Strengthening Immunisation Programmes

Cyprus Experience

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Ministry of Health

- Cyprus became independent on1960.
- On 1974, Turkish troops invaded in the island disturbing the willing for peaceful living. Since then, Turkey illegally occupies 37% of the island, taking under no concern the rights of Cypriot citizens. Thousands of Cypriots became refugees in their own country and many people are still missing.

- Nowadays Cyprus has a population of about 800 000 people.
- Various nationalities exist on the island. Most people (80% of the total population) are Greek - Cypriot, but there are also Turkish - Cypriot, Armenians, Maronites, Latins etc
- The main language used is Greek and most Cypriots are Christian - Orthodox.
- The Republic of Cyprus became member of the EU in 2004

And this period has the honour to be the presidency.

- ‘Vaccinations save more than 3 milion people worldwide each year, and more from diseases and permanent disciplines’ W.H.O

Message 1

Vaccines are powerful tools for protecting our health

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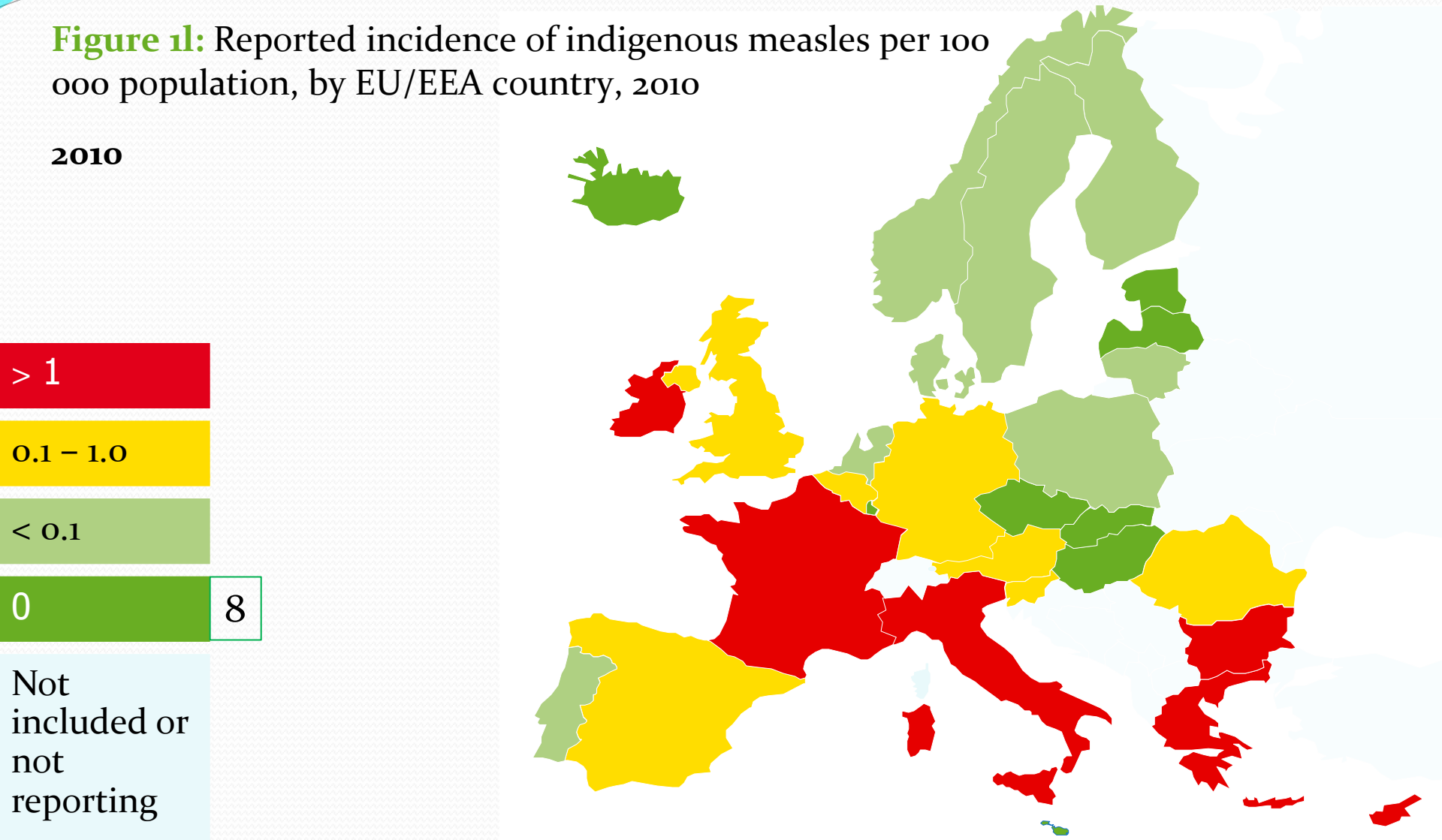
- Immunisations have lead to the control and elimination of diseases in Europe that in the past caused death and disability for millions of people:
- Prime examples for this are the global eradication of smallpox and the elimination of poliomyelitis from most regions of the world.
- Diphtheria and tetanus are now under control in Europe and *Haemophilus influenzae* type b (Hib) infections in young children have been dramatically reduced.
- The number of new hepatitis B infections has fallen significantly in Europe following the introduction of universal vaccination of children against the hepatitis B virus.
- Pneumococcal conjugate vaccine (PCV), which is given to young infants, also indirectly protects unimmunised elderly people from pneumococcal pneumonia by reducing the risk of getting exposed to an infected child.
- New vaccines licensed for use in the European Union include vaccines against human papilloma virus (HPV), herpes zoster virus, and rotavirus. A new 4-valent meningococcal vaccine improves protection against bacterial meningitis.
- A new nasal preparation of a trivalent attenuated live influenza vaccine will soon simplify vaccination logistics, and an intradermal inactivated trivalent influenza vaccine could reduce vaccination costs.

