

Final Recommendations



**GOVERNMENT OF NEPAL
NATIONAL COMMITTEE ON IMMUNIZATION PRACTICES
(NCIP)
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General Recommendations



General Recommendations



- The Government of Nepal should review and prioritize research needs for new vaccine introduction and include funding for prioritized activities in the annual Government work plan.
- The cold chain and logistics system should be updated as per the effective vaccine management (EVM) assessment as necessary to accommodate new vaccines.
- The AEFI Committee and follow up of reported AEFI cases should be strengthened.

General Recommendations



- Vaccine introduction for enteric vaccines (rotavirus, typhoid, cholera) should be one component of an integrated child health program to decrease morbidity and mortality from diarrheal disease including safe water, hygiene, sanitation, nutrition, and IMCI.

Rotavirus Vaccine Recommendations



Rotavirus Sentinel Surveillance



- Rotavirus sentinel surveillance provides valuable information and should be continued.
- Regular reports (quarterly) from rotavirus sentinel surveillance should be shared with Government of Nepal and WHO Country Office.
- Consideration should be given to expand rotavirus surveillance to additional sites as feasible.

Rotavirus Vaccine Introduction



- As expressed in cMYP 2011-2016, rotavirus vaccine should be prioritized for introduction in Nepal following introduction of pneumococcal vaccine;
 - Given differences in cold chain requirements and no VVM on the Rotateq, Nepal may wish to consider Rotarix (two dose schedule with penta1 and penta2);

Pneumococcal Vaccine Recommendations



Invasive Bacterial Disease Sentinel Surveillance



- The quality of sentinel surveillance should be optimized with standardization of enrollment, data collection, and laboratory procedures;
 - Sheep red blood should be used instead of human red blood;
 - To optimize culture yield, CSF specimens should be forwarded for culture within one hour without waiting for results of cell count;
- Sentinel sites should continue to closely monitor circulating serotypes of *S. pneumoniae*.
- Attempts should be made to better define catchment populations of sentinel sites;

Invasive Bacterial Disease Sentinel Surveillance



- Regular reports (quarterly) from IBD sentinel sites should be shared with Child Health Division and WHO Country Office.
- NPHL should serve in a coordinating role for the laboratory-based surveillance of invasive bacterial disease at sentinel sites and national antimicrobial resistance surveillance.
- Consideration should be given to expand invasive bacterial sentinel surveillance to sites outside of Kathmandu Valley.

Invasive Bacterial Disease Sentinel Surveillance



- Regular (annual) independent assessment of sentinel sites should be made by technical experts.
- Existing surveillance for pneumonia cases and deaths among children <5 years should be strengthened to document baseline and later impact of vaccination.

Pneumococcal Vaccination



- As expressed in cMYP 2011-2016, pneumococcal vaccine should be prioritized for introduction in the National Immunization Program from 2014.
 - Exact vaccine to be decided at the time of application.
 - Given the disease burden among very young children, Nepal may wish to consider three primary dose series.

Typhoid Vaccine Recommendations



Typhoid Sentinel Surveillance



- Sentinel surveillance for typhoid should be rolled into the national antimicrobial resistance (AMR) surveillance coordinated by NPHL.
- Typhoid sentinel surveillance should be expanded to sites already in the AMR surveillance system especially in hospitals located in larger municipalities outside Kathmandu Valley.
- Consideration should be given to reviewing and standardizing laboratory procedures used by sentinel sites;

Typhoid Sentinel Surveillance



- Consider completion of additional analyses of previously reported sentinel surveillance data to stratify by VDC / municipality.
- Mapping of high risk persons/populations/areas using surveillance data should be completed in preparation for expansion of typhoid vaccination programs.

Typhoid Vaccine



- Consideration should be given to continue targeted typhoid vaccination program reaching high risk persons.
- Vaccination of school aged children in Kathmandu District should be completed with support from donors and partners.
- Government of Nepal should promote typhoid vaccination among food handlers.

Cholera Vaccine Recommendations



Cholera Sentinel Surveillance



- Cholera sentinel surveillance should be included in the national antimicrobial resistance program at NPHL.

Cholera Vaccine Demonstration Project



- Government of Nepal should develop a cholera vaccination preparedness plan in response to outbreaks.
- A cholera vaccine demonstration project using modified bivalent killed vaccine should be considered for implementation in Nepal in one or more locations with evidence of endemic cholera.