The Expanded Program On Immunization (EPI)

Immunization

Immunization is the a process where by a person is made immune or resistant to an infection, typically by administration of vaccines

Immunization is a proven tool for controlling and elimination life-threatening infectious . disease

The Expanded Program Of Immunization (EPI)

The Expanded Programme on Immunization (EPI) was established in 1974 through a World Health Assembly resolution to <u>build on the</u> success of the global smallpox eradication programme, and to <u>ensure that</u> all children in all countries benefited from life-saving vaccines

Objectives

- The expanded immunization program, the who's initiative to improve immunization coverage, focuses on the following four items:<u>4</u>
- Standardizing immunization <u>schedules</u>
- Promoting <u>safe injection</u> technologies
- Improving the stocking and availability of vaccines
- <u>Protecting vaccines</u>' potency through cold chain management

The objectives of EPI:

To increase coverage of immunization for eligible children.

1.

 To reduce the incidence of immunizable diseases among children below five years of age.

Eradication of polio to maintain polio free status.



Elimination of measles.



Reduce Incidence of

hepatitis B

among under five.



Elimination of Neonatal Tetanus.





Maintain zero level of diphtheria.



Prevention of severe forms of TB (TB meningitis & military TB).

12 year old girl with TB meningitis



reduce the incidence of whooping cough





Reduce the incidence of Bacteria Meningitis due to haemophelus influenza

3. Promoting safe injection techniques
 4. Improve the stocking and availability of vaccines
 5.Protecting vaccine potency through cold chain management
 6.To prepare for introduction of new vaccines



The immune system

Immunity: Ability of an organism to recognize and defend itself against *specific* pathogens or .antigens

Immune Response: Involves production of antibodies and generation of specialized .lymphocytes against specific antigens

Antigen: Molecules from a pathogen or foreign organism that provoke a specific immune .response -: Types of Immunity

Innate or natural Immunity:
 Immunity an organism is born with

Acquired Immunity:

.Immunity that an organism *develops* during lifetime

.May be acquired naturally or artificially



Types of Acquired Immunity I. Naturally Acquired Immunity: Obtained in the .course of daily life -:Two types

A. Naturally Acquired Active Immunity *Antigens* or pathogens enter body naturally
Body generates an immune response to antigens

Types of Acquired Immunity

:B. Naturally Acquired Passive Immunity *Antibodies* pass from mother to fetus via placenta or . breast feeding .No immune response to antigens

.Immunity is usually short-lived (weeks to months)

.Protection until child's immune system develops

Types of Acquired Immunity (Continued)

II. Artificially Acquired Immunity: Obtained by .receiving a vaccine or antibodies

:Artificially Acquired Active Immunity .1

.Antigens are introduced in vaccines (immunization)

.Body generates an immune response to antigens

Types of Acquired Immunity (Continued)

:Artificially Acquired Passive Immunity .2

.Antibodies are introduced into body by injection .Snake antivenom injection from horses or rabbits

.Immunity is short lived (half life three weeks) .Host immune system does not respond to antigens





?What is a Vaccine

 A vaccine is a non-pathogenic antigen that mimics a particular pathogen in order to elicit an immune response as if that actual pathogen were in the body.

- 1. Live, Attenuated Vaccines
 - -Viral such as measles, mumps, rubella, oral polio and rota virus
 -Bacterial such as BCG

2. Inactivated Vaccines

2. Inactivated Vaccines A. Whole cell vaccine -Viral -Bacterial **B.** Fractional **1-Protein based** Toxoid Subunit 2-Polysaccharide based Pure conjugate

2. Inactivated Vaccines
A. Whole cell vaccine
-Viral such as Hepatitis A, polio and rabies
-Bacterial such as Pertussis

2. Inactivated Vaccines A. Whole cell vaccine -Viral -Bacterial **B.** Fractional **1-Protein based** Toxoid such as diphtheria, tetanus Subunit such as hepatitis B **2-Polysaccharide based** Pure such as pneumococcal and meningococcal vaccines conjugate such as Haemophilus influenzae type B vaccine.

