
**Prevention of Pertussis in Adolescents and Young Adults**

The IAP Committee on Immunization (COI) recommends offering Tdap vaccine instead of Td/TT vaccine in all children/adolescents who can afford to use the vaccine(1). Tdap is a costly vaccine, which many parents may not be able to afford. There is a need for a less expensive vaccine, though slightly more reactogenic because of whole cell pertussis antigen in reduced quantity, with full dose of tetanus toxoid and reduced quantity of diphtheria antigen. I seek views of the Committee on Immunization that till such a vaccine becomes commercially available can we mix 0.1 mL of DPT vaccine from 0.5 mL ampule in a 0.5 mL of tetanus toxoid and administer 0.5 mL of this mixture to individuals above 7 years of age?

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**REFERENCE**


**Reply**

The question is examining the feasibility of using fractional dose of the wP containing vaccine to protect adolescents and adults. In an era of combination vaccines where different antigens are being licensed for mixing with other antigen/combination manufactured separately—some even at different production units (for example DTP+Hep B with Hib conjugate vaccine), the suggestion of Dr Paul seems quite tempting and worth considering, especially for our country where significant disease burden coupled with exorbitant cost of the aP vaccines make it impossible to even think of exercising the option of using aP vaccines at mass level. However, to recommend such a practice, we need to have evidence of safety as well as of efficacy of the revised practice that can only be obtained through clinical trials. Further, the effect of such practices on the frequency of serious adverse events and on protection against disease has not been determined earlier. Hence, in the absence of such data, IAPCOI can not recommend this alternative practice of using fractional dose of whole-cell pertussis vaccine for adolescent and adult vaccination.

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**Multidose Vaccine Vials**

Do we really need multi dose vaccine vials in Indian scenario? Just today, I came across one very big house, having major share in combination vaccines, offering 2.5 mL vaccine for Rs. 275 per dose, with a tag - if you use it properly, you will get one additional dose from the same vial, as we get additional 0.3 mL for you. Its only 0.3 mL, how can that make an additional dose? These sorts of offer encourage malpractice, less than optimal dose to the patients, leading to inadequate protection.

Isn’t this the right time for our immunization committee to take a stand regarding use of multiple dose because the common practice remains the same. Even if you are getting the vaccine at lower rate, patients have to pay the price of single dose only; so where comes the question of helping the masses?

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