



Ek Phool Do Maali

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Abstract:

Immunization is most effective and successful advent of medical science. Concept was popularized by Edward Jenner. Indians practices vaccine since 500 B.C. This is most cost effective approach .Currently we have large number of vaccines, some of them are economical but most of the newly introduced are expensive. Simultaneously two vaccination schedules are in use for one child, better to say –Ek phool do maali. The present article presents an overview on currently available vaccines in India, their availability as well as economical consideration.

KEYWORDS:

Vaccine, Immunization, Schedule.

INTRODUCTION

Child survival is dramatically improved after successful implementation of immunization. Credit is goes to Edward Jenner to save billions of lives simply by his preventable approach i.e. by using vaccines. Tremendous researches from last three decades added addition, addition and additions..... Currently we have huge list of vaccines not only for children but also for young girls, pregnant women, travelers and high risk persons. Present article highlights some points regarding to immunization in context to Indian children.

VACCINATION VS IMMUNIZATION

Vaccination is the process of inoculating vaccines while Immunization is development of immunity either active or passive. This is obtained by administration of vaccines, sera and immunoglobulin.

IMMUNIZATION STRATEGIES

To achieve goal of Health for all, as per WHO declaration, there is a common and important immunization drive to protect all children irrespective of countries and their border. The specific immunization strategy is based on epidemiological, economical and financial resources which makes the immunization schedules.

VACCINES AVAILABLE IN INDIA

Vaccines for both viral and bacterial diseases are available in India. A brief outline of currently available vaccines is mention as-

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Polio , Rotavirus , Hepatitis - A & B,
Measles, Mumps, Rubella
Varicella, Influenza, Rabies
Human Papilloma Virus (HPV)
Japanese encephalitis (JE)

Tuberculosis , Pertussis, Typhoid
Haemophilus influenza b, Cholera
Meningococcal A & C, Plague.
Diphtheria, Tetanus. Pneumonia.

Vaccines for above mentioned conditions are available as-

- (i) Single vaccines such as BCG, OPV/IPV, Measles HB/HA etc
- (ii) Combination vaccines such as DPT, MMR etc

National Immunization Schedule of India

This schedule contains all the vaccines against common communicable diseases covered under EPI. Salient features are-

Run by Government of India (GOI).
Contains all the essential vaccines.
Aim is to protect all the Indian children from major childhood diseases.
Provides free of cost to all (irrespective of economic consideration).
Available from metros to remotest places.
All Indian parents can avail such vaccines for their children.
Vaccines included in National schedule are BCG, DPT, OPV, Measles, DT & TT (HB in selected places)

The schedule recommended and conducted by Govt has some limitations-

Contains selected number of vaccines which have potential to prevent a child from 6-8 childhood diseases only.
Not updated in accordance to current scenario of vaccines development.
Major limitation is financial.

OTHER INDIAN IMMUNIZATION SCHEDULE

Apart from National schedule a parallel immunization schedule is also running successfully in India. This immunization schedule is recommended by IAP (Indian Academy of Pediatrics – a huge organization of pediatrician). Its salient features are-

Conducted by private practitioner and pediatricians.
Available after payment, i.e. not free.
Available in metros and in major towns.
Only for affordable parents.
Contains all newer and very costly vaccines.
Updated regularly in view of disease epidemiology and vaccines availability.
Contains currently available vaccines -

One is just like National schedule, but may have some advance version of their counterpart e.g. IPV (OPV), DTPa (DTPw), Tdap
Other inclusion is costly additional vaccines such as MMR, HB, Hib and Typhoid,
Some vaccines are more costly at present and can be given after discussion with parents. It includes Varicella, HA, Pneumococcal and Rotavirus.
Some of them are required as per need e.g. HPV,

Immunization schedule recommended by IAP has own limitations

Costly at present and beyond the reach of general population.
Not available at remotest places.
Required number of visits and prick (although minimize after combination)
Some combination are pharmaceuticals oriented likes,-DTP+HB, DTP+HB+Hib
Over emphasize and promoted by private practitioner,
Only for child of affordable parents.

Dilemma

Two immunization schedule for will create confusion, which one is better. A situation just likes ek phool do maali. I.e one child, two immunization schedule. Vaccines recommended by Govt of India is available everywhere free of cost. Other schedule contains all varieties of vaccines but some are expensive at present and not available everywhere. Most of the newer vaccines are now marketed in combination of four or five vaccines.

Indian Scenario

Vaccination coverage in India is neither uniform nor cent per cent. The condition is very bad in most of the states. Incomplete and irregular vaccination is not uncommon. Uninterrupted and continuous supply of vaccines and their temperature maintenance is another problem especially in remote area. Some of the myths are also associated with vaccination. Overall lack of proper advertisement and apathy of health workers also decline vaccination coverage. Overemphasis on Pulse Polio is other reason because most of person thinks that polio is only immunization important for child.

Pharmaceutical Scenario

Huge amount of money is needed for vaccine development and their successful clinical trial thus obviously they want profit at any cost. Further amount will expend in advertisement and their promotion. In the name of 'less visits or less pricks' most of the pharmaceuticals introduced combination of four or five vaccines .a indirect selling strategies. Here the additional counterpart is usually increase expenses.

Pharmaceuticals sponsor scientific events for getting favorable recommendation and promotion of their brands to recover expenses and to earn the profits. Now a day most of companies contract reputed medical person for their brand to promote vaccine amongst practitioners of different cities or states.

Practitioner's interest

Even essential vaccination coverage is very poor but practitioners overemphasize newer vaccine, sometime instill fear amongst parents. To the practitioner vaccines are available at very less cost as mention in MRP. Sometime there is offers like 'buy one get!' or an extra dose in vial.

Parents' attitude

Some anxious parents are demanding more and more vaccines at any cost. Majority of Indians doesn't know about benefit of immunization. Some considered that polio is only vaccination. There are certain myth and rumor associated.

Message

Two immunization schedules create confusion which one is better.
Current essential immunization is not up to the mark.
Poor awareness about important routine immunization.
Newer vaccines are very costly and beyond the reach of poor.
Overemphasis on newer and costly vaccines.
Promotion of combination version in name of fewer visits & less pricks.

Like nature, a disease can affect any one without enquiring status and affordability, so benefit of

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recommendation should be equal to all segments of society because

EVERY CHILD IS IMPORTANT FOR NATION

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