# Visions for the Danish Childhood Vaccination Programme Time Childhoo

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# Agenda



- The present vaccination coverage
- New vaccine candidates and decision making





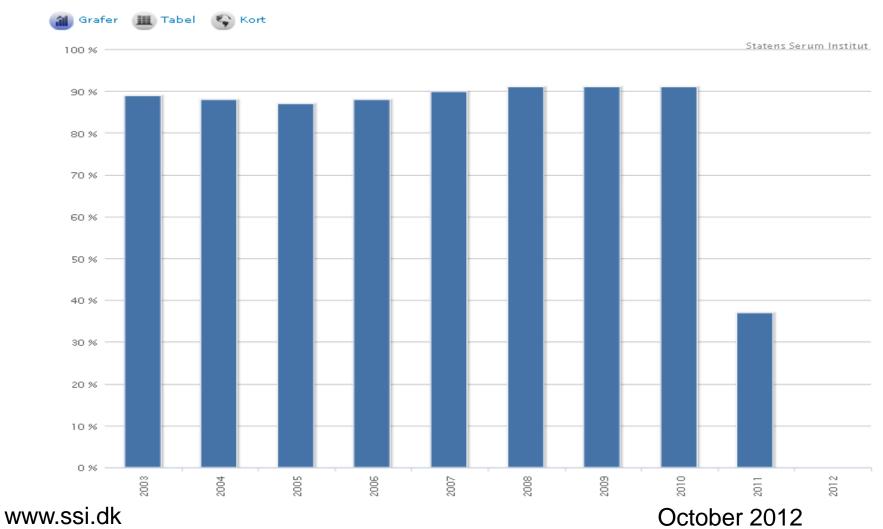


Age	English	Danish
3 m	DTaP+IPV+HIB+PCV13	DiTeKiPol+HIB+PCV13
5 m	DTaP+IPV+HIB+PCV13	DiTeKiPol+HIB+PCV13
12 m	DTaP+IPV+HIB+PCV13	DiTeKiPol+HIB+PCV13
15 m	MMR1	MFR1
4 y	MMR2	MFR2
5 y	dTaP+IPV	DiTeKiPol-booster
12-15 y	HPV	HPV

# DTaP-IPV-HiB coverage 12 m



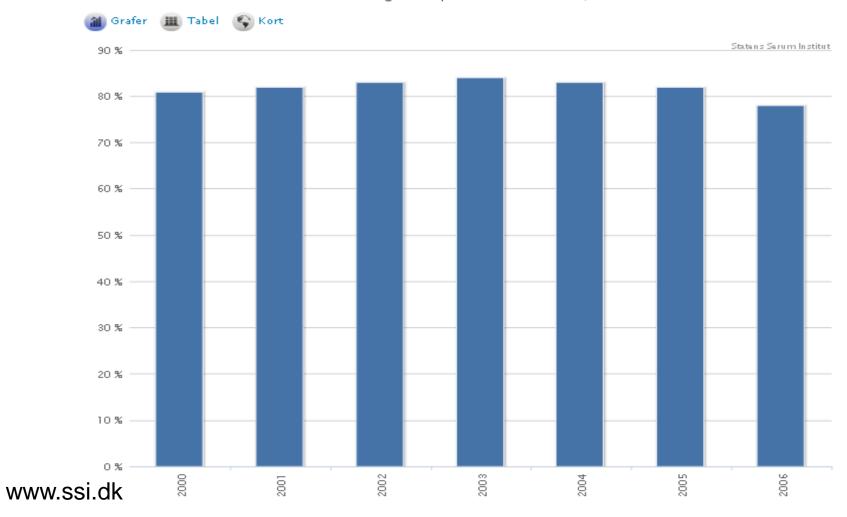
Andel vaccineret med Difteri-tetanus-kighoste-polio-Hib 3 (12 måneder), Fødselsår: 2003-2012



# dTaP-booster 5y



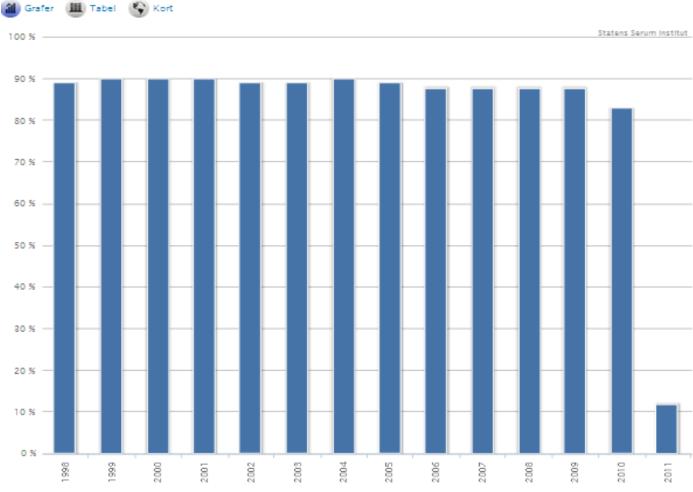
Andel vaccineret med Difteri-tetanus-kighoste-polio revaccination, Fødselsår: 2000-2006



