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Provincial Directors of Health Services,
Regional Directors of Health Services,
Heads/ Directors of Health Institutions,
Directors of National Hospital/Teaching Hospitals/Provincial & District General Hospitals, Base Hospitals,
All Medical Superintends of other Hospitals,
All Regional Epidemiologists/ Medical Officers (Maternal and Child Health),
All Medical Officers of Health,

## Measles Supplementary Immunization Activity (SIA) – 5<sup>th</sup> July 2013

In Sri Lanka Measles surveillance data revealed an increasing number of laboratory confirmed measles cases during January to May, 2013. Transmission of the disease is initially observed in late December and numbers are gradually increased over the time with higher proportions reported among infants below 1 year of age (around 40-50% of the total). Of the infants affected, around 40% were between 9-11 months of age and around 30% between 6-9 months of age throughout the period. An increasing susceptibility among infant is a well established phenomena in measles outbreaks.

Considering the available data of ongoing outbreak, the Advisory Committee on Communicable Diseases has decided to go for a Supplementary Immunization Activity (SIA) with Measles vaccine targeting 6-12 months old infants in the country. The main purpose of the SIA is the rapid reduction of the susceptible age group who are highly vulnerable for complications. This vaccination will be given as an additional vaccination dose against measles in view of control the current measles outbreak. The routine MMR vaccination with two doses at the age of 1 and 3 years will be continued at appropriate ages in accordance with the National EPI schedule.

## 1. Measles Supplementary Immunization Activity - date/s and place:

Measles SIA will be carried out on **5**<sup>th</sup> **July 2013, island wide in all immunization clinic centers**. Eligible Children who have missed the opportunity of getting the measles vaccination on the 5<sup>th</sup> of July (SIA day) will be given the opportunity to get the vaccination in the MOH office central immunization clinics on 4 consecutive Saturdays following the SIA date ( 6<sup>th</sup>,13<sup>th</sup>, 20<sup>th</sup> and 27<sup>th</sup> of July 2013)

The vaccination from the Central clinic on following consecutive 4 Saturdays is an opportunity for those who have missed vaccination on SIA day for any unavoidable reasons (eg: sick on SIA day, parents' unavailability due to an essential reason, Live vaccine received within last 4 weeks ect.)

#### 2. Target age group

All children in the age group of completed 6 months and up to 12 months of age by 5<sup>th</sup> July 2013 will be given a dose of Measles vaccine irrespective of the past history of clinical measles. Children eligible are the infant born between 6<sup>th</sup> July 2012 to 5<sup>th</sup> January 2013 including those two dates. For the details of calculation of District/ MOH level target population follow the guide on Measles SIA -July 2013 issued by the Epidemiology unit.

Supplementary Immunization of Measles vaccination should be considered as an additional vaccination dose and routine MMR vaccination should be given to all infants who have received SIA-Measles vaccination, on completion of 12 months and 3 years in accordance with the National Immunization schedule. But ensure the minimum of 4 weeks time interval between SIA dose and routine JE or MMR live vaccines.

#### 3. Measles vaccine

During the SIA all the eligible children will be immunized against measles using monovalent Measles vaccine.

#### Dosage and administration

A single dose of 0.5 ml of measles vaccine should be administered by deep subcutaneous route in to the upper arm preferably on left side.

#### Storage

Measles vaccine should be stored at  $+2^{\circ}$  C to  $+8^{\circ}$  C temperature. Reconstituted vaccines should be kept in a container with ice water to maintain the cold chain ( $+2^{\circ}$  C to  $+8^{\circ}$  C) and should be

protected from direct sunlight. Reconstituted vaccine should be discarded after 6 hours of reconstitution.

## **Contraindications**

The following conditions are considered as contraindications for the use of measles vaccine

- Presence of any of the general contraindications for any vaccine
- History of an allergy to neomycin, gelatin or other vaccine components
- Those who are severely immunocompromised as a result of congenital disease, HIV infection, advanced leukaemia or lymphoma, serious malignant disease, or treatment with high-dose steroids, alkylating agents or antimetabolites, or infants who are receiving immunosuppressive therapeutic radiation.

