

# RECORD COPY

MINUTES, MEETING NO. 8, ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES,  
FEBRUARY 16-17, 1967

The Advisory Committee on Immunization Practices met at the Communicable Disease Center on February 16-17, 1967. Those in attendance were:

## Committee

Dr. David J. Sencer, Chairman	Dr. David Karzon
Dr. H. Bruce Dull, Secretary	Dr. Theodore A. Montgomery
Dr. Gordon C. Brown	Dr. Roderick Murray
Dr. Alice D. Chenoweth	Dr. Jay P. Sanford
Dr. Geoffrey Edsall	Dr. Paul F. Wehrle

## Invited Participants

Dr. Karl Habel, Chief, Laboratory of Biology of Viruses, NIAID, NIH, Bethesda, Maryland

Dr. Joe R. Held, Section on Primate Malaria, Laboratory of Parasite Chemotherapy, NIAID, NIH, Chamblee, Georgia

Dr. Ruth L. Kirschstein, Chief, Laboratory of Pathology, Division of Biologics Standards, NIH, Bethesda, Maryland

Dr. Ira L. Myers, State Health Officer, State Department of Public Health, Montgomery, Alabama

Dr. Margaret H.D. Smith, Department of Pediatrics, Tulane University School of Medicine, New Orleans, Louisiana

## CDC Staff - Participants and Discussants

Epidemiology Program:	Dr. Cyrus C. Hopkins Dr. James W. Mosley Dr. R. Keith Sikes Dr. James H. Steele Dr. Robert J. Warren Dr. Kenneth H. Williams, Jr.
Immunization Program:	Dr. F. Robert Freckleton Dr. John J. Witte
Laboratory Improvement Program:	Dr. U. Pentti Kokko

The P.H.S. Advisory Committee on Immunization Practices held its winter meeting at the Communicable Disease Center in Atlanta, Georgia, February 16-17, 1967. Primary business of the one and one-half day meeting was the updating of the previous ACIP statement with regard to poliomyelitis vaccine and the completion of recommendations on rabies prophylaxis. Considerable work had been done by members of the ACIP prior to the winter meeting in reviewing and commenting on preliminary drafts of recommendations dealing with these two subjects. Therefore, the formal meeting itself was concerned with synthesis of Committee judgements.

#### Rabies

Discussion of rabies began with a statement of disease surveillance both in domestic and wild animals in the United States. The decline in rabies among dogs and cats and the major increase in importance of wildlife rabies were considered at length. The various aspects of rabies in animals including rabies control in domestic animals generally emphasize need for flexibility in utilizing post-exposure treatments. Experience with rabies vaccines, although extensive, demonstrates the inherent inadequacy of data on effectiveness and the necessity to judge comparability of products in terms of failures to protect. In this regard, no difference between the duck embryo vaccine (DEV) and the nervous tissue vaccine of the Semple type (NTV) have been shown. The large number of untoward reactions following both vaccines, but the substantially greater amount following NTV led the Committee clearly to favor adoption of a preference of vaccine based on diminished risk of untoward responses -

The ACIP encouraged rabies surveillance and urged effort to make human rabies immune globulin generally available. It pointed to the pressing need for active efforts to develop and explore new and safer rabies virus antigens for human use.

#### Poliomyelitis

The current recommendation on use of oral poliomyelitis vaccines developed in 1964 by a special advisory committee to the Surgeon General, sharing considerable membership with the ACIP, was discussed at length. Beginning with a review of surveillance and immunological data, the Committee focused attention on the lack of evidence accepting or rejecting as adequate, the primary schedule of two doses of trivalent OPV in infancy plus a third, reinforcing dose some months later. A few members of the Committee favored three initial doses followed by a reinforcing dose. Since satisfactory data fully documenting the difference between these two schedules were not available, it was decided to postpone final decision on the polio statement until field studies which would answer the questions raised can be concluded, hopefully prior to the next meeting.

Of importance also was the ACIP position that polio in the Continental United States does not now generally pose a threat for resident adults, justifying the recommendation that primary immunization for adults or booster doses of OPV be given only when the risk of polio does become important: exposure to cases, foreign travel, laboratory contact, etc. Final synthesis of the polio statement was postponed until the next meeting.

Other Discussions

Although most of the available time was consumed in discussions of rabies and polio, agenda for future meetings were considered briefly. It was suggested that the ACIP should formulate recommendations on the use of immune globulin in prophylaxis of infectious hepatitis, and should discuss vaccines for exotic diseases such as typhus, plague and cholera. The use of combined antigens, particularly live attenuated viruses, needs to be evaluated, and immunization practices for international travel are pertinent in the Committee's charge.

The spring meeting of the ACIP was set for May 25-26. With the thanks of the Chairman, the meeting was adjourned.