on the Polio Eradication and Measles/Rubella Elimination Programmes as well as on the current status of the Global Influenza Surveillance Network. Furthermore, practical issues related to surveillance and laboratory testing for poliovirus, measles/rubella and influenza will be discussed.

### **28/05/08 from Oya Afşar and Dragoslav Popović, UNICEF CEE/CIS:**

**Pandemic vaccination preparedness** – The first phase of the UNICEF/WHO initiative to improve the capacity of national immunization programmes to deliver pandemic and other new vaccines to CEE/CIS Countries was completed in March 2008. The initiative has been funded by a grant from the Government of Japan. During the period April 2007 – March 2008, a total of 6 countries (Albania, Bosnia & Herzegovina, Kyrgyzstan, Serbia, Turkmenistan, Ukraine) were within the framework of strategic priorities below:

- Expand the cold chain capacity with a comprehensive long-term approach
- Improve cold storage and vaccine management practices
- Pilot innovative distribution systems
- Explore alternative capacity in non-health and/or private sector
- Streamline forecasting, procurement and licensing procedures
- Develop operational plans for pandemic vaccine delivery

Following a country assessment, priority needs were documented in discussion with the immunization and pandemic focal points in government and partner organizations. Investments in the first phase mainly focused on improving the CCL infrastructure as displayed below:



In addition, draft guidelines to assist countries in developing their operational plans for pandemic vaccination were developed and piloted in Bosnia & Herzegovina.

Next phase of the initiative will focus more on technical assistance for management strengthening and capacity building, in collaboration with WHO/EURO. More countries will be supported to develop operational plans for pandemic vaccination.

## WESTERN PACIFIC REGION

### REGIONAL INFORMATION

**28/05/08 from WPRO:**

#### **Pacific Immunization Program Strengthening (PIPS) Workshop**

The 4<sup>th</sup> annual Pacific Immunization Program Strengthening (PIPS) workshop was held from 12-16 May 2008 in Rarotonga, Cook Islands. Representatives from 16 out of 20 Pacific Island countries and areas (PICs) as well as from PIPS partners including AusAID, JICA, J-PIPS, U.S. CDC, UNICEF and WHO attended the workshop.

Notable recommendations included: catch-up or follow up measles SIAs between 2008-2010 in 10 Pacific island countries to maintain adequate population immunity for preventing outbreaks following importation of measles virus; improving case-based measles surveillance utilizing national notifiable disease surveillance systems; ensuring high Hep B birth dose and HepB 3 vaccination coverage, use of Uniject HepB vaccine for home births, and country planning for HepB control certification; strengthening of AFP surveillance and universal preparation of plans of action for response to imported wild poliovirus; mobilizing resources to facilitate introduction of Hib vaccine in remaining four countries; and conducting additional disease burden and health economic assessments for potential use of pneumococcal conjugate vaccine, rotavirus vaccine, and HPV vaccine.

Recommendations were also made for strengthening of routine immunization services. These included continuation of sub-regional training activities and in-country training, implementation of school entry requirements for completion of the child immunization schedule, greater use of multisectoral approaches to deliver vaccines, and an increase in the ceiling for revolving fund created under 'Vaccine Independence Initiative' for vaccine procurement due to high cost of new and underutilized vaccines (NUVs).

### CAMBODIA

**28/05/08 from WPRO:**

#### **Training for sentinel surveillance for meningo-encephalitis in Cambodia, May 2008**

Meningo-encephalitis sentinel surveillance is ongoing in Cambodia since May 2006 involving five sentinel hospitals. However, more emphasis is added on the bacterial meningitis component this year with efforts to ensure 100% patient enrolment and lab training. In this context, Cambodia is organizing a lab training of the staff from the sentinel sites with focus on appropriate sample storage, transport and the testing conducted at the hospital site. The data from the sentinel surveillance will inform the decision-making with respect to JE, Hib, and pneumococcus vaccines.

## LIST OF MEETINGS & KEY EVENTS RELATED TO IMMUNIZATION

Regional Meetings & Key Events Related to Immunization: June 2008 onwards					
Title of Meeting	Start	Finish	Location	Responsible Partner	Region
<b>Jun-08</b>					
Eight International Rotavirus Symposium	03-Jun	04-Jun	Istanbul, Turkey	Sabin, RVP, CDC	Global
GAVI Independent Review Committee Meeting for ISS, INS, NVS and Measles 2nd Dose proposals (Submission Deadline: 2 May 2008)	06-Jun	15-Jun	Geneva	GAVI	Specific
EMRO 25th Inter-Country EPI Managers Meeting	15-Jun	18-Jun	Riyadh, Saudi Arabia	EMRO	EMR
GAVI Monitoring Review (Submission Deadline: 15 May 2008)	16-Jun	30-Jun	Geneva	GAVI	Specific
Logistics & Vaccine Management Meetings: Consultation on Vaccine Stock Management & Preparing Cold Chain for New Vaccines Introduction	16-Jun	19-Jun	Leysin, Switzerland	WHO	Global
New and Under-Utilized Vaccines Implementation Meeting	23-Jun	25-Jun	Montreux, Switzerland	WHO	Global
SEAR Regional Workshop for Master Trainers for the use of Mid Level Managers' MLM Modules for Training in Immunization	23-Jun	27-Jun	New Delhi, India	WHO/SEAR	SEAR
GAVI Board Meeting	25-Jun	26-Jun	Geneva, Switzerland	GAVI	Specific
European Technical Advisory Group of Experts	June/July	June/July	tbd	EURO	EUR
WPRO Pacific Immunization Strengthening Meeting	June	June	tbd	WPRO	WPR
Global Vaccine Research Forum 2008	29-Jun	02-Jul	Paris	WHO	Global
<b>Jul-08</b>					
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
<b>Aug-08</b>					
SEAR EPI Program Manager and ITAG Meeting	20-Aug	22-Aug	Katmandu	SEARO	SEAR
PAHO Meeting of the Technical Advisory Group on Vaccine-Preventable Diseases	25-Aug	29-Aug	Lima, Peru	PAHO	PAHO
<b>Sep-08</b>					
GAVI South East Asian Regional Working Group Meeting	22-Sep	23-Sep	Bhutan	SEARO	SEAR
<b>Oct-08</b>					

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 ( <b>Submission Deadline: 12 September 2008</b> )	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 ( <b>Submission Deadline: 25 September 2008</b> )	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
<b>Nov-08</b>					
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
<b>Dec-08</b>					
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
<b>2009 Meetings</b>					
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](http://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](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](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](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/](http://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/](http://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/](http://www.wpro.who.int/health_topics/immunization/)

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

