



Argentina Highlights the Importance of Pertussis and Influenza Vaccination during Pregnancy

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Location	Buenos Aires, Argentina
Dates	21 April 2015
Participants	Argentina's Vice-Minister for Community Health; Argentina's Vice-Minister for Health Promotion and Programs; Representatives of Argentina's Ministry of Health (MOH) National Directorate for the Control of Vaccine-preventable Diseases (DiNaCEI) and coordinator of SUMAR; Health Information System, Immunization and SUMAR representatives from each of the country's 24 Provincial Ministries of Health; and representatives from the Pan American Health Organization (PAHO).
Purpose	1) To share the progress made on integrating the national electronic immunization registry (EIR) with the operation and M&E of the program SUMAR. SUMAR is a MOH Program charged with ensuring health coverage and promoting access to, and the quality of, priority health interventions. 2) To discuss achievements, challenges and next steps in the implementation of the national EIR and data transfers from provincial EIRs.

Argentina is counting, as of 2015, with 19 free and mandatory vaccines in the national vaccination schedule, meant for all stages of life, becoming one of the most complete schedules in the Region of the Americas.

Pregnancy is a prioritized stage of life. Specific strategies were created to reach women during the gestation period, through the incorporation of free and mandatory vaccines, along with communication and dissemination of recommendations, with the support of scientific societies, opinion leaders and mass media.



Since 2011, the Ministry of Health of Argentina has launched national campaigns to encourage influenza and pertussis vaccination in the country.





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In addition to images and posters communicating this message, a video was published (available here: www.youtube.com/watch?v=E-19CUFp6E8).

The purpose is to raise the awareness of this population on the importance of vaccination during a vulnerable stage of life and the benefit created by the protection transferred to the product of the conception through the placenta, during its first life months. The influenza vaccine in any trimester and the triple acellular bacterial vaccine (Tdap) after the twentieth gestational week are the fundamental pillars of this strategy.

The national coverage reached in this group with the influenza vaccine has exceeded 90% in the last 3 years. With regard to Tdap vaccination, national coverage exceeding 67% was reached.



Epidemiological surveillance of pertussis already shows the impact of this strategy. In 2011, prior to its beginning, 76 deaths from pertussis were registered, a corresponding 97% of which were children less than 12 months. In 2014, this number was reduced by 92% with only 6 deaths, reflecting the lowest number of deaths by pertussis during the last 34 years.

Course for the Effective Management of the EPI

Martha Velandia, PAHO-Washington, DC; Hannah Kurtis, PAHO-Washington, DC; Fernando Muñoz Porras, Ministry of Health-Chile; Pamela Burgos, Ministry of Health-Chile

Location	Metropolitan Region, Santiago de Chile
Dates	2-4 December, 2014
Participants	Six course facilitators and 60 individuals from across Chile who have the responsibility of managing and implementing the country's immunization program at the national, regional and local levels. • To serve as a learning opportunity for the technical staff of the Chilean national immunization program to review the latest information on topics including EPI diseases and vaccines, cold chain issues, programming, data quality and supervision, monitoring and evaluation • To analyze the current challenges, available resources and performance of the EPI, in order to optimize planning, verify coverage and improve the quality of immunization services that are offered.
Purpose	

The EPI Management Course was carried out in the village of Cuncumen, in the greater Metropolitan Region of Santiago, Chile at the request of authorities from the national program. Five out of six course modules were covered during the three days, including I. EPI Diseases, II. EPI Vaccines, III. Cold Chain, V. Programming Immunization Activities and VI. Supervision, Monitoring and Evaluation.

A mixed methodology was used during the course, including facilitator-led presentations and individual and group work. There were also many opportunities for discussion throughout the course, to allow participants to share their own experiences and lessons learned.



Honduras Deworming Campaign Video

Octavia Silva, PAHO-Washington, DC; Sebastian Oliel, PAHO-Washington, DC; Harold Ruiz, PAHO-Washington, DC

The Pan American Health Organization (PAHO) along with the former Canadian International Development Agency (CIDA-Canada), now the Department of Foreign Affairs, Trade and Development-Canada published an informational campaign video from 2014 about deworming efforts in Honduras carried out by the Ministry of Health and PAHO. The video, titled “Healthy Children without Worms: Deworming Campaign in Honduras” communicates the reason behind the campaign as the elimination of “neglected diseases” in the country, with the concrete goal of reducing the prevalence of intestinal parasitism.

