



SPANISH ASSOCIATION OF PAEDIATRICS

Immunisation schedule of the Spanish Association of Paediatrics: 2017 recommendations[☆]



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Vaccines;
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Abstract The Advisory Committee on Vaccines of the Spanish Association of Paediatrics (CAV-AEP) annually publishes the immunisation schedule which, in our opinion, is considered optimal for children resident in Spain, taking into account the evidence available on current vaccines. Pneumococcal and varicella immunisation in early childhood is already included in all funded vaccines present in the regional immunisation programmes. Furthermore, this committee establishes recommendations on vaccines not included in official calendars (non-funded immunisations), such as rotavirus, meningococcal B, and meningococcal ACWY.

As regards funded immunisations, 2 + 1 strategy (2, 4, 11–12 months) with hexavalent (DTaP-IPV-Hib-HB) and 13-valent pneumococcal vaccines is recommended.

Administration of the 6-year booster dose with DTaP is recommended, as well as a poliomyelitis dose for children who had received the 2 + 1 scheme, with the Tdap vaccine for adolescents and pregnant women between 27 and 32 weeks gestation. The two-dose scheme should be used for MMR (12 months and 2–4 years) and varicella (15 months and 2–4 years).

Coverage of human papillomavirus vaccination in girls aged 12 with a two-dose scheme (0, 6 months) should be improved. Information and recommendations for male adolescents about potential beneficial effects of the tetravalent HPV vaccine should also be provided.

ACWY meningococcal vaccine is the optimal choice in adolescents.

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¹ The members of the Advisory Committee on Vaccines of the Spanish Association of Paediatrics (CAV-AEP) are listed in [Appendix 1](#).

PALABRAS CLAVE

Vacunas;
 Calendario de
 vacunación;
 Enfermedades
 inmunoprevenibles;
 Niños

For recommended unfunded immunisations, the CAV-AEP recommends the administration of meningococcal B vaccine, due to the current availability in Spanish community pharmacies, with a 3 + 1 scheme. CAV-AEP requests the incorporation of this vaccine in the funded unified schedule. Vaccination against rotavirus is recommended in all infants.

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Calendario de vacunaciones de la Asociación Española de Pediatría (CAV-AEP): recomendaciones 2017

Resumen El Comité Asesor de Vacunas de la Asociación Española de Pediatría (CAV-AEP) publica anualmente el calendario de vacunaciones que estima idóneo para los niños residentes en España, teniendo en cuenta la evidencia disponible sobre vacunas. Se recogen las vacunas sistemáticas de los calendarios oficiales actuales, con las del neumococo y la varicela en la primera infancia, ya incluidas en todos ellos. Además, este comité realiza recomendaciones sobre vacunas no incluidas en los calendarios oficiales (no financiadas), como rotavirus, meningococo B y meningococo tetravalente.

En cuanto a las vacunas financiadas, se sigue recomendando emplear esquemas 2 + 1 (2, 4 y 11-12 meses) con las vacunas hexavalentes y con la antineumocócica conjugada 13-valente.

Se aconseja un refuerzo a los 6 años, preferentemente con DTPa, junto a una dosis de polio para aquellos que recibieron esquemas 2 + 1, así como vacunación con Tdpa en adolescentes y durante el embarazo entre las semanas 27 y 32.

Se emplearán esquemas de 2 dosis para triple vírica (12 meses y 2-4 años) y varicela (15 meses y 2-4 años).

Se deben incrementar las coberturas frente al papilomavirus en niñas de 12 años con 2 dosis (0-6 meses), así como informar a los varones de los beneficios potenciales de la vacunación y valorar la recomendación del preparado tetravalente.

En adolescentes, la opción óptima es la vacuna antimeningocócica tetravalente.

Respecto a las vacunas recomendadas no financiadas, dada su disponibilidad en las farmacias comunitarias, se recomienda la vacuna frente al meningococo B, con esquema 3 + 1, y se solicita su entrada en el calendario. Es recomendable vacunar a todos los lactantes frente al rotavirus.

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Introduction

The Advisory Committee on Vaccines of the Spanish Association of Paediatrics (CAV-AEP) annually updates its immunisation schedule taking into account the current evidence with the purpose of issuing the recommendations for immunisation considered most appropriate for children residing in Spain.

This year, as can be seen in Fig. 1, the main changes introduced by this Committee in the recommendations of the previous year are maintained, and only minor updates have been made. We recommend reading the expanded review of these recommendations at www.vacunasaep.org. On the other hand, the recommendations for special situations and risk groups have been excluded from this document, and can be consulted at the web page referred above.

The AEP rejoices in the decision of the Ministry of Health to include vaccination against varicella and pneumococcus in the immunisation schedules of the autonomous communities (ACs),¹ as it will prevent a large number of cases of these diseases and their complications. It is also important

that the varicella and meningococcal B vaccines, as well as the two commercially distributed rotavirus vaccines, be available in community pharmacies.

Due to the short supply of the pertussis vaccine, and for the purpose of optimising the immunisation schedule, adapting it to current epidemiological conditions, increasing its efficacy and converging towards the homogenisation of vaccination schedules in Europe, the CAV-AEP has decided to maintain the 2 + 1 schedule with hexavalent vaccines.

Ideally, scientific societies would be taken into account in the decision-making process, and the autonomous communities (ACs) and the Ministry of Health would make a greater collective effort to fund a more comprehensive routine immunisation schedule. Alternative systems should be set up to assist families in paying for vaccines that are not funded by the state, as is done for commonly used medications.

In order to prevent the re-emergence of vaccine-preventable diseases, we need to continue vaccinating all children, striving to maintain high coverage rates and to persuade parents that refuse vaccination.

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