## MMR1 15m



Andel vaccineret med MFR 1, Fødselsår: 1998-2011

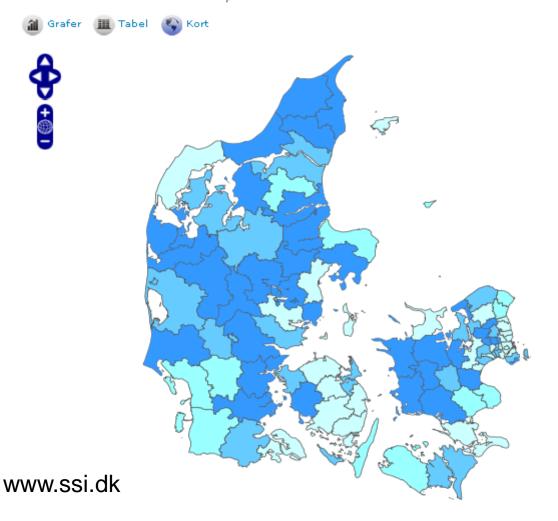


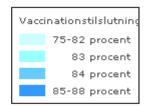
www.ssi.dk

# MMR2 by municipality



Andel vaccineret med MFR 2, Fødselsår: 1986-1999



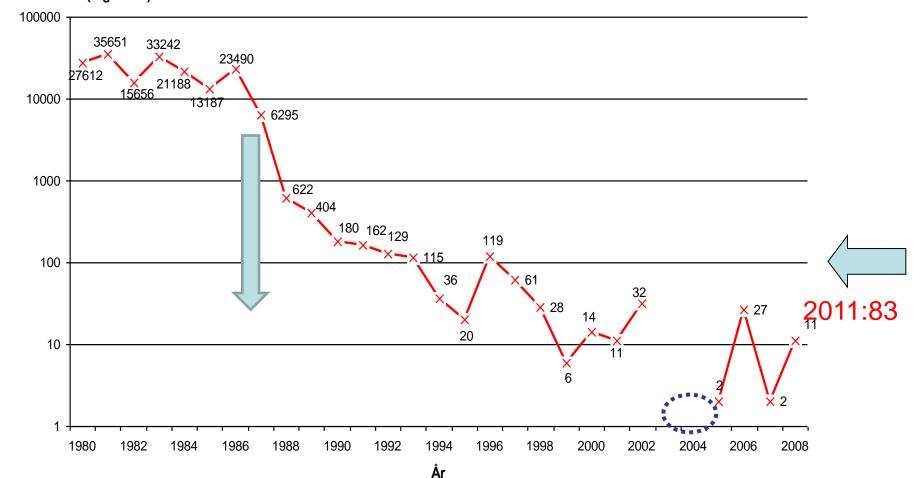




## Measles in Denmark, 1960 - 2011







## Measles 2011

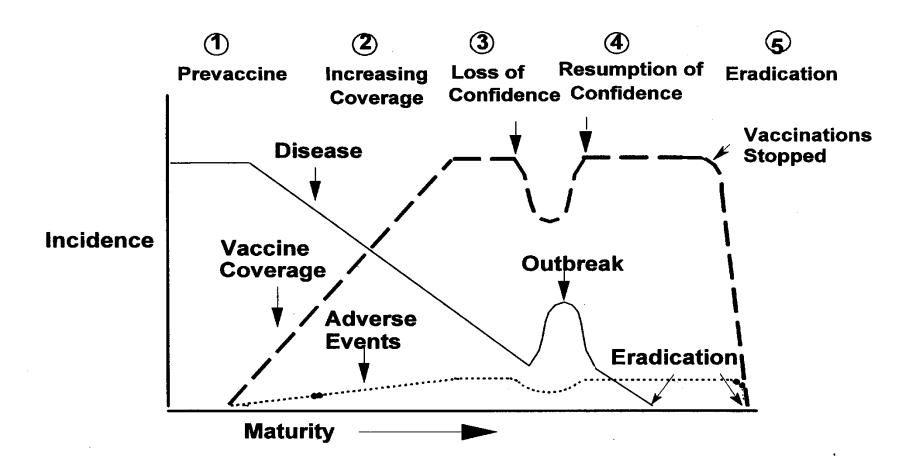


- Age 4 -59 years
- 33% > 18 years
- 51% was admitted to hospital
- Among those > 18 years 71% was admitted



### Introduction of a new vaccine





## Reasons for non-vaccination



60 parents whose children had not received the dTaP-IPV booster

	dTaP-IPV booster
Why not vaccinated	
Forgot	26 (37%)
Do not want vaccination	11 (16%)
Did not have time	1 (1.5%)
Child sick at vaccination, not rescheduled	1 (1.5%)
Other, not specified	21 (30%)

