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# Principles of Immunization

# **Objectives**

- Mention the types of acquired immunity
- List important immunizable diseases
- Describe the compulsory childhood vaccination schedule practiced in KSA
- Define the Cold Chain and its importance.





Done By: Manar Al-Eid Reviewed By:
Rozan Murshid

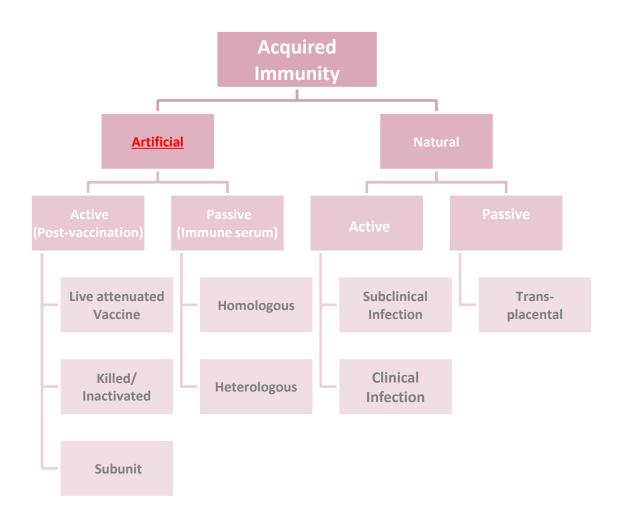


# **Immunization**

#### Importance:

- Immunization has helped reduce the impact of communicable disease on health and wellbeing
- Some diseases have been **well controlled** and other **eliminated** from some parts of the world because of vaccination
- Stopping vaccination may again lead to epidemic.

#### Acquired immunity:



 $<sup>\</sup>boldsymbol{*}$  in the active immunization: body will produce antibodies unlike the passive immunization

## **Important concepts**

#### -Vaccination

- Vaccination is a method of giving antigens to stimulate the immune response through active immunization
- A vaccine is an immuno-biological substance designed to produce specific protection against a given disease.
- A vaccine is "antigenic" but not "pathogenic".
- -Antigen: A live or inactivated substance (e.g., protein, polysaccharide) capable of producing an immune response
- -Antibody: Protein molecules (immunoglobulin) produced by B lymphocytes to help eliminate an antigen

## -Immunotherapy/ pre-formed Ab:

## 1-Immune serum globulin

(gamma-globulin) contains immunoglobulin extracted from the pooled blood of **human donors** (**Homologous**)

- Treatment of choice for preventing measles, hepatitis A and replacing Ab in the immune deficient
- Lasts 2-3 months (because it is a passive immunization, the body does not produce Abs, and so, they don't stay for a long time).

#### 2-Specific immune globulin

Prepared from convalescent patients in a hyperimmune state

- Contains high titer of specific Ab
- Pertussis, Tetanus, Chickenpox, Hepatitis B
- Sera produced in horses are available for Diphtheria, Botulism, Spider and Snake bites (Heterologous)

Act immediately and can protect patients for whom no other useful medication exists

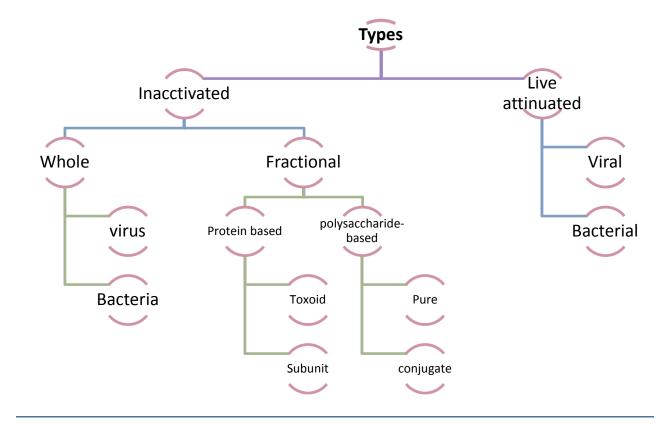
**Convalescent patient:** A person who is recovering after an illness

**Sera produced in horses**: because their tissues are similar to the human's. Here, they take a specific antigen and inject it to a horse, after that the horse's body will produce a specific Ab against that antigen. Then, that Ab will be injected to the humans. However, hypersensitivity reaction might occur!

