



Minutes *EAP Winter Minutes- Vaccination WG* *Friday, 7 December, 2018 | 09:00-11:00*

(Hans Jürgen Dornbusch, Daniela Kohlfürst, Andreas Trobisch)

Introduction with progress report focused on letter presented to European Commission and making vaccine coverage a key topic with funding granted (Joint Action on Vaccination). (Daniela Kohlfürst)

Men B Update, Daniela Kohlfürst

- Adverse events expected didn't happen except for 1,5-4 fold increase in fever after injection (paracetamol prophylaxis) – no safety concerns from 3 Mio doses
- Good data from UK in preventing disease (60-70% reduction) but unfortunately no reduction in carriage status (Australian students).
- 2+1 schedule is sufficient to reach seroprotective antibody levels

Pneumococcal Update, Daniela Kohlfürst

- 7/10/13/23 valent vaccines on the market
- Good data from UK/USA on reducing Invasive Pneumococcal Disease, pneumonia, acute otitis media and carriage status with conjugate vaccines
- Herd protection with rates >70%
- Difference between PCV10 and PCV13 mainly affecting ST19A

Varicella Update, Daniela Kohlfürst

- Risk for morbidity and mortality
- Dramatic reduction of mortality in USA
- German Experience: Good acceptance, herd protection with high coverage (80% with 2 doses), disease reduction, no age shift, few breakthrough diseases, increase in zoster in adults unrelated to vaccination

Influenza report, Andreas Trobisch

- Brief report on processes/progress being made and reminding why vaccine coverage is vital to child health
- Report on why influenza should be taken serious (mortality rates, high morbidity/cost)
- ESWI Meeting report with short walkthrough of presentations
- Key messages:
 - o Data surveillance vital (U.S. good example)
 - o Cost effectiveness studies to influence governments towards funding of vaccinations (ECDC working on tool to facilitate conducting these studies)
 - o Pharmacists possible resource to enhance vaccine coverage
 - o Even if gap in vaccine of specific influenza subtype, cross immunity and protection seen due to previous vaccines given
 - o Vaccination should be given to all age groups for maximum effect, introduce life-long vaccinations: e.g. schemes for different phases of life



- Health care workers play a vital role in prevention and should be withheld from treating frail patients if not vaccinated.
- All physicians should be allowed to vaccinate
- Provide consistent flow of information through all level of healthcare & communication must be transparent
- “Behavioural economics” – nature of hesitancy in cross professional approach (e.g. studies performed by EAPRASnet)
- Improve basic education and training of paediatricians and other health care workers in terms of vaccinology, microbiology and immunology
- Keep the discussion on mandatory vaccination alive – different approaches possible (e.g. vaccinate children before kindergarden)
- Patient organizations need to play an active role and help determine national health policy

IIS (Immunization Information Systems), Daniela Kohlfürst

- Which countries in Europe already have national/subnational implementation, pilots/don't have an electronic vaccination program running
- European committee has made it a top priority to implement a European solution
- Handbook by ECDC as guidance for implementing IIS
- Promising tool to increase vaccination coverage and to avoid deviations from the vaccination schedule
- Action of EAP representatives needed: support in ISS implementation (informing opinion leaders, national society, politicians) – and using the Handbook

Discussion:

- Czech representative disagrees with letting pharmacists have any role in vaccinating children. It should be the sole responsibility of a physician.
- French delegate agrees but details that it is mainly due to infrastructure (no room to have privacy/to observe child post vaccination) and also a degree of vaccine hesitancy in pharmacists in France
- Valtyr proposes instead of vaccinating all ages to go for risk groups rather, as data exists showing a whole population infection decrease, and it would be easier to argue with politicians (funding)
- Also to put more emphasis on vaccinating pregnant women thereby protecting infants as the highest hospitalization risk group, and to think of „cocooning“ vaccination (whole family should be vaccinated to avoid spreading of influenza to a newborn)
- EAP representative from Luxemburg raises the issue of vaccine shortage in influenza and questions how this can be addressed/overcome
- EAP representative from Israel reports on measles outbreak with >2000 cases and 1 dead child
- Stefano explains the Joint Action Programme and fund. In addition, there is another meeting tomorrow addressing the letter to the commission.