Message 2

Achieving and maintaining high vaccination coverage in Europe: the challenge remains

Measles incidence rates

Figure 1l: Reported incidence of indigenous measles per 100 000 population, by EU/EEA country, 2010



Message 3

Measles elimination continues …..

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Activities 2012

- Information to parents and pupils from medical officers and health visitors.
- Paediatricians and health visitors campaign for vaccination coverage.
- Health visitors campaign for children's vaccination coverage.
- Participation in radio-T.V. programmes informing about vaccination.

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Immunisation Schedule 2012

VACCINATION SCHEDULE 2012

MINISTRY OF HEALTH
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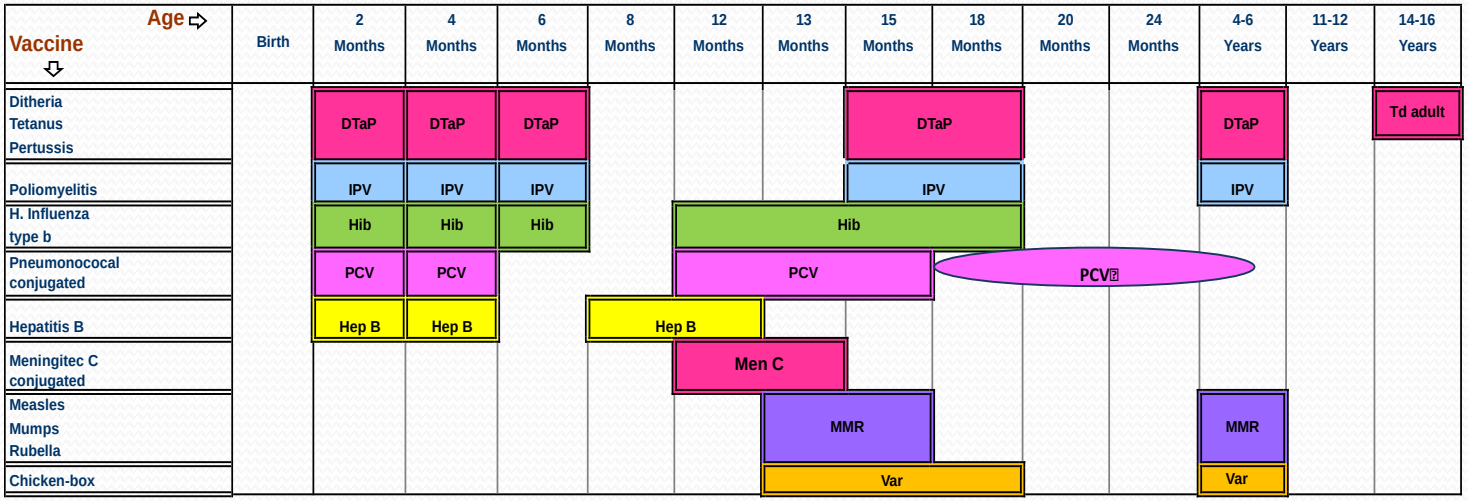
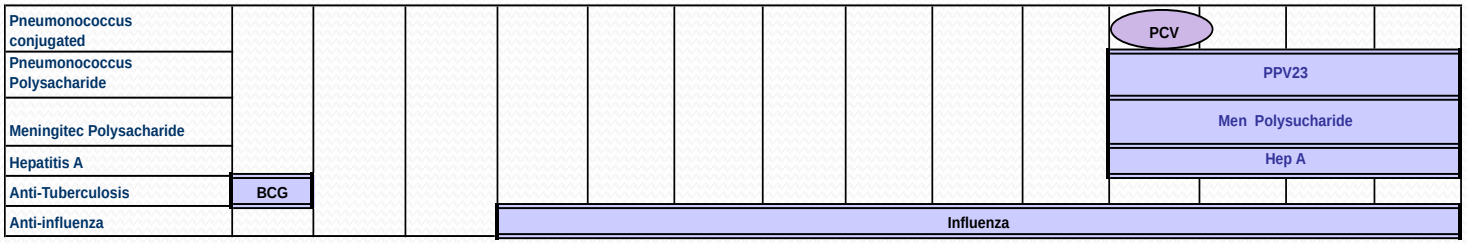


VACCINES THAT ARE GIVEN IN SPECIAL FINDINGS



Adult Vaccination

1. Td Adults - if vaccinations were not given before and as a booster dose every 10 years
2. Hep B Vaccine - given in high risk groups
3. Measles, Mumps, Rubella - given in adults with no vaccination before
4. Anti-Influenza - given in high risk groups, according to indications

Shape ▭ detects the age space for vaccination

Shape ⬭ detects the age on late vaccination or if vaccines were given earlier from proper time.

