Group discussions working group 2 Immunization 15:20 – 16:45

What is needed to achieve the proposed targets and milestones of the WHO Action plan for the health sector response to viral hepatitis in the WHO European Region?



2018 MILESTONES	2020 TARGETS
IMMUNIZATION	
 90% coverage with three doses of HBV vaccine in countries that implement universal childhood vaccination National guidelines on risk group HAV and HBV vaccination developed and implemented 	 95% coverage with three doses of HBV vaccine in countries that implement universal childhood vaccination ≤0.5% HBsAg prevalence in vaccinated cohorts 80% of health care workers vaccinated against HBV



2018 MILESTONES	2020 TARGETS
PREVENTION OF MOTHER-TO-CHILD TRANSMISSION OF HBV	
 For countries that implement universal newborn vaccination: 85% coverage with timely HBV birth dose vaccination 	 For countries that implement universal newborn vaccination: 90% coverage with timely HBV birth dose vaccination
 For countries that implement screening of pregnant women and post-exposure prophylaxis of newborns: 85% coverage with screening in pregnant women and 90% coverage with post-exposure prophylaxis in infants born to infected mothers 	 For countries that implement screening of pregnant women and post-exposure prophylaxis of newborns: 90% coverage with screening in pregnant women and 95% coverage with post-exposure prophylaxis in infants born to infected mothers



- What is the current situation?
- What is achievable to reach the milestones/targets? What are the challenges?



- Immunization is the most advanced reaching targets 90-95% of the infants/children
- Mandatory system
- What about the 'underserved'
 - Health visitors door to door –
 - Roma deliver in hospitals no issue for birth dose
 - Nurses responsible for immunization
- Catch-up program for ado's in Albania, not in Macedonia



- No hepatitis A immunization policy yet in Albania, Bulgaria, Rep of Macedonia
- Currently in a transitional situation for hepA epimdeiology
- Cfr WHO recommendation in such situation
- What about hepatitis A vaccine recommendation?
- Need for sero-survey in < 15y olds
- Need for a model to calculate the impact of several strategies
- Look at the cost-effectiveness
- Then make a cost-effectiveness analysis to support the decision
- Present to NITAG



- Perinatal transmission
- Birth dose with high coverage, but no HBIg for the moment
- What is the point of screening the mother as part of prenatal care?
 - Do we need to treat the mother in the third trimester with anti-virals?
 - no support for that option!
- Give priority to screen
 - and offer HBIg to exposed newborns
 - Efficacy > 98%
 - or offer HBIg only to those newborns of HBeAg+ mothers
- Need for good coordination between pre-natal care and gynecologist team/ ped team, ...



- Need for a monitoring system for vaccination. Not only for hepB also for other vaccines an integrated system to keep it efficient
 - There is good will but no database or register for immunization
 - Discrepancy between official data and what is registered
 - Need for linking between registries/ coordinaation
 - Registries are paper-based or increasingly web-based
- Need to have a national plan where responsibilities are highlighted who is responsible for what (MOH, IPH, ...)
 - So far no coordination yet so struggling for a web-based system in some countries (already in place in Albania in extension phase)
- Monitor timing of birth dose, and other infant vaccination
 - To be included in a national plan for some of the countries
- (Set up pro-active campaings to underline the importance of timely immunization for HCW as well as for parents/general public)
- (Monitor public/parental perception on vaccination, in particular on birth dose vaccination.)
- Funding of immunization programs needs to be guaranteed!
- Screening program for pregnant women will be challenging to reach good screening coverage!