



Universiteit Antwerpen
| Faculteit Geneeskunde en
Gezondheidswetenschappen



21ste VALENTIJN VACCINATIESYMPOSIUM

Vertrouwen en/in Vaccinatie

10 Februari 2023

WELKOM!!!





5^{ième} Symposium de Vaccination S^t-Valentin

*La vaccination de la santé publique à la
médecine personnalisée*

*à l'unisson pour
la vaccination*

10 février 2023



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Annick Paeps



Inhoud valentijn-stick

- Biografie van de sprekers
- Vaccin co-administratie document
- Presentaties
- Vraag en antwoord slides (niet via ChatGPT!)
- Nuttige websites om te raadplegen
- WHO EURO info over communicatie
- Accreditering (vanaf 15u) en evaluatie
- Korte intro over polio



What could be the possible reasons one becomes vaccine hesitant?



There are several reasons why someone might be vaccine hesitant, including:



1. Misinformation and distrust of the medical establishment: Some people may have heard false information about vaccines and come to distrust the medical establishment that recommends them.
2. Personal beliefs and values: People may have religious or philosophical objections to vaccines.
3. Fear of side effects: People may be concerned that vaccines will cause harm or adverse reactions.
4. Lack of access or knowledge: People may not understand the importance of vaccines or may not have access to them.
5. Previous bad experience: People may have had a previous bad experience with a vaccine, such as a severe side effect.
6. Skepticism of pharmaceutical companies: People may distrust pharmaceutical companies and the motivations behind the development and distribution of vaccines.
7. General skepticism of science: People may be skeptical of the scientific consensus on vaccines, or of science in general.

Inhoud valentijn-stick

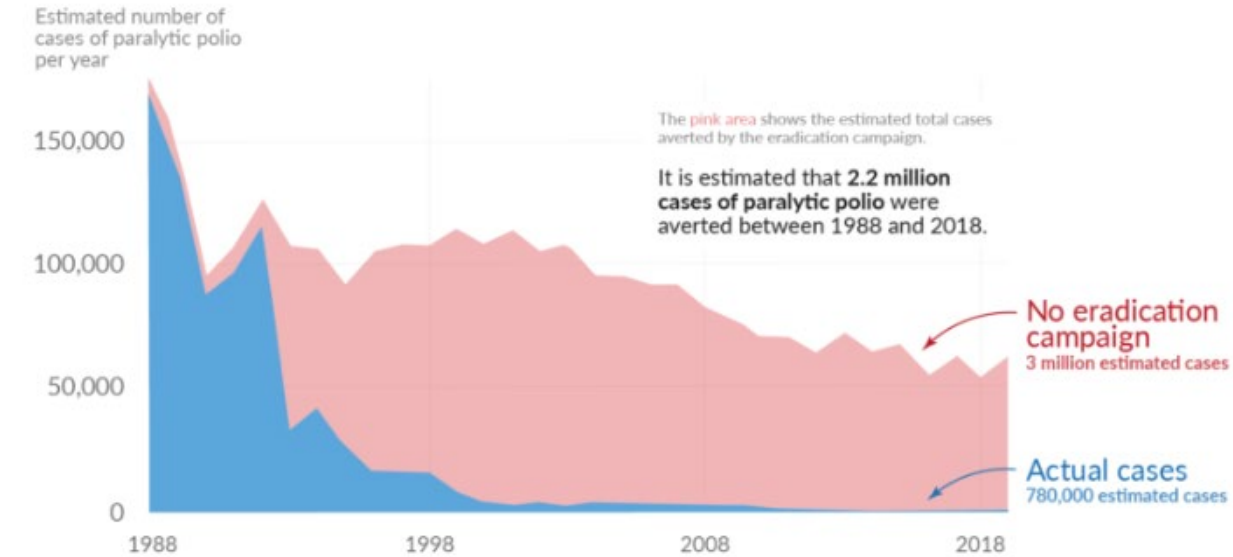
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Update polio 2023



How many cases of paralytic polio were averted by the Global Polio Eradication Initiative (GPEI)?

With the GPEI, 105 countries received support for surveillance, childhood immunizations and campaigns to control new outbreaks.



Note: The researchers estimated the number of polio cases that would have occurred if polio vaccination followed the same coverage rates as other routine vaccinations.

Source: Kimberly M Thompson and Dominika A Galkowska (2021). An updated economic analysis of the Global Polio Eradication Initiative (GPEI). Risk Analysis.