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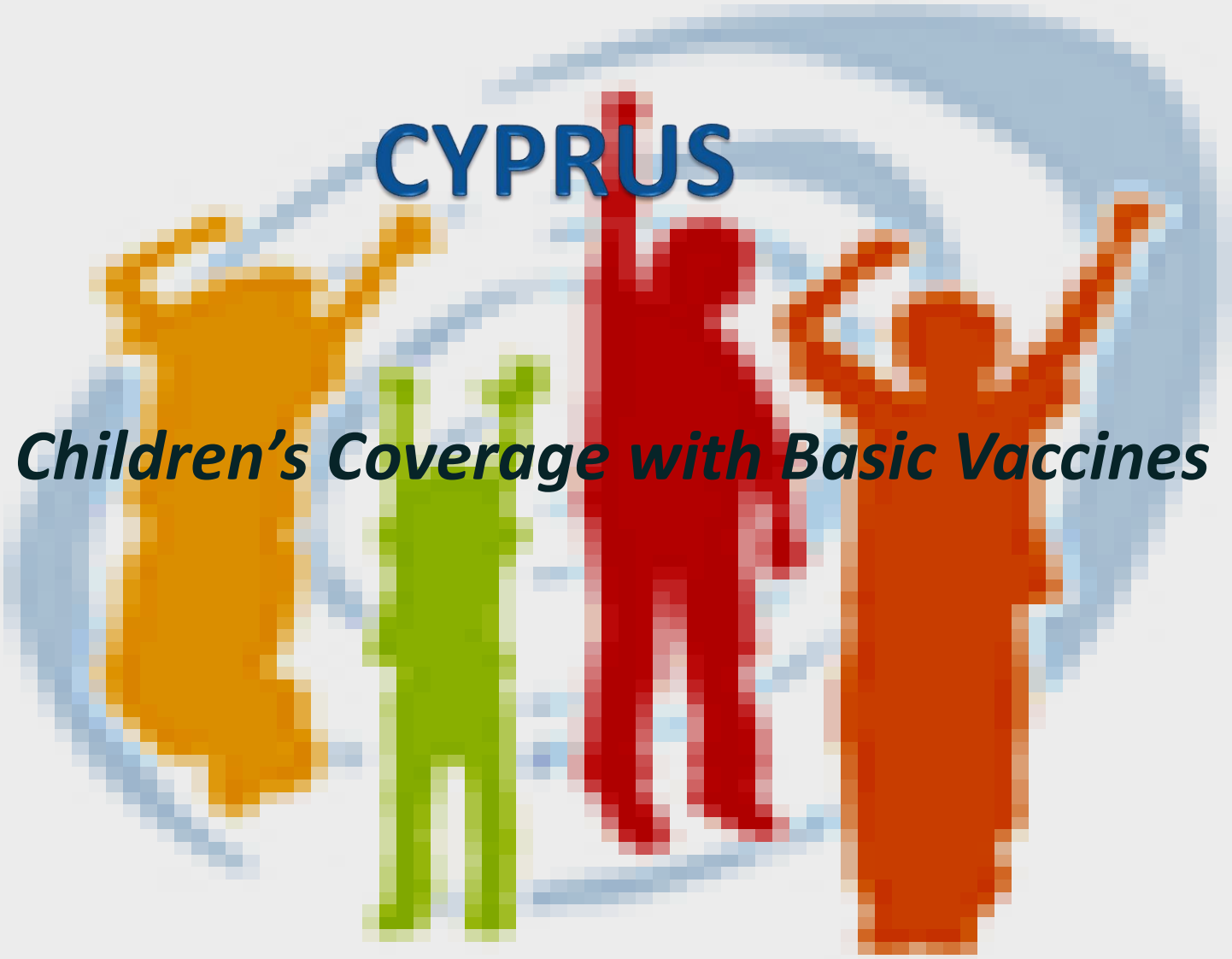


Children's Coverage with Basic Vaccines

Estimation of vaccine coverage in basic vaccination in17-24 months old children

Every 3 years in 17 -24 months old children living in Cyprus's free –not occupied-areas

Main Findings –Latest investigation(2009):

