UK health officials launch “five in one” vaccine for babies

Roger Dobson *Abergavenny*

A “five in one” vaccine for babies is being introduced throughout the United Kingdom from the end of September.

The vaccine, which will give protection against whooping cough, diphtheria, tetanus, polio, and *Haemophilus influenzae* type B (Hib), has already been adopted in Canada. The vaccine replaces the four in one vaccine, which excludes polio vaccine (currently given orally).

Government ministers and health officials emphasised that the move, one of several changes in the childhood immunisation programme, will make immunisation safer and more efficient.

Professor Elizabeth Miller, head of the immunisation department at the Health Protection Agency, said: “There is

no need for parents to be concerned about their children being vaccinated against five diseases at once—the number of vaccines being offered has not changed—only the way they are given. A child’s immune system is more than able to cope with being exposed to many more viruses and bacteria at one time.

“All the trials we have carried out of this new vaccine have shown it to be safe and effective, and it has been used as part of the routine schedule in other countries such as Canada since 1998, where more than 3.5 million doses have been given.”

But campaign groups say that the new five in one vaccine may become embroiled in the same kind of controversy that has surrounded the measles, mumps, and rubella (MMR)

vaccine, which combines three vaccines in one. They say that increasing the combination also increases the potential for an adverse reaction and that it restricts choice for parents.

Simon Williams, director of policy for the Patients Association, criticised the way the changes were announced.

“To have the story appearing in newspapers over a weekend is bad enough, but to do it in August, when many families are away, is inexcusable. The whole announcement has been shameful. It a disgraceful way to let parents know something that is so vitally important,” he said.

In other changes announced by the Department of Health, vaccines will be free of thimerosal, a mercury compound used since the 1930s to prevent bacte-

rial and fungal contamination. And an inactivated polio vaccine will replace live oral polio vaccines for all ages.

The Department of Health says the switch to an inactivated polio vaccine is possible because the risk of polio infection in the United Kingdom is now very low. Using this type of vaccine also removes the remote risk of vaccine associated paralytic polio.

A new acellular pertussis vaccine will also be used instead of a whole cell vaccine to protect babies and children against whooping cough. □

A new immunisation website (www.immunisation.nhs.uk) for health professionals and parents provides information on the changes.

Nigeria apologises to neighbours for spread of polio

Abiodun Raufu *Lagos*

Nigeria has apologised for exporting wild polio virus to its six West African neighbours, Togo, Niger, Benin, Chad, Cameroon, and Burkina Faso.

Nigeria’s health minister, Professor Eytayo Lambo, blamed the spread of the virus on the controversy over the efficacy of polio vaccines being administered in some parts of Nigeria, which led to a temporary halt to immunisation in the country (*BMJ* 2004;328:1278).

“I formally tender my apology on behalf of the Nigerian government for this development and at the same time pledge to work harder to make polio a history by the end of this year,” Professor Lambo told the health ministers of the six coun-

tries at a one day joint meeting of the ministers on cross border immunisation strategies, in Abuja at the end of July.

“The postponement of immunisation activities in some key states of Nigeria resulted in a marked increase in the number of polio infected and paralysed children and the re-infection of previously polio free states in Nigeria and exportation of the virus in at least six neighbouring countries,” he said.

The apology came at the same time as immunisation in northern Nigeria was resumed after an 11 month halt, bringing to an end the controversy.

The Nigerian government came under severe pressure last year from radical Muslim

A polio vaccination team on the streets of Lagos

leaders opposed to the immunisation on the grounds that the vaccines contained antifertility substances, which they contended may have been targeted mainly at the Muslim

population of northern Nigeria. The bickering led to the suspension in August 2003 of a UN backed campaign to eradicate polio by the end of 2004. □