# 4. Immunization Clinic functions During SIA days

- All immunization clinics in every MOH area should be functioning from 9.00 am to 4.00 pm on 5<sup>th</sup> July 2013 island wide to provide additional measles vaccine dose for the eligible children.
- All central immunization clinics of every MOH area will provide an opportunity for the eligible children who have missed the opportunity of getting the measles vaccination on the 5<sup>th</sup> of July (SIA day) to get the vaccination on 4 consecutive Saturdays following the SIA date (6<sup>th</sup>,13<sup>th</sup>, 20<sup>th</sup> and 27<sup>th</sup> of July 2013) while providing the routine immunization services.
- Ensure the services of at least 2 competent, trained vaccinators to function the single clinic centre, (may include Public Health Inspectors [PHII]).
- Ensure the availability of a Medical Officer where ever possible to all Immunization clinics on SIA day by mobilizing staff from other health institutions.
- Volunteer support can be obtained for assistance in directing, registration, recording or tallying.
- If the same day is planned for routine immunization clinic activities in addition to SIA, it needs to function without disturbance.
- All children coming for SIA should be adequately screened to identify possible contraindications or any other high risk conditions by health care workers and refer to the Central clinic on next Saturday if any high risk identified.
- Any child if identified not healthy and suffering from an acute infection, should not be vaccinated and should be referred to the Central clinic on Saturday of the following week for completion of SIA Measles vaccination.
- Children due for 9 months JE vaccine after Measles SIA dose, may delay the administering of Live JE vaccine for 4 weeks after Measles SIA vaccination.

- Those who are due to get age appropriate JE vaccine, to the date of SIA vaccination (completed 9 months), can be given both Live JE and Measles vaccines together to different sites on the same day.
- Children who have already received the Live JE vaccination less than 4 weeks prior to the SIA date should be delayed giving measles vaccination until they would complete the minimum of 4 weeks after Live JE vaccination.
- MOH or a Medical Officer/RMO should available for Central clinics function on 6<sup>th</sup>, 13<sup>th,</sup> 20<sup>th</sup>and 27<sup>th</sup>July to advise special or high risk cases.
- All clinic attendees for SIA and vaccine recipients are needed to be entered correctly in clinic Registration sheet (Epid/M/S/Record 2)
- Once the child is selected as eligible for vaccination, he/she needs to be marked in the Clinic tally sheet provided (Epid/M/S/Record 3).
- Special documentation of Measles vaccination has to be entered in the child's Child Health
  Development Record (CHDR), in the Column for "other Vaccines", and special sticker provided
  needs to be pasted in the relevant area of the vaccine section of the CHDR to identify the
  children vaccinated with SIA. Same procedure should be applied if any child is found with a
  private sector vaccination card.
- Vaccine safety in Immunization clinics should be maintained and managed according to the circular "Initial Management of Anaphylaxis at Field level" (circular number 01-20/2001, dated 23/08/2011) and National guidelines given in the Immunization Handbook (3<sup>rd</sup> Edition), Epidemiology Unit, Ministry of Health.
- After administering the vaccine all children should be observed for a minimum of 20-30 minutes in the clinic for Adverse Events Following Immunization (AEFI).
- Administration of measles vaccine during the SIA will be done using AD syringes. Adequate
  amount of AD syringes and safety boxes for the SIA will be provided by the Medical Supplies
  Division (MSD) in coordination with the Epidemiology Unit. RDHS, RE, MOMCH and MOH will
  be responsible to ensure the availability and use of injection safety items at all immunization
  clinics in their respective areas.
- Any reported AEFI identified at the clinic needs to be entered in the 'Clinic Registration Sheet' (Epid/M/S/Record 2) and compile into 'Clinic Return' (Epid/M/S/ Form 2) and also to be entered in 'Clinic AEFI Register' at the end of the clinic.
- All AEFI reported during or after the SIA needs to follow the routine AEFI reporting and investigation procedure. (Refer the Guidelines on reporting and investigation of AEFI by Chief Epidemiologist in the Epid/75/2012 dated 01/04/2013)
- At the end of the clinic compile all the data and complete 'Measles SIA Vaccination Clinic Return' (Epid/M/S/Form 2) in two copies.
- Duly completed one copy of 'Measles SIA Immunization Clinic Return' (Epid/M/S/Form 2) has to be returned to MOH on the same day once remaining vaccines will be returned with the 'Clinic Vaccine Stock Return' (Epid/M/S/Form 3).

- The second copy of 'Measles SIA Vaccination Clinic Return' (Epid/M/S/Form 2) has to be filed with 'Measles SIA Clinic Registration Form' (Epid/M/S/Record 2) and with 'Clinic tally sheet' (Epid/M/S/Record 3) with the PHM responsible for the clinic.
- Disposal of sharps in safety boxes and waste bins should be done according to the standard accepted practices applied in the routine Immunization clinics.

