

ACIP Farewell



June 20, 2012

A Few ACIP Highlights: 2009 - 2012

- *First*, pandemic influenza H1N1
- Influenza vaccine for *all* ≥ 6 months of age
- Tdap vaccine: no interval; “elders” and pregnant women
- Updated immunization recommendations for health care providers
- Meningococcal conjugate booster vaccine for adolescents/college students and MCV4 for high risk 9-24 month olds
- Grading of Recommendations Assessment, Development and Evaluation (GRADE) method
- HPV vaccine for young males



Systematic review

Guideline development

Formulate recommendations:

- For or against (direction)
- Strong or conditional/weak (strength)

By considering:



- Quality of evidence
- Balance benefits/harms
- Values and preferences

Revise if necessary by considering:

- Resource use (cost)



Grade
 overall quality of evidence across outcomes based on lowest quality of critical outcomes

- "We recommend using..."
- "We suggest using..."
- "We recommend against using..."
- "We suggest against using..."

Annual ACIP Tasks

- **Seasonal influenza vaccine and antiviral recommendations**
- **Adult and pediatric immunization harmonized schedules**
- **Safety (e.g., MMRV, MCV4) and supply (e.g., Zostavax®) issues**
- **VFC for new vaccines**
- **Something you won't anticipate**



FIGURE 1. Recommended immunization schedule for persons aged 0 through 6 years — United States, 2012 (for those who fall behind or start late, see the catch-up schedule [Figure 3])

Vaccine ▼	Age ►	Birth	1 month	2 months	4 months	6 months	9 months	12 months	15 months	18 months	19–23 months	2–3 years	4–6 years	
Hepatitis B ¹		HepB	HepB			HepB								Range of recommended ages for all children
Rotavirus ²				RV	RV	RV ²								
Diphtheria, tetanus, pertussis ³				DTaP	DTaP	DTaP	See footnote ²		DTaP				DTaP	Range of recommended ages for certain high-risk groups
<i>Haemophilus influenzae</i> type b ⁴				Hib	Hib	Hib ⁴		Hib						
Pneumococcal ⁵				PCV	PCV	PCV		PCV				PPSV		Range of recommended ages for all children and certain high-risk groups
Inactivated poliovirus ⁶				IPV	IPV	IPV						IPV		
Influenza ⁷						Influenza (yearly)								
Measles, mumps, rubella ⁸								MMR		See footnote ⁸			MMR	Range of recommended ages for all children and certain high-risk groups
Varicella ⁹								VAR		See footnote ⁹			VAR	
Hepatitis A ¹⁰								Dose 1 ¹⁰				HepA series		
Meningococcal ¹¹							MCV4 — See footnote ¹¹							

This schedule includes recommendations in effect as of December 23, 2011. Any dose not administered at the recommended age should be administered at a subsequent visit, when indicated and feasible. The use of a combination vaccine generally is preferred over separate injections of its equivalent component vaccines. Vaccination providers should consult the relevant Advisory Committee on Immunization Practices (ACIP) statement for detailed recommendations, available online at <http://www.cdc.gov/vaccines/pubs/acip-list.htm>. Clinically significant adverse events that follow vaccination should be reported to the Vaccine Adverse Event Reporting System (VAERS) online (<http://www.vaers.hhs.gov>) or by telephone (800-822-7967).



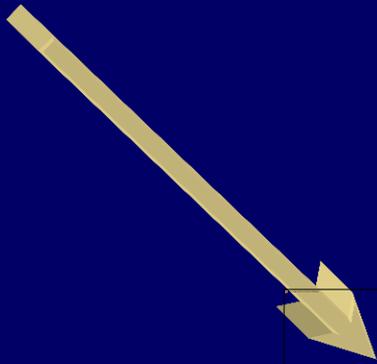
FIGURE 2. Recommended immunization schedule for persons aged 7 through 18 years — United States, 2012 (for those who fall behind or start late, see the schedule below and the catch-up schedule [Figure 3])

Vaccine ▼	Age ►	7–10 years	11–12 years	13–18 years
Tetanus, diphtheria, pertussis ¹		1 dose (if indicated)	1 dose	1 dose (if indicated)
Human papillomavirus ²		See footnote ²	3 doses	Complete 3-dose series
Meningococcal ³		See footnote ³	Dose 1	Booster at age 16 years
Influenza ⁴		Influenza (yearly)		
Pneumococcal ⁵		See footnote ⁵		
Hepatitis A ⁶		Complete 2-dose series		
Hepatitis B ⁷		Complete 3-dose series		
Inactivated poliovirus ⁸		Complete 3-dose series		
Measles, mumps, rubella ⁹		Complete 2-dose series		
Varicella ¹⁰		Complete 2-dose series		

Range of recommended ages for all children
 Range of recommended ages for catch-up immunization
 Range of recommended ages for certain high-risk groups

This schedule includes recommendations in effect as of December 23, 2011. Any dose not administered at the recommended age should be administered at a subsequent visit, when indicated and feasible. The use of a combination vaccine generally is preferred over separate injections of its equivalent component vaccines. Vaccination providers should consult the relevant Advisory Committee on Immunization Practices (ACIP) statement for detailed recommendations, available online at <http://www.cdc.gov/vaccines/pubs/acip-list.htm>. Clinically significant adverse events that follow vaccination should be reported to the Vaccine Adverse Event Reporting System (VAERS) online (<http://www.vaers.hhs.gov>) or by telephone (800-332-7967).

I knew one thing ...



**“Statistics are people
with their tears wiped dry.”**

***Dr. Jules Richmond
Former Surgeon General***

This I now know better than before

“As there are persons who mend torn garments, so there are physicians who heal the sick; but *your duty* is far nobler and one befitting a just person – namely to keep people in health.”

Xenophon in *Cryopaedia*, 400 BC

Things I Have Learned As Chair

- I'm *never* the smartest person in the room
- I'm not the *only one* who doesn't fully comprehend cost-effectiveness analyses
- *Acronyms, acronyms, acronyms...*
- *Never* debate about vaccine policy with someone from the UK
- Even if you have a seating chart with names, you still may get it wrong
- How to *terminate* discussion with tact
- How to love one branch of the federal government
- *And last, how to ring the bell!*

Financial Disclosure

I received from the taxpayers, economy airfare, 2 nights hotel expense, a daily stipend and the right to buy lunch at the meetings without standing in line

The knowledge and friends I gained was an immense blessing ... and not subject to the OGA form or federal tax

The Future Holds Many Challenges

- Adequate CDC financing
- Appropriate ACIP members to inform policy
- Creation of improved vaccine infrastructure
- More vaccines into the schedules
- Improved immunization rates
- Vaccine refusal

Remember the Goal



I will miss this job...