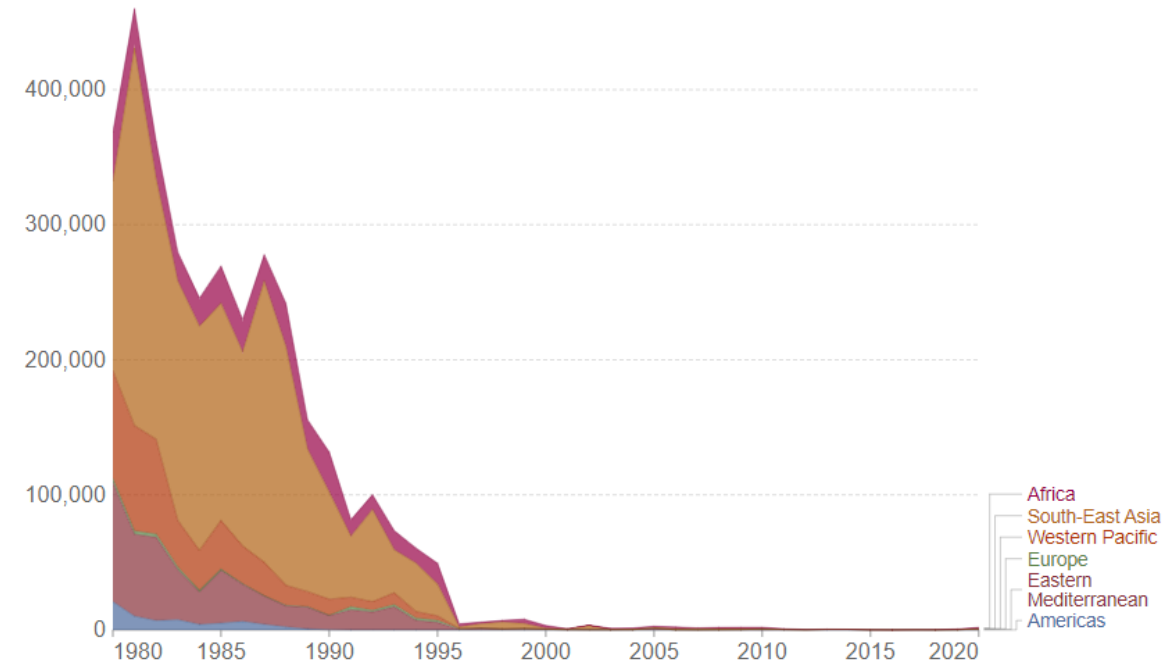
OurWorldinData.org – Research and data to make progress against the world's largest problems.

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Our World
in Data

Cases of paralytic polio by world region, 1980 to 2020

