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**INDIAN ACADEMY OF PEDIATRICS**  
Kailas Darshan, Kennedy Bridge, Mumbai-400007

**Minutes of the meeting of the IAP Advisory Committee on Vaccines & Immunization Practices (ACVIP) of Indian Academy of Pediatrics held on April 19&20, 2014 at India Habitat Center, New Delhi 1.00 PM onwards.**

*The following IAP ACVIP members were present at the meeting:*

Dr Vijay Yewale, Co-chair

Dr Rohit Agarwal, Co-chair

Dr Vipin M. Vashishtha, Convener

Dr Pravin J. Mehta, Coordinator

Dr Shashi Vani, Member

Dr Anuradha Bose, Member

Dr Ajay Kalra, Member

Dr Surjit Singh, Member

Dr NK Arora, Consultant

Dr Naveen Thacker, Consultant

Dr Rajesh Kumar, Consultant

Dr Ajay Gambhir, Consultant

Dr Ramchandran VG, Consultant

Dr. Panna Choudhury, Rapporteur

*Following member requested leave of absence:*

Dr. C.P. Bansal, Chair

Dr. H.P.S. Sachdev, Consultant

Dr. A.K. Patwari, Member

*Following were the special invitees who attended the meeting:*

Dr M.K. Bhan, Former Secretary, Dept. of Biotechnology, GoI, New Delhi.

Dr Mahaveer Jain, President-Elect, IAP 2014

Dr Monjori Mitra, Pediatrician, Institute of Child Health, Kolkata, Investigator for PedaTyph (Typhoid) & Biovac (Hep-A) vaccines

Dr Sangeeta Yadav, Pediatrician, Maulana Azad Medical College, New Delhi

Dr Jyoti Joshi, Immunization Technical Support Unit, MoHFW , Public Health Foundation of India, New Delhi

Dr Deepak Polpakara, Immunization Technical Support Unit, MoHFW , Public Health Foundation of India, New Delhi

***Proceeding & recommendations:***

1. Dr. Vijay Yewale, President IAP welcomed the participants in the first ACVIP meeting in 2014 and stated that ACVIP guidelines were based on solid evidence.
2. Dr. Vipin M. Vashishtha (VMV), Convener presented details of all ACVIP publications. He informed the participants that IAP Text book of vaccines had already been released and IAP Guidebook of Vaccines, 2013-14 was expected to print by April end 2014. Members felt that it should be ensured that guidebook reaches all the members. CBS publisher may publish 2000 more copies and modalities are being worked out. He also informed about the position papers, published already and that few are in the pipeline.
3. **Conflict of interest issues** were thread barely discussed. It is decided that proforma could be modified based on SAGE and GAVI pattern. Some discrepancy was noted in the declaration submitted by Dr Vijay Yewale with his previous declaration and fresh declaration. The issue was referred to special CoI committee that will look in to the matter and give recommendations.
4. IAP immunization App (Android and iOS) is already available online for free download and member should be encouraged to use it. Convener asked for feedback on FAQ section and if more questions need to be framed.
5. VMV stressed the need of ownership by IAP office-bearers at least on the guidelines published by IAP and that on official IAP platform contrary position should be avoided. Once a guideline is approved by the committee and EB of IAP they become official IAP recommendations and every IAP member should

follow it. Controversies should be avoided and difference of opinions should not be aired especially on the official IAP platforms.

6. Regarding ex-officio members in ACVIP meetings it is decided to refer the matter to Executive board for terms of reference.
7. Regarding funding of ACVIP meetings it is decided to refer the matter to EB as funds earmarked is already in negative balance(as informed by HSG).
8. Evidence Based Review(EBR) issue was discussed in detail and the funding issue needs to be resolved for its smooth continuation.
  - i) Dr. Naveen Thacker(NT) agreed to facilitate EBR on Typhoid and Rubella.
  - ii) Dr. Anuradha Bose (AB) agreed to facilitate EBR on pneumococcal related questions.
  - iii) Dr. Surjeet Singh(SS) agreed to facilitate EBR on pertussis and other diseases.
  - iv) Dr Rajesh Kumar (RK) agreed to facilitate EBR on Rotavirus and other diseases.
9. NT briefed about Global Measles & Rubella Initiative (MRI) and advised that IAP should try to become a member of this initiative(AAP is already a partner in it).
10. Dr. Sangeeta Yadav presented Mumps epidemiology but it was felt that data is still scarce. Dr VMV discussed the details about NTAGI decisions regarding Rubella & Measles vaccination. Dr Yewale & VMV argued about the need of relook at IAP recommendations on existing MMR schedule in light of GoI decision to start MR vaccination at 9 & 16-24 months. Different options for MMR vaccination schedule were discussed. **The decision went to votes and majority favored two doses of MMR, first at 9 months & second at 15 months. So, it was decided to revise IAP ACVIP recommendations on similar lines.**
11. Drs. Vijay Yewale, Vipin Vashishtha, Anuradha Bose, Shashi Vani, Surjit Singh and Ajay Gambhir(AG) presented upfront issues pertaining to rabies, epidemiology, modalities to control, anti-rabies vaccine and need for pre exposure prophylaxis in children. WHO has not given clear cut recommendations on universal pre-exposure prophylaxis (PEP) in children even in high endemic countries. After deliberations, it

is decided to recommend pre-exposure prophylaxis to children having pets with home or perceived with higher threat of being bitten by dogs, and on demand. These conditions shall be included under high risk category for rabies PEP in children.