	Attenuated vaccine	Inactivated Vaccines
Vaccine dose	Low	High
Antibody persistence	Long	Short
Booster needed	Infrequently	Frequently

1. Live, Attenuated Vaccines

Live, attenuated vaccines contain a version of the living microbe that has been weakened in the lab so it can't .cause disease

They elicit strong immune system response and often confer .lifelong immunity with only one or two doses

Live, Attenuated Vaccines

- live, attenuated vaccines usually need to be refrigerated to stay potent.
- Live, attenuated vaccines are relatively easy to create for certain viruses. Viruses are simple microbes containing a small number of genes,
- Live, attenuated vaccines are more difficult to create for bacteria.
 Bacteria have thousands of genes and thus are much harder to
- people who have damaged or weakened immune systems, such as people who undergone chemotherapy or have HIV, can not be

Inactivated Vaccines

Scientists produce inactivated vaccines by killing the disease-causing microbe with <u>chemicals</u>, <u>heat</u>, <u>or</u> <u>radiation</u>.

 Inactivated vaccines usually don't require refrigeration, and they can be easily stored and transported in a freeze-dried form, which makes them accessible to people in developing countries.

Inactivated Vaccines

- Most inactivated vaccines, however, stimulate a weaker immune system response than do live vaccines.
- So it would likely take several additional doses, or booster shots, to maintain a person's immunity.

Protein based

- **Subunit Vaccines**
- Instead of the entire microbe, subunit vaccines include .only the antigens that best stimulate the immune system This make the chances of **adverse reactions** to the vaccine ..are lower

:subunit vaccines can be made in one of two ways
1. They can grow the microbe in the laboratory and then use
chemicals to break it apart and gather the important antigens.

They can manufacture the antigen molecules from the microbe.2 .using recombinant DNA technology Vaccines produced this way are called "recombinant subunit ..vaccines." such as hepatitis B virus vaccine

Scientists inserted hepatitis B genes that code for important antigens into common baker's yeast. The yeast then produced the antigens, which the scientists collected use in the vaccine







Spherical particle ~20nm diameter

Virus Dane particle 40nm diameter

Filamentous particle Up to 200nm long

Protein based Vaccines Toxoid Vaccines These vaccines are used when a bacterial toxin is the .main cause of illness

.Toxins are inactivate by treating them with formalin

Vaccines against diphtheria and tetanus are examples of .toxoid vaccines

- Pure polysaccharides. Vaccines
- Some bacterium possess an outer coating of sugar molecules called .polysaccharides
- vaccine is made up of long chain of sugar molecules
- infant's immune system can not recognize to the polysaccharides.

Conjugate Vaccines

Some bacterium possess an outer coating of sugar molecules called .polysaccharides

When making a conjugate vaccine, scientists link antigens or toxoids from a microbe that an infant's immune system can recognize to the

.polysaccharides



The vaccine that protects against Haemophilus influenzae type B (Hib) is a conjugate vaccine.
It is made by joining a piece of the polysaccharide capsule that surrounds the Hib bacterium to a protein carrier.

•This joining process is called conjugation.

IMMUNIZATION SCHEDULE IN SUDAN Under one year

Vaccine	SCHEDULE
BCG	At birth
OPV0	At birth
Pentavalente 1 (DPT + HB + H),OPV1	6 weeks
, Pentavalente DPT + HB + Hib) ,OPV2	10 weeks
Pentavalente (DPT + HB + Hib),OPV3	14 weeks
Measles	Nine month







جدول تطعيمات الأطفال:



عزيزتي الأم:

- شكرا لك لزيارتك للمركز وحرصك على تطعيم أطفالك.
- راجعي مع العامل الصحي مواعيد ونوع ومكان الجرعات القادمة.
 - احرصي على إكمال الجرعات القررة لك ولطفلك.
 - تعرّفي على الأثار الجانبية المحتملة وكيفية التعامل معها.
- احرصي على الاحتفاظ بالكرت وإحضاره عند كل زيارة تك أو تطفئك.

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العمر	تاريخ الجرعة	الجرعة	نوع اللتاح
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		الثانية	المصية

للاح التهايد الكرية القرومي (يد) العلوياة بدر إستاء الجرعة المدرية علال الدالا ساعة الأولى. من ولادة الطار وعني أسبرو **طلب**

- اللاح الملطية تُعلى بيرسة اعتبل الصغرية منذ الولادة ستى لمهرمين طلب
- ا**لاح الرواند** : بجب استاد المرحة الأرثى ملكن الشراء من ٢ د ١١ أسبوع طلف من رائدة الطلق على . ألا يتعاور معر الطلق عبد المرحة الكانية 1 أشبو .