Estimates of the total number of paralytic polio cases, due to wild polioviruses and vaccine-derived polioviruses.



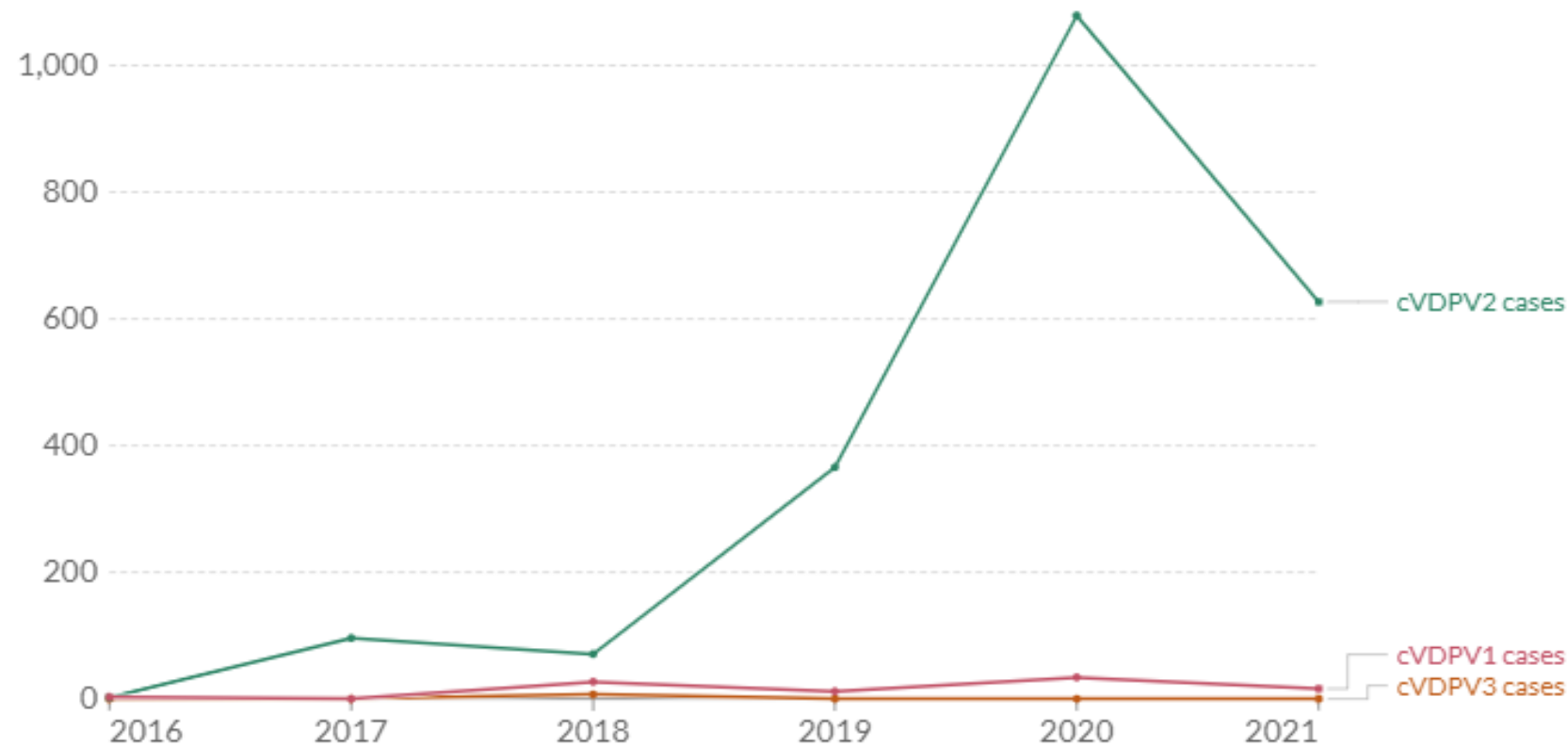
Source: Our World in Data based on World Health Organization and adapted from Tebbens et al. (2010)