**Homologous:** when the Abs are taken from a human

**Heterologous:** When the Abs are taken from another species such as animals.

# Types of vaccines



#### Live attenuated

- Attenuated (weakened) form of the "wild" virus or bacterium
- Must replicate to be effective
- Immune response similar to natural infection
- Usually effective with one dose(except those administered orally)
- Severe reactions are possible
- Interference from circulating antibodies are possible
- Fragile must be stored and handled carefully
  - \*except those administered orally

(In live attenuated we do sub-culturing for the organism to attenuate it and reduce its pathogenicity).

#### Inactivated (Killed)

- Cannot replicate
- Less interference from circulating antibody than live vaccines
- Generally require 3-5 doses
- Immune response mostly humoral
- Antibody titer diminishes with time

(We usually say inactivated virus and killed bacteria)

#### Examples

- 1- **viral**: measles,mumps,rubella (MMR), yellow fever, influenza\* oral polio.
- 2- **Bacterial**: BCG (for TB), oral typhoid

1- **viral**: Inactivated polio vaccine (IPV), Hepatitis A, Influenza\*, Rabies.

2- **Bacterial**: Pertussis, Typhoid, Cholera, Plague

3- **Subunit**: Hepatitis B

4- **Toxoid**: Tetanus,

Diphtheria

\*(Not the common influenza vaccine that we take annually),

\*(The common one)

## -Cellular fraction (Polysaccharide) vaccines:

- They are prepared from extracted cellular fractions e.g. N. meningitidis (A,C,Y,W-135); meningococcal vaccine from the polysaccharide antigen of the cell wall
- S. Pneumoniae; pneumococcal vaccine from the polysaccharide contained in the capsule of the organism
- Their efficacy and safety appear to be high.

**N. meningitidis** (A,C,Y,W-135): A combination of several types and it covers many species of N.meningitidis, commonly used during Al-hajj.

#### -Conjugate vaccine:

Haemophilus influenza B (Hib) vaccine; gives long-term protection from Haemophilus influenza type B the leading cause of meningitis in children under 5 years.

#### -Surface antigen (recombinant) vaccines:

- It is prepared by cloning HBsAg gene in yeast cells where it is expressed.
   HBsAg produced is then used for vaccine preparations
- Their efficacy and safety also appear to be high.

#### -Toxoid vaccines:

- Prepared by detoxifying the exotoxins of some bacteria rendering them antigenic but not pathogenic.
- Adjuvant (e.g. alum precipitation) is used to increase the potency of vaccine.
- The antibodies produced in the body neutralize the toxic part produced during infection rather than act upon the organism itself.
- In general toxoids are highly efficacious and safe immunizing agents.

Childhood Immunization Schedule in KSA		
Age:	Vaccines:	
At birth	BCG / Hepatitis B	
2 Months	IPV /DTaP / Hepatitis B/ Hib/Pneumococcal Conjugate (PCV)/Rota	
4 Months	IPV /DTaP / Hepatitis B/ Hib/Pneumococcal Conjugate (PCV)/Rota	
6 Months	OPV/IPV /DTaP/ Hepatitis B/ Hib/Pneumococcal Conjugate (PCV)	
9 Months	Measles / Meningococcal Conjugate quadrivalent (MCV4)	
12 Months	OPV/ MMR/ Pneumococcal Conjugate (PCV)/Meningococcal Conjugate quadrivalent (MCV4)	
18 Months	OPV/DTaP/Hib/ MMR/ Varicella/ Hepatitis A	
24 Months	Hepatitis A	
First class Primary School age	OPV/ DTaP(Td) / MMR/Varicella	