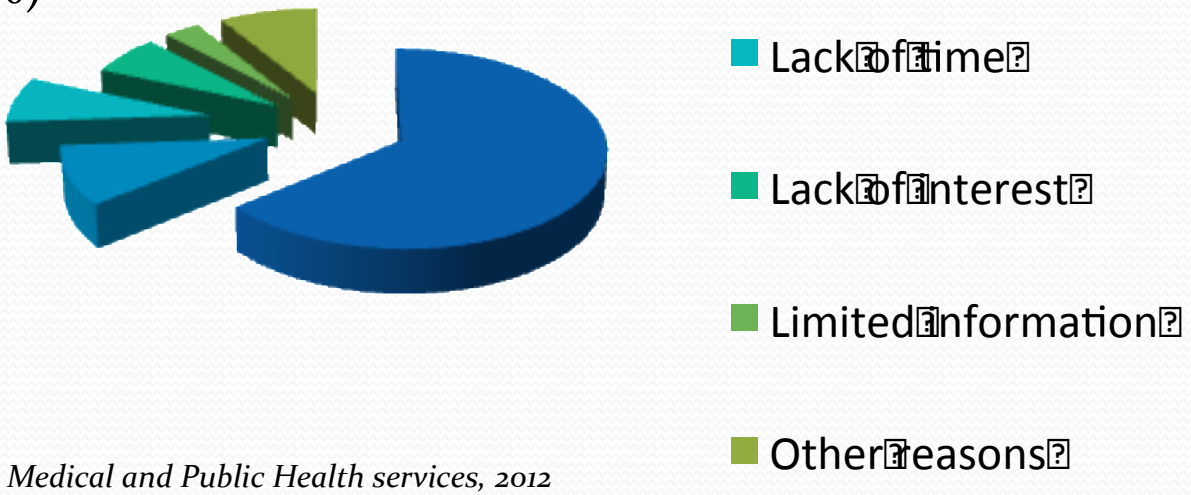
- **DTP 3** 98,6% coverage
- **HBV3** 96,4% coverage
- **Hib** (complete vaccination) 53,2% coverage

  (3 first doses) 91,7% coverage
- **Meningococcal C** 73% coverage
- **Pneumococcus** 37,5% coverage
- **Varicella** 36,3% coverage -given only from private sector
- **MMR** 87% coverage

Medical and Public Health Services, 2009
Surveilance and control disease Unit

Causes of postpone or not injection of necessary vaccines, survey 2009

- Child's sickness (64,1%)
- Lack of Vaccine (9,8%)
- Lack of time (7,6%)
- Lack of Interest (6,5%)
- Limited Information (3,3%)
- Other reasons (8,7%)



Medical and Public Health services, 2012
Surveillance and Infectious diseases Control

Vaccination Coverage in children age 18-29 months for years 2000, 1997, 1991 and in children 16-27 months for year 2003 and 17-24 months for years 2006, 2009, Comparative results (2009, 2006, 2003, 2000, 1997, 1994, 1991)

Year of investigation	PERCENTAGE COVERAGE (%)																		
	DTP1/ DTaP	**DTP2**	**DTP3**	**OPV1/ IPV**	**OPV2**	**OPV3**	**MMR**	**HBV1**	**HBV2**	**HBV3**	**Hib** Completely vaccinated	**Hib** Not Completely vaccinated	**Varicella**	**MenC** Complete vaccinate	**MenC** Not Complet vaccinate	MenC None	PCV7 None	PCV7 Not Complet vaccinate	**PCV 7** Compl vaccinated
2009 N419	100	100	98,6	99,8	99,8	98,6	86,9	99,5	99,5	96,4	53,2	44,9	36,3	73	5,5	21,5	20,5	42	37,5
2006 N=370	99,5	98,4	96,8	99,5	98,4	96,5	87	98,6	97,8	93,2	51,6	47	39,5	49,2	4,6	46,2	-	-	-
2003 N=320	100	99,4	97,8	100	99,4	97,5	86,3	97,8	95,3	88,4	65,3	32,5	38,4	-	-	-	-	-	-
2000 N=236	99,6	99,2	97,5	99,2	98,7	97,5	84,7	94,9	93,6	89	31,8	44,5	26,3	-	-	-	-	-	-
1997 N=218	99,5	99,1	97,7	99,5	99,1	97,7	89,9	90,8	90,8	88,1	-	-	-	-	-	-	-	-	-
1994 N=214	98,6	97,7	96,3	97,7	97,7	96,3	83,2	75,2	72,4	68,2	-	-	-	-	-	-	-	-	-
1991 N=212	99,5	99,1	97,6	99,1	98,1	95,8	83	28,1	26,9	20,3	-	-	-	-	-	-	-	-	-