OurWorldinData.org/polio/ • CC BY

[number-of-estimated-paralytic-polio-cases-by-world-region.htm](https://ourworldindata.org/polio/)

Reported cases of paralytic polio from vaccine-derived viruses, World

Some cases of paralytic polio arise from vaccine-derived strains that have reverted into a form that can cause disease. There are three vaccine-derived strains of paralytic polio: cVDPV1, 2, and 3.

Our World
in Data[↗ Change country](#)

Source: World Health Organization

OurWorldInData.org/polio • CC BY

▶ 2016 2021

Wild Poliovirus in 2022 (2021)*

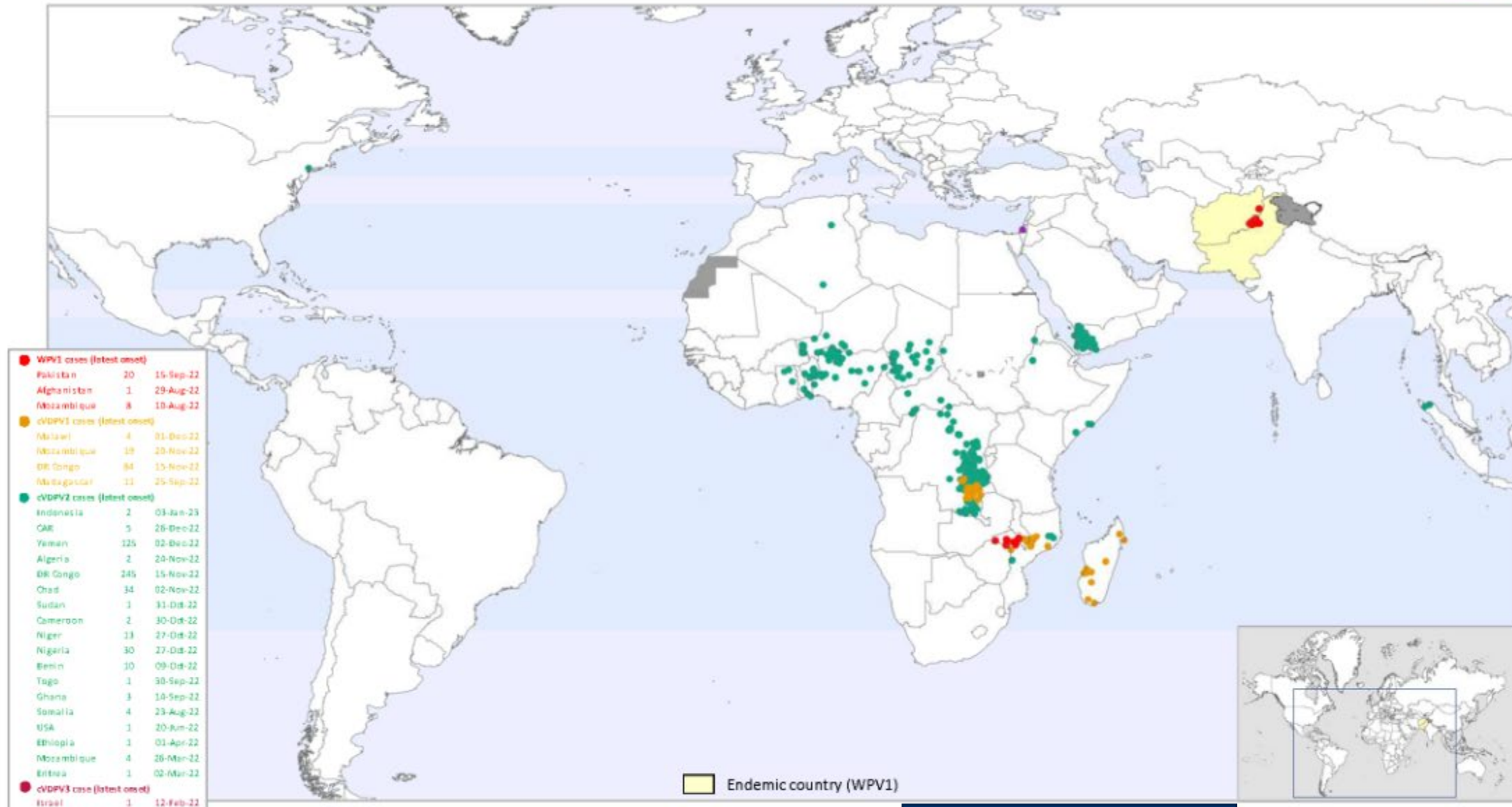
Global Total: 30 (6)