After initially conducting a pilot study in one municipality and expanding efforts to seven municipalities the following year, deworming gained national traction in Honduras as of 2014. Approximately 43% of children in Honduras are infected with parasites. Parasitism can have a variety of symptoms, including malnutrition; gastrointestinal, dermatological, respiratory, and viral problems; among others.

PAHO and the Ministry of Health have collaborated significantly in preparing comprehensive operational plans for regions in Honduras to fight these diseases. Along with PAHO providing technical assistance, the Department of Foreign Affairs, Trade and Development-Canada has contributed funds for the development and implementation of activities to continue deworming efforts at the national level.

In order to expand the effort’s reach, the Ministry of Health decided early on to deworm the preschool population during the country’s national vaccination campaign. This was well-received by communities as it eased access to health services. Additionally, the country’s national campaign to deworm schoolchildren between ages 5-14, which was carried out with help from the Ministry of Education and the Healthy Schools program, reached approximately 1.3 million children and about 80,000 preschool children (4-5 years old). Deworming children between 2-4 years old was integrated into the country’s national vaccination campaign.

The deworming campaign’s success can be seen in the absence or reduction of diarrhea outbreaks due to parasites as of March and April 2014. The campaign video can be seen at www.youtube.com/watch?v=LmADidwl4AA.



Jamaica Launches Measles Prevention Campaign

Simone Spence, Ministry of Health-Jamaica; Karen Lewis-Bell, PAHO-Jamaica

In ensuring their commitment to PAHO Resolution CSP28.R14 to maintain the status of measles and rubella elimination in the Region of the Americas and in recognition of the current risk of re-importation of measles into the country, Jamaica on 16 February launched a measles prevention campaign. This campaign targets some 195,000 children aged 1-6 years for vaccination with both doses of the MMR vaccine. This cohort of children includes some 100,000 children aged 19 months to 3 years who would not normally be expected to receive the second dose of MMR at their age.

The campaign will be conducted through health facilities and schools and will extend for the period 16 February to 8 May 2015 and at a cost of JA\$54.4 million.

The Minister in his address at the launch said: "Although this campaign will largely focus on the provision of the MMR vaccine including the booster dose, it will also provide other vaccines available in the public sector which the children may have missed." He added that "the main objectives are to capture those who have not been fully immunized for their age in order to improve the overall immunization coverage in Jamaica, more importantly to provide adequate protection in order to reduce the susceptible population for measles in children and at the same time have an impact on other vaccine-preventable diseases such as rubella."

Through the success of Immunization, Jamaica had the last case of locally transmitted measles in 1991 but the MMR vaccination coverage has fluctuated from a low of 81% in 2011 to a high of 94% in 2013. The campaign target coverage for both doses of MMR is 95% or greater.



Minister of Health, Dr. Fenton Ferguson (center) makes a point during the launch of the Jamaican Ministry of Health's Health's Measles Prevention Campaign held at the Office of the Prime Minister on Monday, February 16, 2015.

Seated with the Minister (left to right) PAHO/WHO representative to Jamaica, Dr. Noreen Jack; Acting Chief Medical Officer, Dr. Marion Bullock DuCasse; Permanent Secretary, Dr. Kevin Harvey; and Director, Family Health Services, Dr. Simone Spence.

Photo: Stephanie Shaw-Smith, Ministry of Health, Jamaica



National Workshop to Evaluate Statistical Information Systems and International Workshop on Electronic Immunization Registries

Javier Vargas, Ministry of Health-Peru; Karim Pardo, Ministry of Health-Peru; Manuel Loayza, Ministry of Health-Peru; Washington Toledo, Ministry of Health-Peru; Fabiana Michel, PAHO-Peru; Carolina Danovaro, PAHO-Washington, DC

Location	Huacho, Peru
Dates	29-30 January, 2015
Participants	Peru's Vice-Minister for Public Health; Representatives of Peru's Ministry of Health (MOH) Office of Statistics and informatics and the Immunization Strategy; Statistics representatives from each Region; representatives from the MOH of Brazil and Ecuador, and from the Pan American Health Organization (PAHO). The workshop objectives were: 1) to share the results related to data quality and information systems and the recommendations on these issues from the International EPI review led by PAHO in October 2014; and 2) to discuss data issues from different programs and statistical systems, as well as results from recent Demography Health Surveys (DHS) and share new guidelines. A sub-group had a parallel workshop to 1) discuss some of the innovative immunization data analysis done in Peru and the implementation of a national registry of children 0-6 years and its implication for the development of an electronic immunization registry (EIR), and 2) to agree on the objectives and the format for PAHO new field guide on EIR.
Purpose	

Over the course of three days, the responsible for health statistics from all regions met to evaluate and discuss several of the country's health information sub-systems, including the results and recommendations from an international EPI review/data quality assessment that took place in October 2014.