مواعيد الجرعات التالية:

توع البرعة

هذا الكرت وثيقة هامة يجب الحفاظ عليها

وزارة الصحة الاتحادية يرنامع التحصين للوسع



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		يخ اول زيارة: المانا .
		ر النطن. يخ الميلاد:
		ىكن:

تلفون المركز / الفلني إن وجد:

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IMMUNIZATION SCHEDULE IN SUDAN Women in Child bearing age

DOSE	SCHEDULE
TT1	Any time at first contact or as early as possible during pregnancy
TT2	One month after the first visit(TT1)
TT3	Six months after TT2 or during subsequent pregnancy
TT4	One year after TT3or during subsequent pregnancy
TT5	One year after TT4or during subsequent pregnancy



كرت تطعيم لكل إمرأة سودانية



جدول تطعيمات التتانوس للنساء في عمر الإنجاب :

وقت التطعيم	الجرعة
 للحوامل عند أول زيارة لموقع التطعيم بعد معرفة الحمل، للفتيات في أقرب وقت عند إكمال عمر ١٥ سنة (بمفردها لاتعطي حماية)	الاولي (اساسية) _،
بعد شهر علي الاقل من الجرعة الاولي (تعطي حماية لمدة ثلاث سنوات)	الثانية (اساسية)
بعد ٦ أشهر علي الاقل من الجرعة الثانية (تعطي حماية لمدة خمس سنوات)	الثالثة (منشطة)
بعد سنة علي الاقل من الجرعة الثالثة (تعطي حماية لدة عشر سنوات)	الرابعة (منشطة)
بعد سنة علي الاقل من الجرعة الرابعة (تعطي حماية مدي الحياة)	الخامسة (منشطة)

(احرصى على إكمال جميع الجرعات)

التاريخ	جرعات التطعيم
	الاولى اساسية
	الثانية إساسية
	منشطة اولى
	منشطة ثانية
	منشطة ثالثة

مواعيد الجرعات القادمة :

الجرعة	الجرعة	الجرعة	الجرعة
الخامسة	الرابعة	الثالثة	الثانية

(التطعيم مجانا بكل الوحدات الصحية)

جدول تطعيمات التتانوس للنساء في عمر الإنجاب (١٥-٤٩ سنة)

لرقم المتسلسل:
ئولاية:
لمحلية: :
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عنوان السكن :
حامل 🔄 غیر حامل

تلفون المركز / الفنى إن وجد

برنامج التحصين الإتحادى: ص.ب : الخرطوم - هاتف : ٢٤٩-٢٢٤/٢١ / ٢٤٩-٤١ / ٢٤٩-٤١/٥٢ / ٢٤٩-٤١ / ٢٤٩-٤٤ / 8379332/ 34 episud@sudanmail.net



	Diseases	Type of vaccine	Dose	Rout of administration
BCG-1	тв	Live attenuated, variant	0.05ml	ID injection in left forearm
HBV-2	Hepatitis B	Recombinant, yeast derived HBs antigen	ml 0.5	IM thigh

	Diseases	Type of vaccine	Dose	Rout of administration
3-OPV	Polio	Live attenuated	2 drops	oral

Pentavalent Vaccine

	Diseases	Type of vaccine	Dose	Rout of administration
HiB	Hib disease	polysaccharide conjugate	0.5 ml	IM thigh
HBV	Hepatitis B	Recombinant, yeast derived HBs antigen		
DPT	Diphtheria Tetanus Whooping cough	Toxoid (D) Toxoid (T) Killed pertussis (P)		

	The disease	Type of the vaccine	Dose	Mode of administration
Measles		Live attenuated	0.5 ml	Subcutaneous

BCG (At birth)

•Live attenuated variant.

•0.05ml.

•ID injection in left forearm



Fig. 1

Intradermal injection of BCG vaccine



Photo courtesy of the author



BCG Interdemal Vaccination





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:local reactions .swelling, redness, or pain at the injection site