Circulating Vaccine Derived Poliovirus in 2022 (2021)*

Global Total: 656 (698)

*Data as of 24 January 2023. Numbers in brackets represent data for full year 2021.

Global WPV1 & cVDPV Cases¹, Previous 12 Months²



¹Excludes viruses detected from environmental surveillance; ²Onset of paralysis: 01 Feb. 2022 to 31 Jan. 2023

Cases in Malawi and Mozambique are not indigenous!

Data in WHO HQ as of 31 Jan. 2023

WPV1 en cVDPV

WPV1

- Geen bevestigde WPV1 in Pakistan sinds 15/09/2022 en in Afghanistan sinds 29/08/2022
- = “progress in polio endgame”
- Wel nog positieve stalen in beide landen (beperkte geografische spreiding)
- Importgevallen in Mozambique (4) en Malawi (1): lagere vaccinatiegraad!

cVDPV

- Aanpak van cVDPV2 via nieuwe OPV2 orale vaccin

A novel tool to eradicate an ancient scourge: the novel oral polio vaccine type 2 story



Ananda S Bandyopadhyay, Simona Zipursky

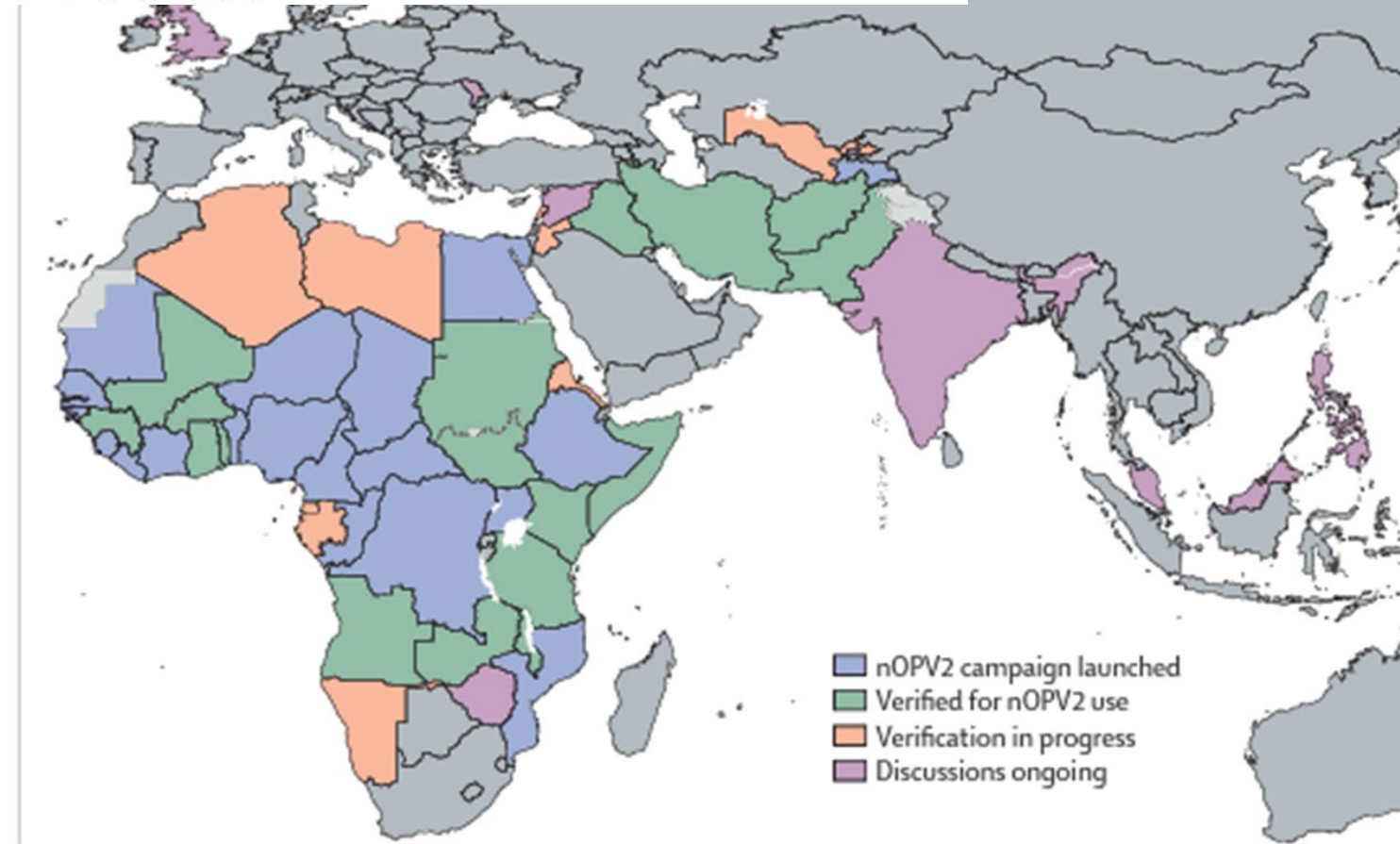


Figure: Scale of use and readiness for nOPV2 in polio outbreak response

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement. nOPV2= novel oral polio vaccine type 2.



WPV1 en cVDPV

WPV1

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CVDPV

- Aanpak van cVDPV2 via nieuwe OPV2 orale vaccin
- Aanpak van cVDPV2 in London, Jerusalem, New York en Montreal (lagere vaccinatiegraad!)

Vaccine-like type-2 poliovirus (PV2) in sewage in London, New York, Jerusalem, ...

- **PV2 found in sewage samples collected from the London Beckton sewage treatment works – Feb 2022**
 - Switch in UK in 2004 from OPV to IPV
 - IPV offers very good individual immunity , but vaccinees can still become infected and spread polio via stools, ...
 - Vaccine coverage in this area is < 95%, representing a substantial number of susceptibles – immunity gap!
 - 86.% in children turning 12 months (primary polio vaccination through hexav. vaccine)
 - 87.0% in children turning 24 months (")
 - 90.4% in children turning 5 years (")
 - Coverage below 85% in 8 out of 33 London Local Authorities
 - Coverage for pre-school booster in London was 71.4% in children turning 5 years
 - Catch up IPV campaign in under 5, and catch up in under 18
 - + suppl. IPV booster campaign for all children 1 to 9 in London

Vaccine-like type-2 poliovirus (PV2) in sewage in London, New York, Jerusalem, ...

■ VDPV2 polio case in New York, USA.

