



Workshop on the Regulatory Aspect of Vaccines and Vaccination Safety in Mexico

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Location	Mexico City, Mexico
Dates	27 June – 1 July 2016
Participants	State leaders and representatives from the main institutions on vaccine safety from all over Mexico, including the National Regulatory Authority (Comisión Federal para la Protección contra Riesgos Sanitarios [COFEPRIS]), the National Immunization Program (Centro Nacional para la Salud de la Infancia y la Adolescencia [CENSIA]) and Dirección General de Epidemiología (DGE), the institution responsible for epidemiological surveillance. Technical staff from federal offices also participated.
Purpose	To strengthen the technical capacity of health workers on vaccine regulation and vaccination safety. The workshop also aimed to teach how to set up an effective response plan when risking or facing damage during vaccine administration.

After being certified as a referenced National Regulatory Authority (NRA), COFEPRIS was given the recommendation to strengthen vaccine surveillance capacity. Aimed to increase national capacity to respond to any vaccination-related risk, COFEPRIS gathered all of the institutions dealing with vaccine safety and organized this workshop.

Eighty participants attended this course from all over Mexico and for the three involved institutions, 43% were from COFEPRIS, 36% from CENSIA and 18% from DGE.

Through interactive lectures and problem-based learning activities, participants reviewed topics such as: the role of the NRA and of a quality laboratory in vaccine safety, clinical aspects of Adverse Events Following Immunization (AEFI), step-by-step surveillance activities, causality assessment, data analysis and signal identification, vaccination safety and topics related to communication activities.

The short-term impact in knowledge was measured and most participants improved their performance. The satisfaction level with the workshop was very high. One of the most important outcomes of this workshop was encouraging collaborative work between the NRA,



Participants at the workshop for vaccination safety in Mexico, June-July 2016. Credit: Harold Ruiz, PAHO/WHO.



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the National Immunization Program and the National Surveillance Directorate. The collaborative work from these organizations is responsible for AEFI surveillance.

After this workshop, there should be more communication, sharing of information and joint assessment of what Mexico is doing to guarantee and improve vaccines and immunization safety.



Participants at the workshop for vaccination safety in Mexico, June-July 2016. Credit: Harold Ruiz, PAHO/WHO.

Brazilian Measles Outbreak in the Americas is Interrupted in the Post-Elimination Era

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The state of Ceará in Brazil completed a year without confirming any new measles cases, after the rash onset of the last case was reported in 6 July 2015. This milestone allows the country to verify that the endemic measles virus circulation in Ceará has been interrupted and that Brazil has met PAHO's elimination criteria for measles elimination. The conclusion was made by the president of the International Expert Committee (IEC), Dr. Merceline Dahl-Regis, who visited Brazil with PAHO's Secretariat in order to meet with health authorities from Ceará and Brasilia on 20-21 July, 2016.



Participants at the declaration of the measles outbreak interruption in Ceará, Brazil, July 2016.
Photo credit: Government of Ceará.

This result was achieved through a partnership of efforts from the Brazilian Ministry of Health, the Health Department of Ceará, the Health Secretary of Fortaleza and Caucaia (the two most affected municipalities), PAHO/WHO, the Brazilian Association of Nursing, medical universities, scientific societies and the unwavering determination of health workers and volunteers.

Lessons learned from the Brazilian outbreak include the need to implement an aggressive and rapid response to any imported measles case, in order to immediately interrupt virus circulation and to avoid the slow but continuous transmission of measles cases ("drop by drop" transmission). The outbreak also highlighted how high reported administrative coverage can mask pockets of susceptible individuals, leading to a false sense of security among immunization program managers. Finally, the establishment of strategic partnerships was seen as critical to confront and resolve this health crisis. In 2016, the Brazilian Ministry of Health, the



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Health Department of Ceará and the Health Secretary of Fortaleza have established a plan of interventions to guarantee the sustainability of measles and rubella elimination in the country.

Measles Outbreak in Ceará

A total of 1,052 measles cases were confirmed in Ceará, Brazil, between 25 December 2013 and 9 October 2015, in 38 of 184 municipalities. The last endemic case was confirmed on 6 July 2015. The genotype identified was D8. Adolescents and adults aged 15-39 years old were the most affected group by this outbreak (39%), followed by children aged 6-11 months (28%). Around 62.1% of the confirmed cases were unvaccinated; 44% of the unvaccinated (n=288) individuals were aged 15-39 years. Among vaccinated individuals, 93.1% had received one dose of the MMR vaccine and 7% had received two doses. These data demonstrate, again, that one dose to interrupt measles transmission is insufficient and a rapid, aggressive response to control a measles outbreak is key to maintain elimination.

Workshop on improving the quality of the data reported in the joint reporting form (JRF)

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Location	Panama City, Panama
Dates	13-14 July 2016
Participants	Facilitators: Marcela Contreras Salas, Laure Dumolard, Cara Janusz, Claudio Politi, Carilu Pacis Tirso, Cuauhtemoc Ruiz, Martha Velandia. Member States Participants: Persons responsible for filling the JRF from 14 Latin American Member States: Argentina, Brazil, Chile, Colombia, , Cuba, Dominican Republic, Ecuador, El Salvador, Honduras, Mexico, Nicaragua, Panama, Paraguay and Uruguay
Purpose	To follow up on the recommendation from the SAGE Global Vaccine Action Plan (GVAP) working group and the defined standards from PAHO to foster the quality of the immunization related data, by providing guidance to the persons filling the JRF in 14 countries from Latin America

The workshop general objective was to provide guidance to selected countries in Latin America to improve the quality of the data reported in the JRF, which is the main source of information for monitoring progress of GVAP and Regional Immunization Action Plan (RIAP). The focus was made on ways forward to improve the process of the JRF data collection and validation and on the importance of the data reported and its uses both at global and regional levels.



Participants of the Workshop on improving the quality of the data reported in the joint reporting form (JRF).
Credit: Marcela Contreras/PAHO.



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The workshop was organized around three different sessions, which permitted to maintain high involvement of all participants, and a very positive dynamic:

1. One traditional session of presentations focussing on highlighting the global and regional indicators, their trends, challenges and opportunities as reported in the JRF and on how they respond to the monitoring needs of GVAP and RIAP.
2. A very interactive session where a panel of experts was responding to the countries' specific questions. It allowed clarification of issues and identification of the difficulties that the countries are facing in filling the form each year. Interestingly enough, some country representatives stressed the importance of gathering and analysing the data reported in the JRF to guide national decision making.
3. A last session was dedicated to group brainstorming to review the process of filling the forms, and to run data validation rules to check the consistency and coherence of the data reported. The countries conducted a cross checking of the JRF of another country and also, they reviewed their financial data and trends, so they can note the data quality of the JRF data. Simultaneously, the representatives of the countries provided feedback on how to improve the JRF in order to diminish the risk of reporting non consistent or non-coherent data.