Some highlights of the 2014 review, on the Health Information System (HIS), included that the HIS is the only recognized system for health statistics (including immunization data), via a decree and has clear norms; the information produced by the HIS is used for decision-making; and that the Ministry of Finances uses the data produced from the HIS to measure goals and help provide performance-based incentives.

Furthermore, the MOH has a data quality improvement plan that will now be adapted to include data review at the health facility level, as done during the 2014 EPI review/data quality assessment.

On EIR, Peru has developed an innovative national child registry, which is updated at the municipal level as a collaborative effort between health, civil registration and other local actors. This registry will serve as the base for developing individual-based health registries, including and EIR.

At the end of the meeting, each region had a work plan and PAHO had a new draft of an EIR field guide.



Regional Meeting of Bacterial Pneumonias and Sentinel Surveillance of Meningitis

Lucia Helena de Oliveira

Location	Panama City, Panama
Dates	10-11 December, 2014
Participants	Eighty participants representing twelve countries (Brazil, Colombia, Chile, Dominican Republic, Ecuador, Honduras, El Salvador, Nicaragua, Panama, Paraguay, Peru, and Venezuela), the Pan-American Health Organization (PAHO), Sabin Vaccine Institute, and the U.S. Centers for Disease Control and Prevention (CDC).
Purpose	The meeting objectives were to share national experiences about the sentinel surveillance at regional and national level; review the performance of the laboratories; plan activities to improve data quality of surveillance according to the global surveillance network of bacterial pneumonias and meningitis (IBD) and rotavirus; present the results of rotavirus vaccine impact studies in the Americas Region.

Ten countries in the Region have implemented sentinel surveillance of IBD and 16 have implemented rotavirus sentinel surveillance. The regional results of the IBD and rotavirus surveillance were presented, discussing challenges and strengths. Also three sentinel hospital from 2 countries (Nicaragua and Honduras) presented results of IBD surveillance.

The focus of the meeting was to discuss with epidemiologists and laboratory professionals how to improve the data quality generated by sentinel sites. The indicators that the countries should reach in order to be part of the Global Surveillance Network were emphasized.

The main challenge for 2015 is to implement the case database at sentinel sites at the national level. It was concluded that the regional network (37 IBD sentinel sites and 74 rotavirus sentinel site) had reached many achievements in 2013, but it is important to assure the quality of the information in order to use this information for the vaccines impact assessment.



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First meeting of the PAHO Maternal Immunization Working Group (PAHO MIG)

Alba María Ropero and Cristina Pedreira, PAHO-Washington, DC

Location	Washington, DC
Dates	11-12 February, 2015
Participants	PAHO/WHO, CDC, Universidad Santa Casa de Sao Pablo, EPI Honduras, EPI Argentina, CLAP (Centro Latino Americano de Perinatología), Emory University.
Purpose	PAHO convened a first meeting with key maternal immunization and infectious disease experts, with the aim of forming a PAHO Maternal Immunization Working Group (PAHO MIG). The goals of the PAHO MIG for 2015 will be to develop a PAHO field guide on maternal immunization, and to provide recommendations on maternal immunization to the PAHO TAG in July.

The objectives of the meeting were:

1. To formalize the development of the PAHO MIG and refine its terms of reference;
2. To review the technical recommendations and evidence for the PAHO MIG guide;
3. To discuss an outline proposal for the PAHO MIG guide;
4. To agree on necessary steps to develop the PAHO MIG guide; and
5. To agree on channels and frequency of communications of the PAHO-MIG.

During a first umbrella session, we reviewed the purpose and vision of the PAHO MIG, the regional recommendations for antenatal care, an evidence update on maternal immunization, and the WHO SAGE recommendations on maternal immunization. Additionally, two separate initiatives were presented for discussion.