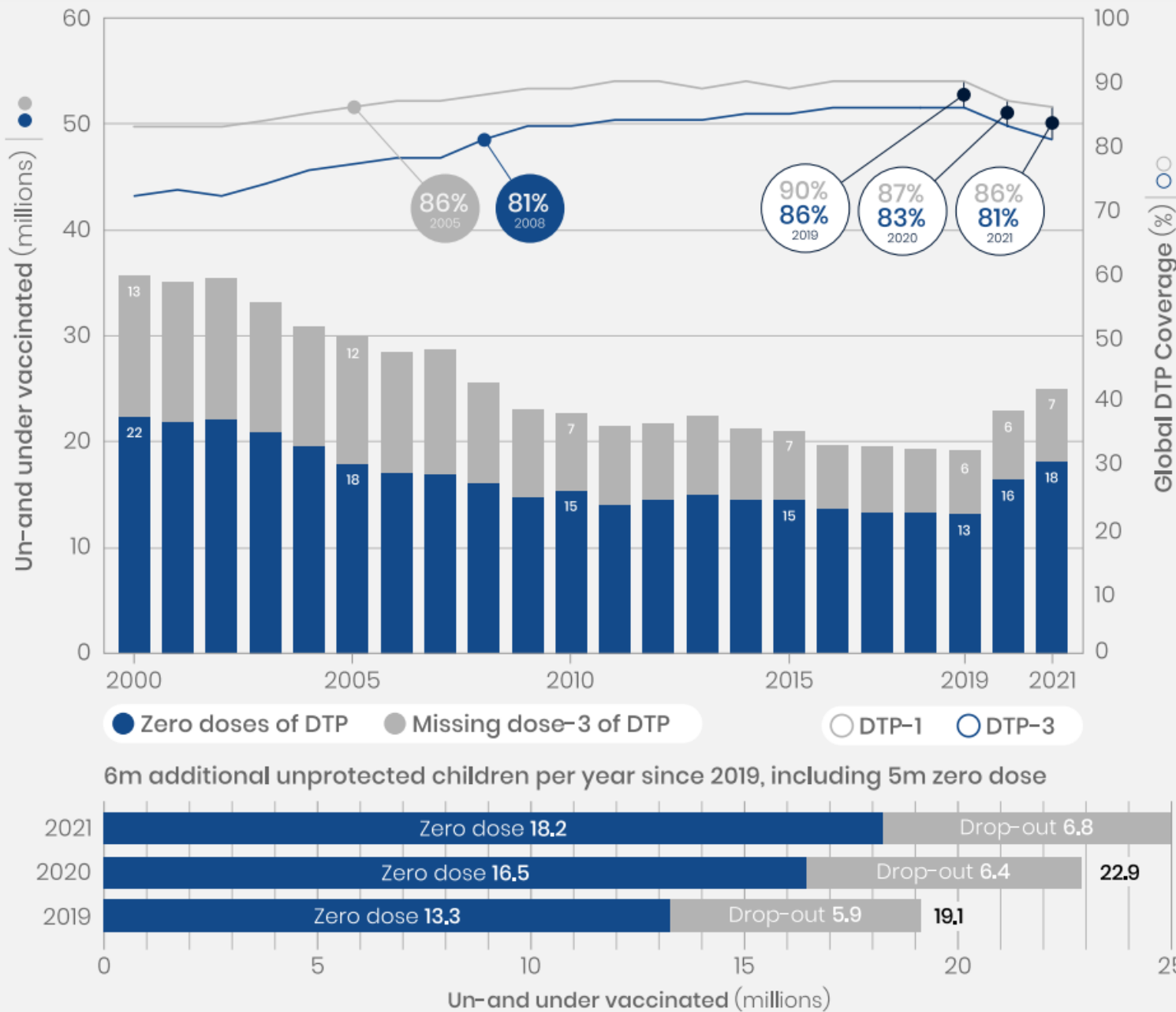
- Linked to the VDPV2 environmental sample in London and in Israel.
- “GPEI has been informed of a case of paralytic polio in an unvaccinated individual in Rockland County, New York, US”
- Confirmation by CDC that VDPV2 isolated from the case is genetically linked to two Sabin-like type 2 isolates,
 - collected from environmental samples in early June in both New York and greater Jerusalem, Israel.
 - And to the cVDPV2 from environmental samples in London, UK
- Out of the 144 public and private schools:
 - 96% of schools are 90%+ immunized
 - 3% of schools are 80-90% immunized
 - <1% of schools are 79% immunized
 - But, in some ZIP codes of New York city, 40% of kids are not vaccinated!

25 million children were un-or under-vaccinated in 2021, 2 million more than in 2020, and 6 million more than in 2019

Coverage of the third dose of diphtheria, tetanus, and pertussis vaccine (DTP-3) dropped a further 2% compared 2020, to 81% in 2021, leaving 25 million children vulnerable to vaccine-preventable diseases

The Immunization Agenda 2030 aims to make vaccination available to everyone, everywhere, by 2030. The Covid-19 pandemic, associated disruptions, and Covid-19 vaccination efforts have strained health systems in 2020 and 2021, resulting in 25 million children missing out on vaccination, 6 million more than in 2019 and the highest number since 2008. The number of children missing out on any vaccination - "zero-dose children" - increased by 5 million in 2021 compared with 2019, going from 13 to 18 million.

In this analysis, zero-dose children are those who lack any dose of DTP. Under-vaccinated are those who received one dose, but not a third protective dose.

