Listen to Mother First: Reply

It was indeed a serious lapse on the part of the consulting pediatrician. Mother's views/concerns should never be taken lightly more so in case of vaccination. Proper communication with parents becomes much more important considering that vaccines are given to healthy children and no vaccine is either 100% safe or 100% effective.

In the above instance, three vaccines were inadvertently re-administered within a week, which is against the established principles of vaccination in most instances. While only a single dose of BCG is indicated as per the vaccination schedule, more than one dose is required for OPV and Hepatitis-B. The birth dose of OPV and hepatitis-B serve only as 'priming' dose for the subsequent doses. For multi-dose vaccines, the minimum interval between 2 doses of the same vaccine is usually 4 weeks. This minimal interval of 4 weeks between primary doses allows development of successive waves of antigenspecific primary responses without interference [1].

While no untoward reaction should have occurred with the administered doses of OPV and Hepatitis-B, there may be some interference theoretically with the induction of 'priming' with previous doses. However, the clinical significance is extremely difficult to judge. These extra doses should not be counted and subsequent doses of both the vaccines should be administered on the scheduled dates as indicated by the vaccination timetable.

In case of BCG, which acts mainly through induction of T-cell mediated immunity, any interference with primary induction of immune responses may or may not occur. Also, some heightened local reactions like ulceration at vaccination site or marked regional adenitis may be anticipated few weeks/months later in few instances. There is no need of administration of extra dose of BCG to this child also.

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REFERENCES

 Basic immunology. *In*: Vashishtha VM, Choudhury P, Bansal CP, Yewale VN, Agarwal R. *eds*. IAP Guidebook on Immunization 2013-2014. National Publication House, Indian Academy of Pediatrics, Gwalior, 2014.

The Peshawar Peril

Hardly few weeks past the award ceremony of Nobel peace prize for a child in Pakistan and peace is in pieces by the Peshawar peril. The horrifying incidents involving school children in Peshawar, Pakistan and Beslan, Russia are quite disturbing and shaking the entire core of humanity. Children form a vulnerable population at any given point of time and during these man-made disasters, they are the worst affected [1,2]. Why should these innocent children lose their lives for no fault of theirs? Waging war against bacteria and viruses has no meaning when massacres are the order of the day. Exploring mars is pointless when these barbaric acts turn your backyards into graveyards. Terrorism is nothing but a novel way to relive the Stone Age or even darker ages earlier. Terrorism in any form against children is not acceptable and there should be a global awakening in this context.

The story of an act of terror does not end on the same day. The ripples of these events in the community and world as a whole are long-lasting and may generate untoward side effects. Post-traumatic stress disorders (PTSD) and disrupted family lives are usually severe and difficult for management. Just like basic life support, disaster preparedness should be made universal and should not be the headache of the affected nation alone [3]. The terrorists, and the culprits who sold them the weapons should be brought to book and penalized. Media also has a moral responsibility towards the mental wellbeing of children, and hence pictures and videos which may affect their normal milieu should not be broadcast. According to a recent meta-analysis, PTSD outcomes among children and adolescent survivors of natural and man-made disasters receiving psychological interventions were better when compared to those who did not receive any intervention [4]. Strong social support from families, teachers, and community coupled with economic resources to facilitate the family's adaptation should be part of the psychosocial rehabilitation [5]. A social change or revolution is the need of the hour for providing children a safe environment, irrespective of nationality and religion. All children have the right to live and this should not remain in paper alone, but ensured in