One of them was the WHO guide on Maternal Influenza Immunization, which is currently under development and was presented for the PAHO MIG to understand its scope, and to ensure alignment and consistency with the PAHO MIG guide.

The second initiative was the strategy and Plan of Action for the elimination of mother-to-child transmission of HIV and congenital syphilis in the Americas, highlighting lessons learned from the implementation of this initiative.

We reviewed the status of influenza vaccination in pregnant women in the PAHO region, and two country experiences (Argentina and Honduras). We were also updated on preliminary results of two country studies on birth outcomes related to maternal influenza vaccination (Laos and Nicaragua).

We discussed the SAGE and PAHO TAG recommendations on pertussis immunization, and how countries implement or adapt these recommendations, including two specific country experiences (Argentina and Brazil). We also reviewed the history and current status of pertussis disease and immunization in the U.S.



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We discussed the guide's chapters and agreed on its basic objectives, audiences, and general structure. We finished the meeting with a discussion on a timeline for PAHO MIG guide development, next steps and commitments.

- DSMB IPV Studies Meeting – 2-3 March – Panama
- ProVac – 9-13 March (tentative) – Brazil
- Data Analysis Workshop – 23-27 March – Mexico
- ProVac – 23-27 March – Honduras
- Polio-IMG Meeting – 30 March 2015 – Seattle, WA, USA
- Laboratory Control for Syringe Quality – 13-17 April – Chile
- Cold Chain and Logistics Operational Workshop – 20-24 April – Chile
- AIRA National Meeting – 21-23 April – New Orleans, LA, USA
- Global WHO TechNet Meeting – 11-15 May – Geneva, Switzerland
- GAVI Board Meeting – 9-11 June – Geneva, Switzerland
- Effective Vaccine Management (GEV/EVM) Evaluation – 27 May-15 June – Nicaragua
- Fiocruz Vaccine Course – 27-31 July – Brazil
- Effective Vaccine Management (GEV/EVM) Evaluation – August-September TBD – Honduras
- Effective Vaccine Management (GEV/EVM) Evaluation – November TBD – Bolivia
- Global New Vaccines Surveillance Meeting – October/November TBD – Location TBD
- GAVI Board Meeting – 1-3 December – Location TBD

Recent Measles Outbreaks Point to Gaps in Elimination Efforts in the Americas

Donna Eberwine, PAHO-Washington, DC; Pamela Bravo, PAHO-Washington, DC; Desiree Pastor, PAHO-Washington, DC

Recent measles outbreaks in the United States and Brazil suggest that immunization rates in some areas have dropped below levels needed to prevent the spread of cases imported into the Americas, Pan American Health Organization/World Health Organization (PAHO/WHO) experts said 10 February 2015.



Participants at the EPI management course in Santiago, Chile, December 2014.

"Thanks to high levels of immunization, the Americas have been on track for more than a decade to be formally declared free of measles," said Dr. Cuauhtemoc Ruiz, head of PAHO/WHO's immunization program. "Maintaining high levels of vaccine coverage is key to preventing and halting outbreaks and to protect our populations from the constant threat of imported cases."



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Now, measles elimination "is facing major challenges, with several ongoing importations of measles in some countries," PAHO/WHO said in an epidemiological alert distributed on 9 February 2015 to member countries across the region. The alert urges countries to strengthen measles surveillance activities and to "take appropriate measures to protect residents in the Americas against measles and rubella."

PAHO/WHO experts note that the current outbreak provides an opportunity to increase measles' visibility as a serious public health threat and vaccination as the best solution. "Outbreaks remind everyone that diseases that were on the road to elimination can re-emerge and threaten our health, especially children's health," said Ruiz. "These outbreaks serve as a poignant reminder of the importance of immunization."

PAHO/WHO recommends that children receive two doses of measles-containing vaccine before their fifth birthday and that levels of coverage with two doses be maintained at 95% or more to prevent the spread of imported cases. Currently, an estimated 92% of 1-year-olds in the Americas receive a first dose of measles vaccine.

"Countries in the Americas have reported cases imported from other regions every year during the past decade, but until recently, they did not lead to significant outbreaks," said Ruiz. "The current outbreaks point to gaps in immunization that could allow measles and other vaccine-preventable diseases to take hold again and begin spreading in our hemisphere."

To view the measles epidemiological alert please click here:

http://www.paho.org/hq/index.php?option=com_docman&task=doc_view&Itemid=270&gid=29016&lang=en