# Factors influencing recommendations concerning the age of vaccination:

- Age-specific risks of diseases
- Age-specific risks of complications
- Ability of persons of a given age to respond to the vaccine(s)
- Potential interference with the immune response by passively transferred maternal antibody (e.g., measles vaccine)

## Doses & Routes of administration

Vaccine	Dose	Route
BCG	0.05 ml	ID or SC (left arm)
DPT	0.5 ml	IM (right or left side of thigh)
Hepatitis B (HBV)	0.5 ml	IM
Haemophilus Influenza b (Hib)	0.5 ml	M
MMR	0.5 ml	SC
OPV	2 drops	Oral

It is important to know that all of them have the same dose expect for:

-BCG (which is given by insulin syringe)

-And OPV



#### Active immunization for adult females:

- MMR vaccine is given in adolescence before or after marriage, but not during pregnancy and has to be before 3 months of conception
- **Tetanus toxoid** in pregnancy to prevent tetanus neonatorum in the newborn. In the first pregnancy on the third month and after 1 month. The third dose in the second pregnancy, and the fourth on the third pregnancy with a maximum of 5 doses.
- If 10 years elapse, and then pregnancy occurs, the doses are given from the start

Live attenuated vaccines should not be given during pregnancy

## Vaccination for special occupations

- Health care workers: hepatitis B, influenza, MMR, polio
- **Public safety personnel** (police, fire fighters) and staff of institutions for the developmentally disabled: hepatitis B, influenza
- Vetenerarians(Animals' doctor) and animal handlers: rabies, plague and anthrax
- Sewage workers: DT, hepatitis A, polio, TAB (Typhoid vaccine)
- Food handlers: TAB
- **Military troops and camp dwellers**: pneumococcal, meningococcal, influenza, BCG (for non-reactors), tetanus.

## Invalid Contraindications to Vaccination (not contraindications)

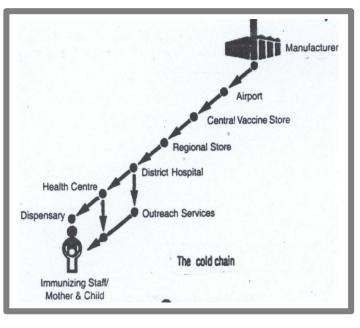
- Mild illness
- Mild/moderate local reaction or fever following prior dose
- Antibiotic therapy
- Disease exposure or convalescence
- Pregnancy in the household

- Premature birth
- · Breast feeding
- Allergies to products not in vaccine
- Family history not related to immuno-suppression

Vaccine potency: All vaccines are thermo-sensitive and need to be properly stored and distributed within an efficient cold chain system

## The cold chain system

- Refers to the system (personnel, equipment & procedure) used for keeping and distributing vaccines in good condition.
- When implemented properly, can help overcome the challenge of the delivery of quality vaccines.
- Can enhance the on-going quality, safety and efficacy of an immunization program.



#### Sensitivity to heat

Most sensitive

- -Live oral polio vaccine (OPV)
- -BCG (Lyophilized) \*
- -Measles (Lyophilized) \*
- -Rubella and Mumps (Lyophilized)
- -Adsorbed Diphtheria-Pertussis-Tetanus vaccine (DPT)
- -Adsorbed Diphtheria-Tetanus vaccine (DT, Td)
- -Tetanus Toxoid (TT)
- -Hepatitis A
- -Hepatitis B

\*Note: These vaccines become much more heat sensitive after they have been reconstituted with diluents.

Live attenuated vaccines are always in deep freezing

Least sensitive

# **MCQS**

Q1: One of the following is true about inactivated vaccines:

- A-Usually effective with one dose
- **B-They cannot replicate**
- C- Severe reactions are possible

Answer is B

Community medicine team leader:

Rozan Murshid



If you find any Mistakes please contact me:

Roza1066@gmail.com