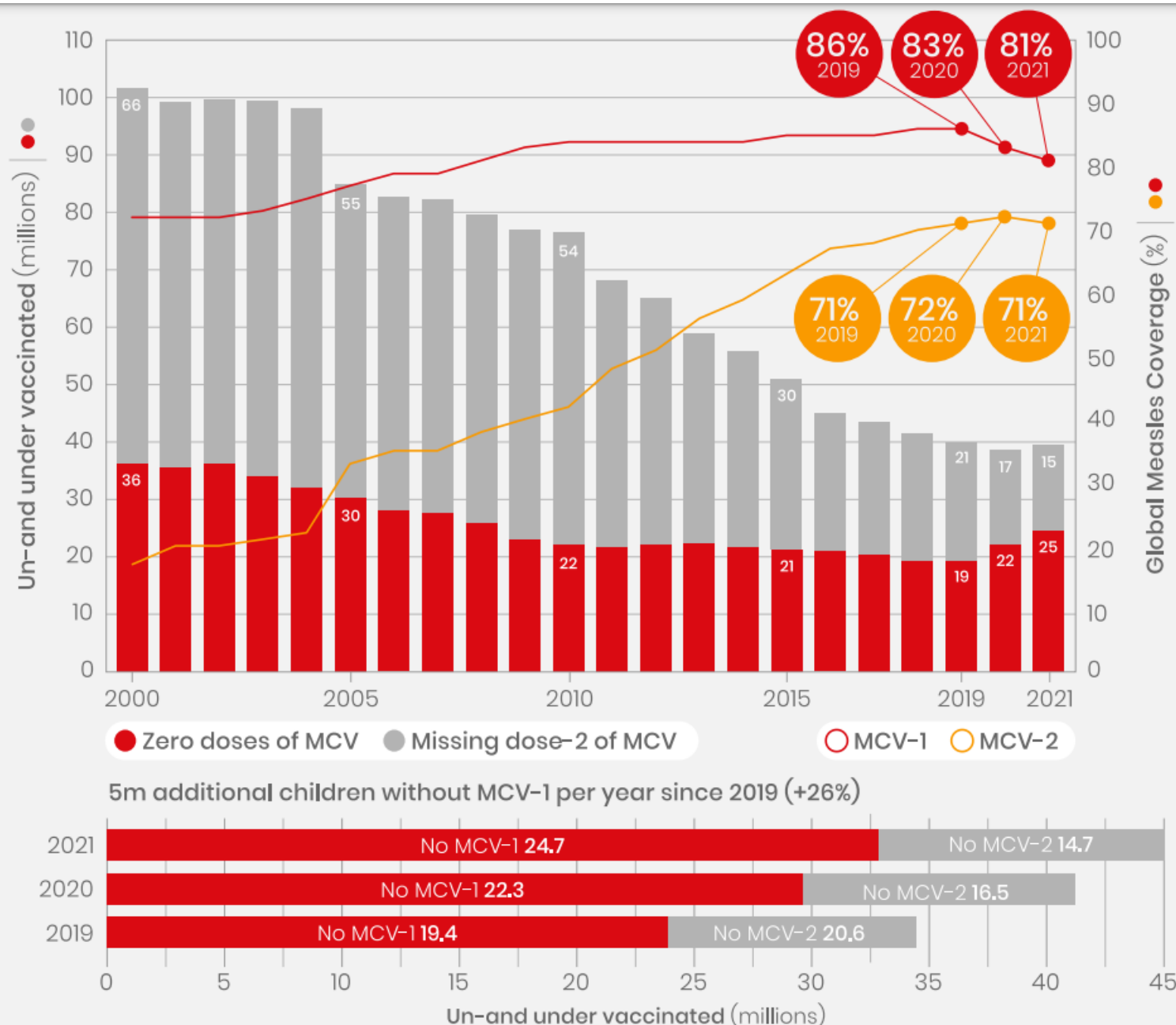


First dose measles coverage dropped to 81% in 2021, leaving 5 million more children unvaccinated compared to in 2019

Coverage of the first dose of measles-containing vaccine (MCV-1) dropped to 81% in 2021, the lowest level since 2008.

This leaves 25 million children vulnerable. An additional 15 million children received only a first dose, but not a needed second dose through regular public health services.

Supplemental Immunization Activities (including campaigns) continue to be required to ensure that all children receive the 2 doses that will protect them from measles.



mazelenvaccinatie

- De wereldwijde vaccinatiegraad tegen mazelen was gestegen van 72% in 2000 naar 86% in 2018
- Zo werden in die periode een 23 miljoen sterfgevallen voorkomen
- De COVID-19 epidemie heeft in heel wat landen gezorgd voor een terugval van de vaccinatiegraad, tot 83% wereldwijd
 - In 2021 misten 25 miljoen kinderen hun eerste mazelendosis, 14.7 miljoen hun tweede!
- Het toenemend aantal vatbaren en onvolledig gevaccineerden zorgt voor wereldwijde epidemieën
 - Voor de oorlog in Oekraïne was de vaccinatiegraad niet optimaal (82%, in 2020, ECDC, Technical report 8/3/2022)
 - Vluchtelingensituatie, verblijf in kampen, etc. verhogen de kans op onvolledige vaccinatie
 - In Indië werd één van de grootste mazelen-epidemieën gezien in 2022;
 - tussen 2019-2021 kregen slechts 56% van de kinderen < 3 jaar hun 2 mazelen vaccins;
 - 2.6 miljoen kinderen misten hun vaccinatie in 2020 door de COVID-pandemie



Ukraine: Immediate steps needed to prevent a measles outbreak due to the ongoing war and low vaccination rates, warns WHO

Français

Deutsch

27 April 2022 | Media release | Reading time: 3 min (757 words)

L'viv, 28 April 2022



News



Ukraine: People with chronic disease face measles



Nearly 40 million children are dangerously susceptible to growing measles threat

العربية

中文

Français

Русский

Español

23 November 2022 | Joint News Release | Reading time: 4 min (1147 words)

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NEWS | 22 December 2022 | Correction [27 December 2022](#)

Massive measles outbreak threatens India's goal to eliminate disease by 2023

Many children missed routine vaccinations during the COVID-19 pandemic and pockets of the country are still struggling to boost immunization rates.

