Immunization Handbook

Third Edition

National Expanded Programme on Immunization, Sri Lanka

> Epidemiology Unit Ministry of Health Sri Lanka 2012





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FOREWORD

Sri Lanka's national immunization programme is frequently quoted as one of the strongest performers, not only in the region, but also in the world. The National EPI programme has an excellent record, with extremely low incidence of EPI diseases and high coverage of all EPI vaccines.

The provision of routine immunization services in Sri Lanka constitutes a major preventive health activity of the Ministry of Health. The first manual for Medical Officers on technical and implementation information on the Expanded Programme on Immunization was published by the Epidemiology Unit of the Ministry of Health in 1979 with the assistance of UNICEF and WHO. The updated 2nd edition of the Immunization Handbook was published in 2002 with the assistance of WHO.

As the epidemiological pattern of the EPI diseases changed over the years and more cost effective vaccines are available, the Ministry of Health revised the immunization schedule on a few occasions since 2002. Objectives of the EPI programme were also changed accordingly as coverage of immunization has improved. Hence improvement of quality of services provided and changing of target age groups were considered.

As the immunization schedule and the objectives of the immunization programme changed, Epidemiology Unit of the Ministry of Health decided to update the Immunization Hand book accordingly. I am pleased with this new edition of the Immunization Handbook, published by the Epidemiology Unit and hope this edition, will help health professionals to provide quality immunization services.

Producing such a publication was possible through the dedication and voluntary time commitment on the part of those involved. I would like to extend my sincere thanks to all the contributors for completing this very important and timely task.

Appreciation is extended to UNICEF for providing necessary funds for its publication.

Dr U. Ajith Mendis Director General of Health Services, Ministry of Health Sri Lanka

June 2012.

PREFACE

Immunization is one of the most successful and cost-effective public health interventions in the constant struggle of the human being against the diseases that affect its well-being.

The National EPI programme has an excellent record, with extremely low incidence of EPI diseases and high coverage of all EPI vaccines. However, unless the country pays attention to key issues of programme quality it could lose the advantages it has gained in disease control over the last 30 years.

Due to the rapidly expanding environment in the immunization field, some information published in the previous edition of the Immunization handbook is already outdated. This continues to be a challenge for the National EPI as more new vaccines are approved for use, new vaccine combinations are developed and additional data are available on the immunogenicity and efficacy of vaccines.

The objective of the Immunization Handbook 2012 is to provide updated clinical guidelines for health professionals in Sri Lanka on the safest and most effective use of vaccines in their practice. This new Immunization Handbook provides information on vaccine preventable diseases, the vaccines available, and the updated National Immunization Schedule, as well as practical advice and strategies for health professionals immunizing children and adults.

These guidelines are based on the best available scientific evidence at the time of writing, from published and unpublished literature. The guidelines will be reviewed periodically when new evidence becomes available.

All chapters have been updated and revised since the 2002 edition. In addition, 10 new chapters for Human Papillomavirus, live Japanese Encephalitis, Rabies, Typhoid, Influenza, Varicella, Hepatitis A, Yellow Fever, Cholera and Rotavirus vaccines are included in the new edition.

I would like to thank all the authors who updated the handbook - and all those who acted as peer reviewers. I am grateful to Dr Samitha Ginige consultant Epidemiologist for his untiring efforts as the editor in making this manual a reality. Appreciation is extended to the UNICEF for their assistance in providing funds for this publication.

I trust this edition, like its previous editions, will prove a valuable resource for health professionals.

Dr Paba Palihawadana Chief Epidemiologist Epidemiology Unit, Ministry of Health Sri Lanka. June 2012

ABBREVIATIONS

AD syringe auto-disable syringe

AEFI adverse events

following immunization

AFP acute flaccid paralysis

AIDS acquired immunodeficiency syndrome

ARV anti-rabies vaccine

aTd adult diphtheria and tetanus toxoid vaccine

BCG Bacillus Calmette-Guérin vaccine

BP blood pressure

CHDR child health development record

CFR case fatality rate

CCID50 cell culture infective dose 50
CRS congenital rubella syndrome

CSF cerebrospinal fluid

DNA deoxyribonucleic acid

DTP diphtheria, tetanus and pertussis vaccine

DT diphtheria and tetanus vaccine

DTwP diphtheria, tetanus and whole cell pertussis

vaccine

DTaP diphtheria, tetanus and acellular pertussis vaccine

DTaP-HepB diphtheria, tetanus and acellular pertussis and

hepatitis B vaccine

DTwP/Hib diphtheria, tetanus, whole cell pertussis and Haemo-

philus inflenzae type b vaccine

DTwP-HepB-Hib diphtheria, tetanus and whole cell pertussis, hepatitis

B and Haemophilus influenzae type b vaccine

DTaP-HepB-IPV -Hib diphtheria, tetanus, acellular pertussis, hepatitis B and

inactivated polio vaccine

dTpa reduced antigen diphtheria, tetanus and acellular per-

tussis vaccine

ELISA enzyme linked immunosorbent assay

EPI Expanded Programme on Immunization

ERIG equine rabies immunoglobulin

GBS Guillain-Barré Syndrome

HAV hepatitis A virus

HBV hepatitis B virus

HCC hepatocellular carcinoma

Hep B hepatitis B

HBIG hepatitis B immunoglobulin

HBsAg hepatitis B surface antigen

HDC human diploid cell

HDCV human diploid cell vaccine (for rabies)

HHE hypotonic, hyporesponsive episode

Hib Haemophilus inflenzae type b

HIV human immunodeficiency virus

HPV human papilloma virus

HRIG human rabies immunoglobulin

HTIG human tetanus immunoglobulin

ICNO Infection Control Nursing Officer

ID intradermal

IG immunoglobulin

IgA immunoglobulin A

ILI Influenza Like Illness

IM intramuscular

IPD invasive pneumococcal disease

IPV injectable polio vaccine

IU international units

JE japanese encephalitis

LJEV live JE vaccine

mIU milli international units

mL millilitre

MMR measles, mumps and rubella vaccine

MNT maternal and neonatal tetanus

MOH Medical Officer of Health

MR measles and rubella vaccine

MRI Medical Research Institute

MVHRV Monovalent Human Rotavirus Vaccine

NNT neo-natal Tetanus

NIDs National Immunization Days

OCV oral cholera vaccine

OPD Out Patient's Department

OPV oral polio vaccine

PCEC purified chick embryo cell vaccine (for rabies)

PCV pneumococcal conjugate vaccine

PHI Public Health Inspector

PVBHRV Pentavalent Bovine Human Reassortant Vaccines

PET post exposure treatment (for rabies)

PVRV purified vero cell rabies vaccine

RDHS Regional Director of health services

RE Regional Epidemiologist

RIG rabies immunoglobulin

RMSD Regional Medical Supplies Division

RNA ribonucleic acid

SC subcutaneous

SMI School Medical Inspection

TB tuberculosis

TCV tissue culture vaccine

TIG tetanus immunoglobulin

TOPV Trivalent Oral Polio Vaccine

TT tetanus toxoid

UNICEF United Nations Childrens Fund

VAPP vaccination associated paralytic poliomyelitis

VLPs virus-like particles

VPD Vaccine Preventable Disease

VVM Vaccine Vial Monitor

WER Weekly Epidemiological Report

WHO World Health Organization

WRCD Weekly Return of Communicable Diseases