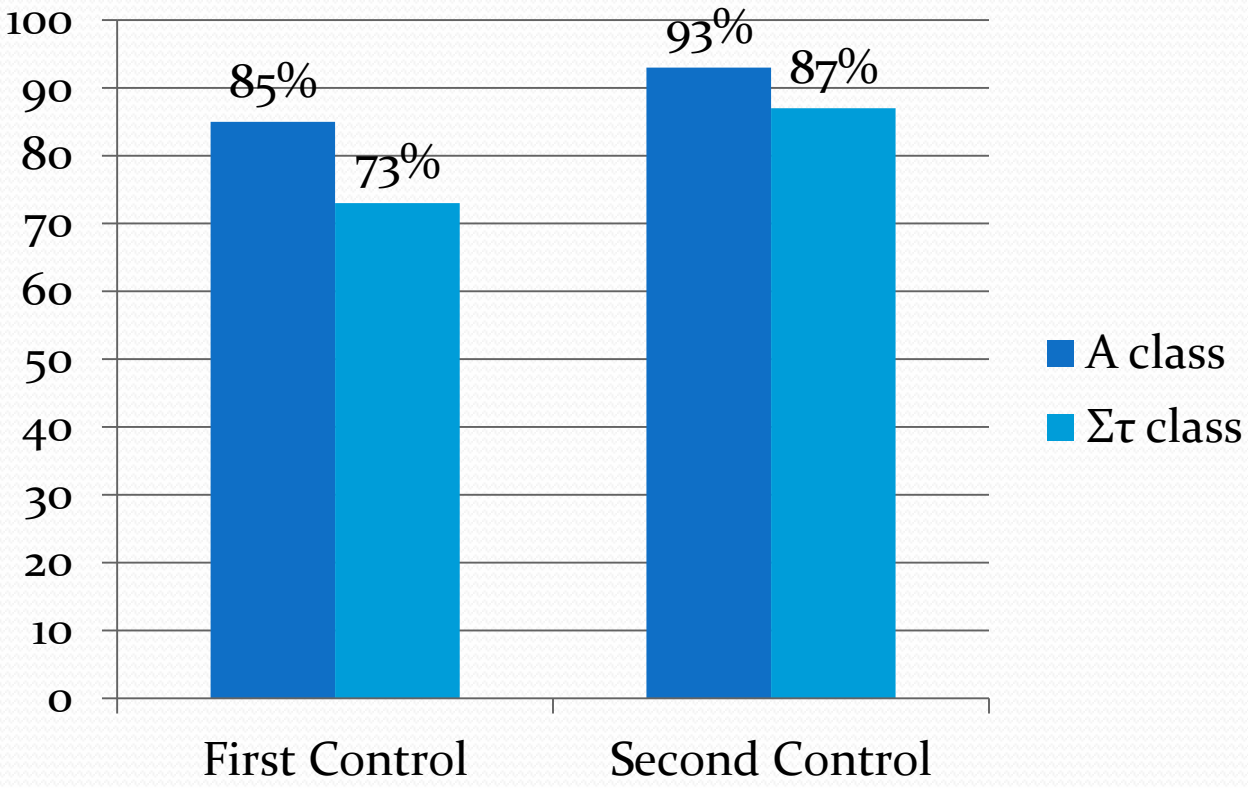
N: Number of children covered from the survey