12. AG presented medicolegal issue faced by the pediatricians. Members felt that if Do's and Don't's can be prepared, this would be helpful for pediatricians.
13. Dr. Panna Choudhury (PC) presented information available on administration schedule of RV1 from recent Pakistan and Ghana studies. Studies are not yet been published and as such full methodology and results are not available. Committee felt that available information does not warrant any changes in the schedule. An overview of Indian rotavirus vaccine, 116 E, was presented by AB. She informed that the vaccine would soon be available for use in Indian market. However it is not clear whether private pediatricians would be able to use it in coming months since information on exact formulation of the vaccine for private market is not yet available.
14. Dr. Monjori Mitra (MM) presented data on live attenuated Hepatitis A vaccine both published and unpublished. She presented 5 years data of multi-centric ongoing study which shows excellent efficacy of the vaccine. On the issue of waning of seroprotection in a subgroup of individuals of KEM Pune study cohorts, she informed that only a handful (around 10) subjects showed that phenomena and issues like higher age of the enrolled subjects may be involved. WHO has also recommended a single dose of same vaccine in their position paper. **The committee members were satisfied with the report and they unanimously decided to recommend single dose of Live attenuated, H-2 strain Hepatitis-A vaccine instead of current recommendation of 2 doses.**
15. Dr. Ajay Kalra, VMV, MM presented issues and data related to conjugated typhoid vaccine Typbar, Peda Typh and Vi-CRM 197. The committee members pointed out certain lapses in the cluster-assignments **of the trial with PedaTyph and asked investigators to relook at the methodology and do the statistical analysis after completion of the study.** Regarding Typbar-TCV, it was decided that since available data was only till 18 months and no new information was provided, hence it was difficult to ascertain the exact need and slot for the booster doses of the same. The primary vaccination schedule for Typbar-TCV shall

remain the same i.e. at 9-12 months of age. However, as of today, those who received a dose of Typbar-TCV at 9-12 months they can be prescribed boosters of polysaccharide vaccines.

16. Dr. N.K. Arora(NKA) presented on need to harmonize SAGE, NTAGI and IAP recommendations. Issue of difference in perspective of office practice and public health practice was discussed. It is felt to harmonize the recommendation to the extent possible. NKA also presented recommendation of SAGE meeting in April 2014 on pertussis, polio and HPV vaccination.
17. Dr. M.K. Bhan(MKB) deliberated on Pediatric Research in Office Practice especially in the field of immunization and pharmacovigilance. MKB stressed the importance of practice based surveillance, need of trainings and that self-controlled case series(SCCS) model may prove to be a useful tool for active surveillance. There would be need of experienced trainers to facilitate research. He mentioned about InClen, Clinical Development Services Agency (CDSA), Society for Applied Studies(SAS) and that IAP can use their expertise. Many other points touched by MKB are on policy research network of IAP, economic analysis, consumer concern, delivery efficiency in private sector, demand generation.
18. Dr. Jyoti Joshi from Immunization Technical Support Unit (ITSU), PHFI supported by MOHFW presented current MOHFW AEFI program and data specially related to pentavalent vaccine. Dr. Joshi stressed the need of private sector participation. It is decided to look at modalities to link ID Surv in the process.
19. PC presented recent data and SAGE recommendation HPV vaccination schedule in adolescents. **It is decided that a 2-dose HPV vaccination schedule may be recommended to adolescent girls 9-14 years of age. For girls, primed before the age of 15 years, even if older at the time of boosting(second dose), a 2-dose schedule may be considered. For 2 dose schedule, the minimum interval between doses should be 6 months. The interval between the first and second dose may be extended upto 12 months, should this facilitate administration-say in school settings. For girls 15 years and older, current 3 dose schedule should continue.**
20. SS informed about autoimmunity and auto immune disease which had been linked to vaccination and commented that such association has not been irrevocably proved.

21. In the end, few issues pertaining to the queries raised in different CMEs, social media, conferences, etc on IAP Immunization Schedule 2013 were discussed.
22. In the end, the convener, VMV thanked all the participants for their active participation in the meeting.

*-Report prepared by Dr. Panna Choudhury, April 23, 2014*