$\begin{tabular}{ll} Table 4. Examples of issues addressed and recommendations made at recent meetings of the Thai \\ ACIP \end{tabular}$

Meeting date	Issue to be considered	Recommendation made by	Status of implementation
		the ACIP	(as of January 2010)
17 July 2009	Immunization policy for	Establish expert group to draft	The policy has been drafted
	health care workers	policy for consideration by the	and is expected to be
		ACIP	included in the next ACIP
			meeting for consideration.
	What vaccines to add to	Add hepatitis B and JE to the	The recommendation will be
	the list required for	list of required vaccines for	implemented in Fiscal Year
	foreign-born children	foreign-born children	2010.
	living in Thailand		
	(besides BCG, DTP,		
	OPV and measles)		
18 September	Prioritizing groups to	Establish small expert group to	The expert group's proposals
2009	receive the 2009 H1N1	draft proposal to identify	were accepted and
	flu vaccine, once	priority groups for the vaccine	vaccination for the
	available	for consideration by the ACIP	recommended groups started
		(based on data on vaccine	in January, 2010.
		characteristics and	
		performance, estimated	
		incidence and mortality rates	
		of different risk groups, and	
		estimated population size of	
		each group)	
17 July 2008	Hib vaccine introduction	Not to introduce Hib vaccine	Hib vaccines are available in
		(mainly because members	private facilities and some
		doubted the estimate of the	governmental facilities and
		burden of Hib pneumonia)	vaccinees have to pay for
			them.
	Possible change in target	Keep the age for the first	The revised schedule to
	ages for measles	measles dose at 9-12 months	include the second dose of
	vaccination	and decrease the age for the	MMR has been included in
		second dose (using MMR)	the immunization reference

Meeting date	Issue to be considered	Recommendation made by	Status of implementation
		the ACIP	(as of January 2010)
		from 7 years to 4 years	manual and official letters
			sent to health facilities
			requesting them to follow
			the recommendation.
	Whether to consider the	Not to use the live SA 14-14-2	SA 14-14-2 has been
	use of the live attenuated	JE vaccine unless the mouse-	available in most of private
	SA 14-14-2 JE vaccine in	brain vaccine is not available.	facilities in big cities and
	place of mouse-brain		some governmental facilities
	derived vaccine used in		and vaccinees have to pay
	the EPI		for them.
27 December	What specific MMR	Stay with current MMR	The EPI plans to start buying
2007	vaccine to use in the EPI	vaccine due to availability	the MMR Jeryl Lynn strain
	for 6-12 month olds (e.g.,	problems with other types and	in 2010.
	Jeryl Lynn strain of	revisit the schedule and target	
	mumps)	ages for measles and MMR	
		immunization	
	Reconsideration of the	Change schedule for infants	The recommendation was
	schedule for hepatitis B	from 2 months of age to 1	distributed to all health care
	immunization in infants	month for the second hepatitis	facilities nation-wide, and
	of hepatitis B carrier	B dose (first dose at birth	has been implemented.
	mothers	remains the same)	
	Selection of public	Use already available	The educational material has
	education messages	educational materials	been put on the EPI website.
	about HPV immunization	developed by medical	
		associations	
	What high-risk groups	Seasonal flu vaccine should be	People with chronic illness
	should receive seasonal	given to people with chronic	have been receiving seasonal
	flu vaccine besides	illnesses and funded by the	flu vaccine since 2008.
	health workers	NHSO.	
	health workers	NHSO.	