#### The Danish vaccination register

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Article submitted on 30 September 2011/ published on 26 June 2012

- Implemented during 2013-14
- Database with information on all given vaccinations
- Electronic vaccination-card
- Childhood-vaccinations from 1996 and onwards
- Health care personnel will access
  - Integration with existing medical health record system
  - Sundhed.dk with digital signature
- Citizens get access
  - Sundhed.dk with NEMID

# Decision making in Denmark













#### Vaccination commite

- Pediatrician
- •GP
- Infections Disease Experts
- •SSI
- Danish Medicines Agency







# SST's criteria for including new vaccines



- Seriousness of disease (deaths, permanent complications)
- Efficacy and effectiveness of vaccine
- Safety vaccine
- Experiences from use in other populations (gains/risk)
- Parents accept
- Fitting in to existing programme
- Ecological effects (replacement, postponing disease to older age
- Cost effectiveness
- How many vaccines in programme

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# Health technology assessments in DK



INDFØRELSE AF HEPATITIS B-VACCINATION SOM EN DEL AF BØRNEVACCINATIONS-PROGRAMMET I DANMARK

En medicinsk teknologivurdering

2003

2003: Hepatitis B not introduced in programme

- selective screening
- vaccination of at-risk population

REDUCTION IN THE RISK OF CERVICAL CANCER BY VACCINATION AGAINST HUMAN PAPILLOMAVIRUS (HPV)

a health technology assessment - Summary

2007

2007: HPV vaccination introduced to 12-year old girls

VACCINATION MOD ROTAVIRUS

– en medicinsk teknologivurderingSammenfatning

2012

2012: Awaiting

### Potential new vaccines



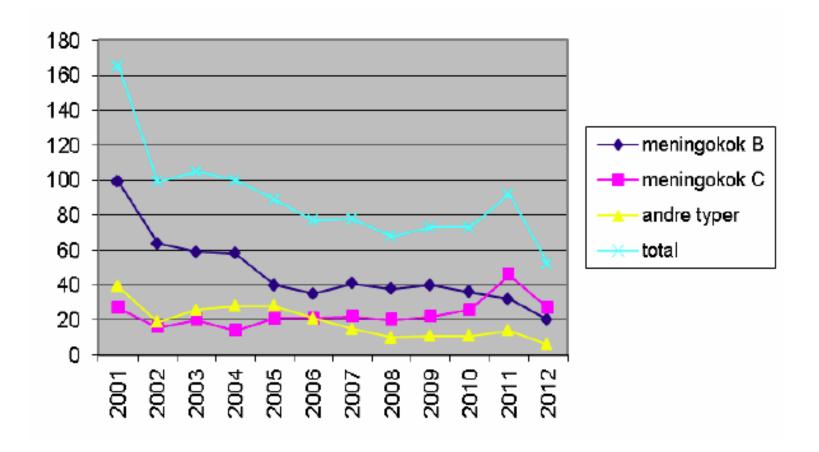
- Vaccines against diseases with a high mortality and risk of permanent complications
- Vaccines against diseases with a high burden, but less serious outcomes

## Potential new vaccines



- Vaccines against diseases with a high mortality risk of permanent complications
  - Meningococcus group C
  - Meningococcus group B (vaccine not yet on the market)

# Notified cases of meningococcal disease in Denmark STATENS COCCAL DENMARK STATENS COCAL DENMARK STATENS COCCAL D



## Men C



- In 2011 70% of cases were due to genotype 5,2:F:3-3 which has been associated with a higher mortality in other countries
- The increase has ceased in 2012
- Even in 2011 the incidence in Denmark was lower than in other European countries at the time vaccination was introduced
- Serious disease, we follow the situation closely!

### Potential new vaccines



- Vaccines against diseases with a high burden, but less serious outcomes?
  - -Varicella (mortality all agegroups: 0.5/million pyrs)\* (longterm sequelae <16 yrs: 0,5-1 /10.000pyrs)\*\*
  - -Rotavirus (mortality infants: 10-20/million pyrs??)\*\*\*
  - -Influenza (mortality in children: 2-8/million pyrs)\*\*\*\*

<sup>\*</sup>Nguen et al. NEJM 2005

<sup>\*\*</sup> Matthew et al. Pediatric 2004

<sup>\*\*\*</sup> Personal communication with Thea Fisher while jogging yesterday

<sup>\*\*\*</sup> Heikinen et al. Eur J Pediatr 2006

## Visions summarized



#### An increased vaccination coverage

- Need for continous information and education of citizens and healthcare personel
- Danish Vaccination Register enrolled in 2013, which may also be used for sending recall reminders

#### New vaccine candidates

- MenC & B? however the overall incidence rate of meningococcal disease is lower than ever!
- SST has to continously reconsider the present criteria for including new vaccines
- Delicate and difficult balance to maintain a high confidence in the programme and a high coverage and also adding new vaccines





