



Proposal to the Steering Group on Promotion and Prevention in the field of vaccination

“Best practices in view of how EU Member States incite parents to make their children have the 2nd dose of the measles vaccine”

SANTE C.3

Brussels, 7 June 2019

Background for the proposal (1)

- ❑ **Reappearance of vaccine-preventable diseases** in several EU/EEA countries in recent years

- ❑ **Measles of particular concern**
 - virus highly contagious
 - possibly severe consequences

- ❑ **ECDC Risk Assessment** May 2019: 44 074 cases in EU/EEA countries 1 January 2016-31 March 2019

- ❑ **Strong need to improve vaccination coverage**, in particular among susceptible groups

European Centre for Disease Prevention and Control: Who is at risk for measles in the EU/EEA? Identifying susceptible groups to close immunity gaps towards measles elimination. Stockholm: ECDC, 2019.

Background for the proposal (2)

- ❑ **Declining vaccination coverage rates in EU/EEA countries**
 - limited access to convenient vaccination services
 - lack of confidence in vaccines

- ❑ **Coverage rates below levels required for herd immunity**

- ❑ **New outbreaks of vaccine-preventable diseases and risk of “exported” cases across borders**

The measles vaccine (1)

- Coverage rate required for herd immunity: 95 %
- Contained in the MMR (Measles, Mumps & Rubella) vaccine
- 2 doses necessary, separated in time

The measles vaccine (2)

ECDC Risk Assessment May 2019:

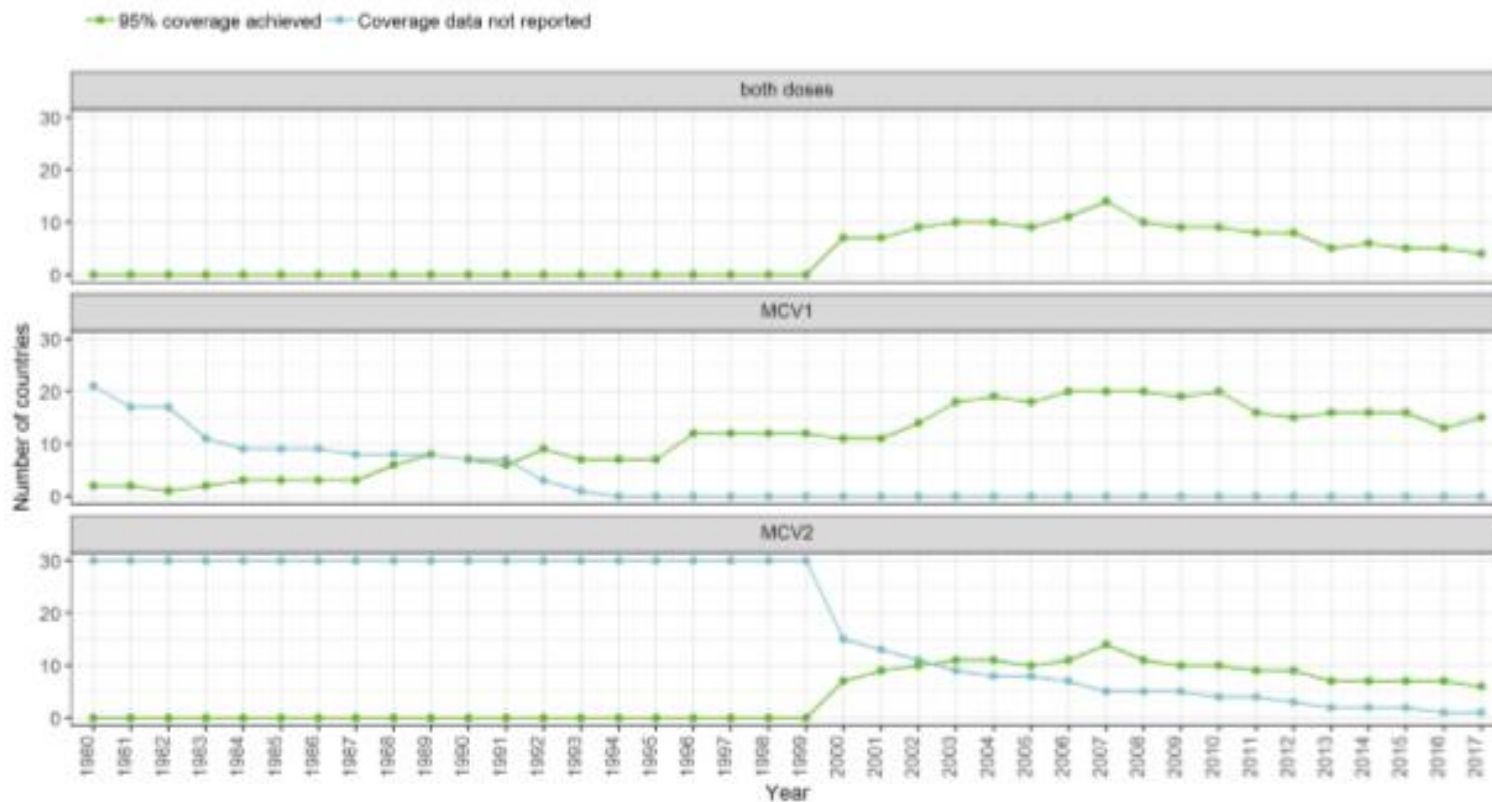
- **Only four EU/EEA countries achieved the target of 95% coverage for both of the 2 doses of measles vaccine in 2017.**
- **More countries achieved the target of 95% coverage for the 1st dose of measles vaccine than for the 2nd dose.**

European Centre for Disease Prevention and Control: Who is at risk for measles in the EU/EEA? Identifying susceptible groups to close immunity gaps towards measles elimination. Stockholm: ECDC, 2019.



European
Commission

Figure 3. Number of countries per year with missing vaccine coverage data (blue) or reporting 95% coverage for dose 1, dose 2 and both doses of MCV (green), EU/EEA countries, 1980 to 2017



MCV: measles-containing vaccine. Source: WHO/UNICEF estimates of national immunisation coverage.

Best practices examples (1)

- ❑ Reaching the target of **95% coverage for the 2nd dose of measles vaccine** seems to be a **particular challenge** for many EU/EEA countries.
- ❑ But **good/best practices for inciting parents to make their children have the 2nd dose of the measles vaccine exist.**

Best practices examples (2)

- ❑ **Germany: Advance of the 2nd dose of measles vaccine to 2 (instead of 6) years of age**
- ❑ **Denmark: Reminders are sent to parents** whose child has missed one or more childhood vaccines.
- ❑ **Latvia: Medical practitioners** are responsible for **checking patients' vaccination status** and for **notifying** them regarding vaccines.

https://ec.europa.eu/health/sites/health/files/vaccination/docs/2018_vaccine_services_en.pdf

Best practices examples (3)

- ❑ **Netherlands:** Parents receive **invitations** to make their child have childhood vaccines. A **reminder** is sent if parents do not make use of the invitation.
- ❑ **Portugal:** Parents receive **reminders** and **follow-up messages**.
- ❑ **Sweden:** **2nd dose** of measles vaccine is **given by School Health Care** (whereas the 1st dose is given by Child Health Care)

https://ec.europa.eu/health/sites/health/files/vaccination/docs/2018_vaccine_services_en.pdf



Would EU Member States be interested in taking up the topic of incentives for the 2nd dose of measles vaccine for best practice collection and possible country-to-country transfer?

Questions?