24 achieved net improvements in coverage between 2019 and 2021.

24 countries achieved higher coverage in 2021 than in 2019.

9 in AFR, 2 in AMR, 4 in EMR, 7 in EUR and 2 in WPR

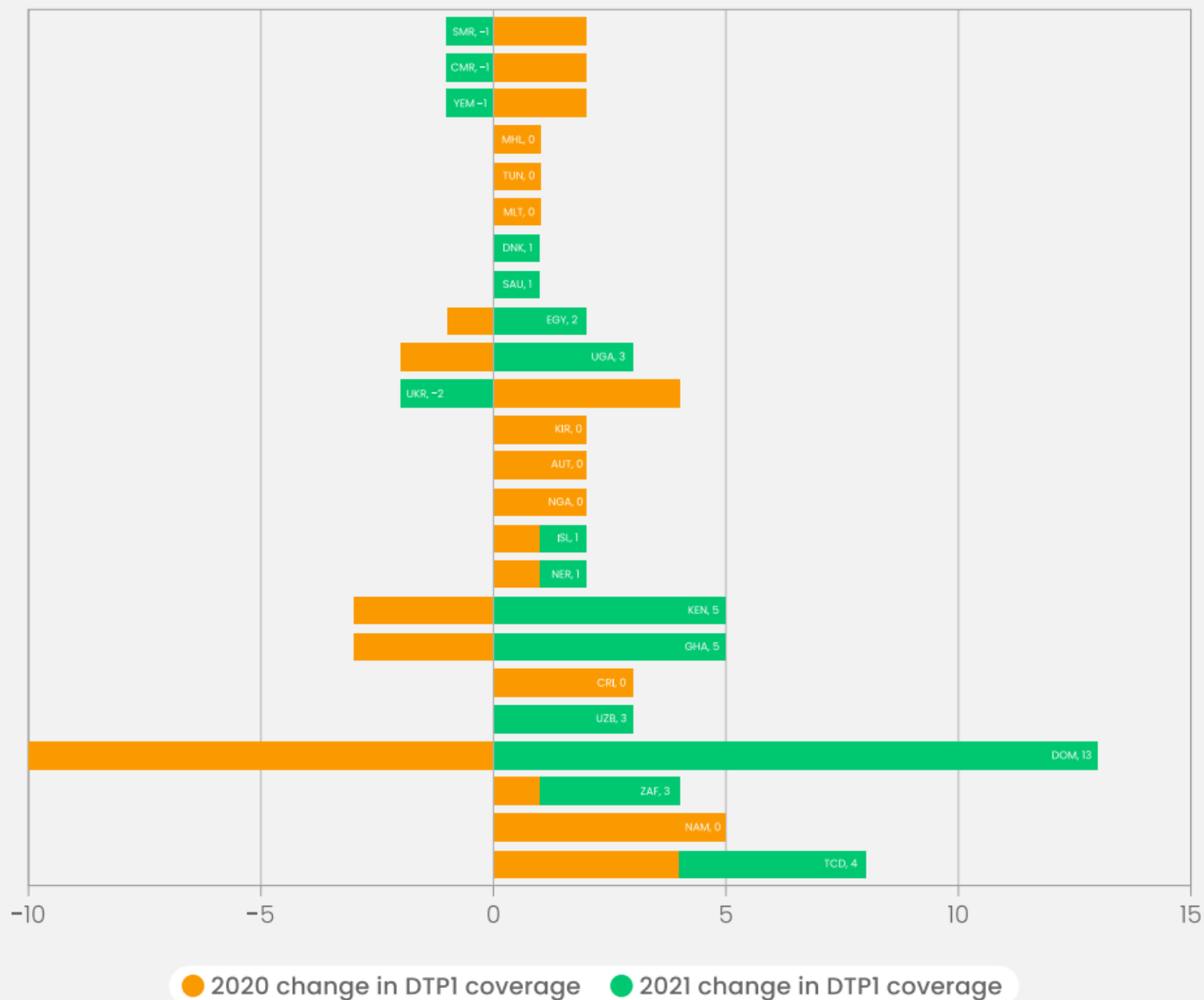


Photo of the Month



Polio workers in India deliver life-saving vaccines © WHO SEARO/S. Bergerson

Vaarwel en dank u!



Het **22e Valentijn Vaccinatiesymposium**
zal plaatsvinden **op 9 februari 2024**

Valvac@uantwerpen.be

Accreditering en aanwezigheidsattest kan u na het symposium aanvragen via een link op de website.

Evalueer het symposium: scan de QR code en vul in. <https://forms.uantwerpen.be/nl/cev/evaluatie-valentijn-vaccinatiesympos/>



DANK U – MERCKIEKES!