## 5. Role of RDHS in measles SIA

- Coordinate, monitor and evaluate all the activities related to the measles SIA within the district.
- Ensure smooth functioning of all the measles SIA related activities in the district according to the instructions issued by the Epidemiology unit.
- Ensure the availability of a Medical officer where ever possible to all Immunization clinics on SIA day by mobilizing staff from other health institutions within the district.
- Ensure the availability of adequate number of trained vaccinators to all Immunization clinics on SIA day by mobilizing staff from other health institutions within the district
- Ensure availability of adequate transport facilities on SIA day for efficient and timely distribution of vaccines and other logistics to the clinic centers.

# 6. Role of Regional Epidemiologist /MO-MCH in measles SIA

- Conduct of district training programmes for MOH and active participation, co-ordination, supervision of training programmes at MOH level.
- Estimation of required stocks of measles vaccines and other logistics for the district.
- Close monitoring of requisition of measles vaccine & other logistics, vaccine storage and maintenance of cold chain at Regional Drug Stores and at MOH level.
- Close supervision of vaccine, AD syringes and other logistic supply & timely distribution in the district.
- Overall supervision of mechanisms developed in the region for disposal of AD syringes and sharp waste.
- Close monitoring and supervision of all SIA related activities and immunization coverage during the measles SIA.
- Compile and report district level measles SIA performance to the Epidemiology unit (Epid/M/S/Form 5)

## 7. Role of MOH in measles SIA

• Identify a list of all Immunization Clinic Centres in the area with the responsible PHM , trained vaccinators ( PHM or PHI) and a Supervisory Officer for each centre.

- Estimation of eligible population and estimated details of Measles vaccine & other logistic needs for the MOH area.
- Training of MOH staff on measles SIA.
- Motivate all PHMM/ PHII and other supervisory staff to get 100% coverage in the target age group.
- Motivate to get assistance from non health staff in the area and mobilize all to get down all target group children to clinics in achieving coverage.
- All possible efforts to make local advocacy to make the campaign a success.
- If volunteer support is expected, make them properly trained on documentation and registration procedure.
- Plan and make available adequate vaccines, proper storage, maintenance of cold chain, adequate cold boxes and formed ice packs, documentation formats and all other logistics to make the Measles SIA a successful programme.
- Ensure timely availability of adequate stocks of Measles Vaccine and other logistics in the clinics.
- Make Measles vaccine transportation plan with an appropriate networking to make sure timely receipt of the vaccine to the clinics. Same transportation plan can be used for post clinic vaccine and return collection
- At the end of the clinic, completed clinic return (Epid/M/S/ Form 2) of all clinics should be received by the MOH.
- Needs to conduct Central clinic for 4 consecutive Saturdays (6<sup>th</sup>,13<sup>th</sup>, 20<sup>st</sup> and 27<sup>th</sup> of July 2013) and need to provide Measles vaccination for all missed children.
- At the end of all 5 clinics days, compile all data in 3 copies of MOH return (Form 4) and send one copy to Epidemiology Unit, one copy to Regional Epidemiologist and file the other as an office copy before 15<sup>th</sup> August 2013.
- Private sector institutions, which routinely receive vaccines from MOH and provide immunization services may be requested to conduct measles SIA immunization post on the SIA day for providing services for their regular eligible clients free of charge. For the consented private sector institutions, required vaccines, AD syringes, safety boxes, records and returns could be provided free of charge. End of the SIA day records and balance vaccines should be collected by the MOH.

## 8. Role of heads of Health care Institutions

- Ensure provision of efficient health care services for the children who develop AEFI during the measles SIA campaign.
- Timely notification of all reported AEFI to the relevant authorities.
- Assist district level health authorities to carry out SIA by providing additional health manpower, cold chain facilities and transport facilities whenever possible.

• It has been observed that some of the infants have contracted measles when they were admitted to a paediatric ward for other ailments. Therefore during the SIA day it is recommended to vaccinate infants between 6 – 12 months of age who are in the Paediatrics wards (without contrindications) for other ailments. However the decision of vaccination of said infants will be taken by the treating Paediatricians. Hospital authorities are encouraged to organize SIA measles vaccination for such infants in coordination with area MOH and Paediatricians.

If you need further clarification or additional information, please contact the Epidemiology Unit. Please be kind enough to bring the contents of this circular to the notice of all concerned in your province/district/ institution/unit.

Dr. P. G. Mahipala

**Director General of Health Services** 

Ministry of Health

Cc: DDG (PHS) I & II

Chief Epidemiologist

**Director MCH** 

**Director HEB**