COMPREHENSIVE IMMUNIZATION (CIM)

Recommendations on the use of dengue vaccine in the region of the Americas

Pan American Health Organization 2026

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The Pan American Health Organization, with the support of its Strategic Advisory Group on Vaccine-Preventable Diseases, recommends the following on the use of dengue vaccine in the region of the Americas:

1. TAK-003 may be used for dengue vaccination in individuals aged 6 to 59 years of age in geographic areas with a high dengue burden and sustained high levels of transmission. As a guide, countries may consider a recent seroprevalence >60% among 9-year-olds or a mean age of peak dengue-associated hospitalizations of <16 years during the most recent epidemic year as indicators of high burden of disease or high transmission intensity[1]. Each country should determine the specific areas and target population for vaccination.

   PAHO does not currently support the co-administration of TAK-003 with yellow fever, hepatitis A, human papillomavirus (HPV), or other vaccines during the introduction of TAK-003 into national immunization programs. Given the limited evidence on co-administration, Member States introducing TAK-003 should administer it separately from other vaccines, particularly live attenuated vaccines. This approach would facilitate vaccine safety monitoring and support the accurate assessment of adverse events following immunization (AEFI), referred to in the Region as events supposedly attributable to vaccination or immunization (ESAVI).

   As experience with coadministration accumulates and robust AEFI surveillance capacity is in place, coadministration of TAK-003 with yellow fever, hepatitis A, and HPV vaccines could be considered as a means of improving vaccination coverage and reducing vaccination costs. Additional studies on the coadministration of TAK-003 with other vaccines are also recommended. In settings where coadministration is implemented, close monitoring of vaccine safety and effectiveness will remain essential.

[1] World Health Organization = Organisation mondiale de la Santé (2024). WHO position paper on dengue vaccines– May 2024 = Note de synthèse: position de l'OMS sur les vaccins contre la dengue – mai 2024. *Weekly Epidemiological Record = Relevé épidémiologique hebdomadaire*, *99*(18), 203 - 224. World Health Organization = Organisation mondiale de la Santé. https://iris.who.int/handle/10665/376642

2. Conduct ongoing, rigorous post-marketing surveillance to monitor the effectiveness and safety of TAK-003. This will require strengthening national ESAVI surveillance and reporting systems, as well as sharing surveillance data and findings with PAHO in a timely manner (see PAHO's Manual for Surveillance of Events Supposedly Attributable to Vaccination or Immunization in the Region of the Americas for reference).

Additional considerations

Countries should also strengthen dengue prevention and control programs in line with the local epidemiological context, ensure that dengue vaccine introduction does not compromise routine immunization coverage and maintain adequate programmatic capacity. In addition, mechanisms should be established to identify and follow up pregnant women inadvertently vaccinated against dengue, as well as women of reproductive age who are vaccinated and subsequently become pregnant. Follow-up should monitor pregnancy, birth, neonatal, and infant outcomes, including any potential vaccine-associated enhanced disease (VAED).

Given the safety alert and temporary suspension of the use of the Butantan-DV vaccine announced by Brazil's Ministry of Health in June 2026 as part of an ongoing safety investigation, PAHO looks forward to reviewing consolidated safety and pharmacovigilance evidence to inform any future assessment and recommendations regarding this vaccine.