INVESTIGATION-ACT OF SCHOLIATRIC SERVISES

COVERAGE WITH MMR VACCINE

RESPONSE PERCENTAGE

SCHOOL YEAR 2011-2012



Medical and Public Health Services, 2012

Surveillance and Infectious diseases Control Unit

INVESTIGATION-ACT OF SCHOLIATRIC SERVISES

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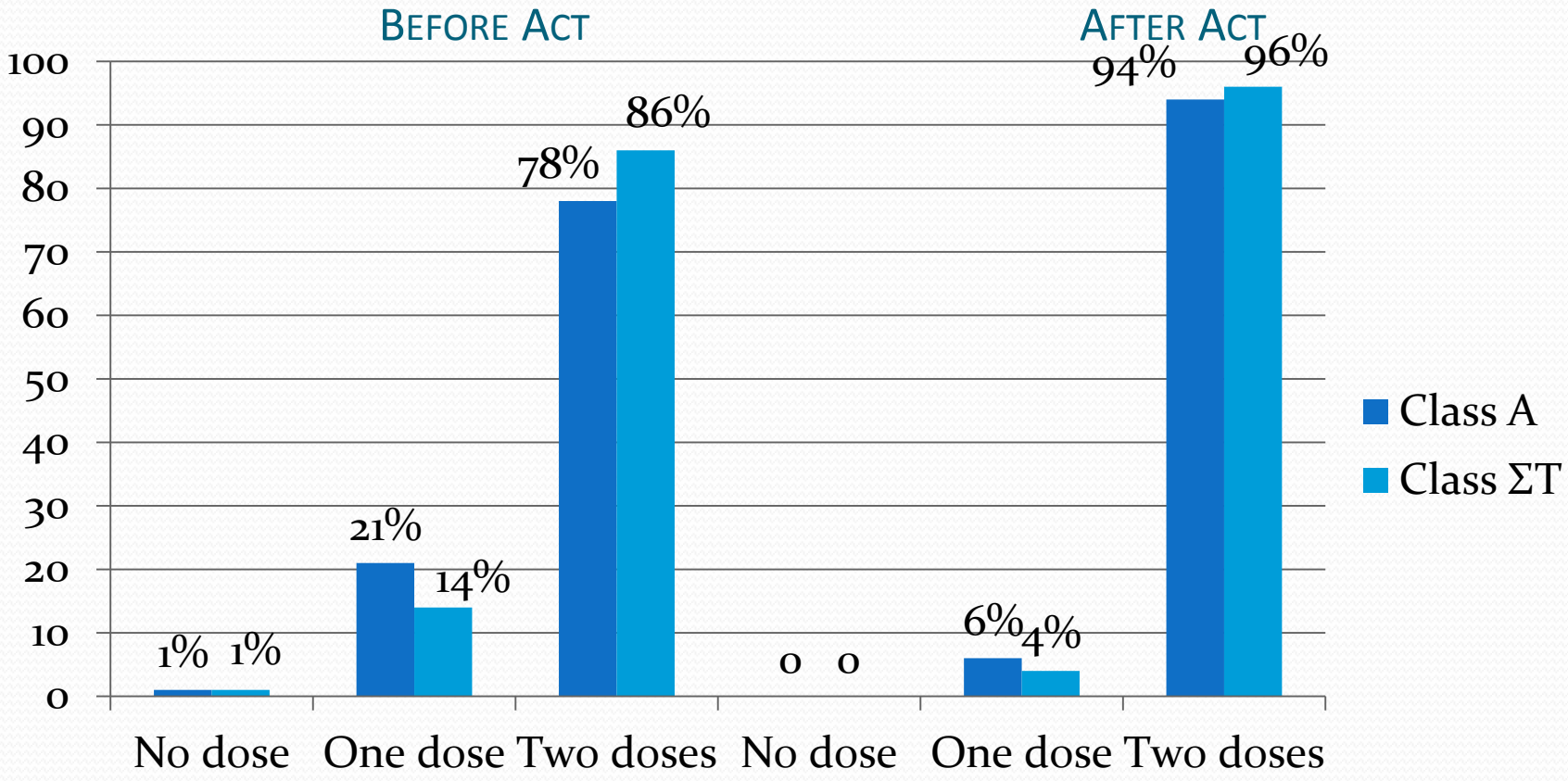

Medical and Public Health Services, 2012

Surveillance and Infectious diseases control Unit

Childhood Vaccinations Children's Health and Safety

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