President

Health Council of the Netherlands

To the Minister of Health, Welfare and Sport



Subject : Vaccination against pandemic influenza A/H1N1 2009: dosage

Your reference : -

Our reference : U 5630/HH/mj/824-Q Publication no. 2009/19E

Enclosure(s) : -

Date : November 25, 2009

Dear Minister.

The Health Council of the Netherlands and the National Institute of Public Health and Environmental Protection/Centre for Infectious Disease Control Netherlands are jointly monitoring developments relating to the pandemic of influenza A/H1N1 2009 at national and international level, offering advice where needed. In that context, the panel of experts held a telephone conference on 23 November. This was occasioned by press releases issued on 20 November by the European Medicines Agency (EMEA) and the Dutch Medicines Evaluation Board. The press releases refer to a study into the effects of using one or two doses of Focetria and Pandemrix, the vaccines against influenza A/H1N1 2009. The amount of new information generated by this study is quite limited. Nevertheless, EMEA sees it as evidence that a single dose of vaccine may be sufficient to generate an adequate immune response in healthy individuals from 9 to 60 years of age (in the case of Focetria) and in those aged 10 and above (for Pandemrix). On the basis of this data, EMEA feels that certain age groups should also have the option of a single dose. EMEA makes no comment concerning the number of vaccinations for individuals in the high-risk groups. For children below the age of 10 (for Pandemrix) or 9 (in the case of Focetria) and for adults above the age of 60 (for Focetria) it is recommended that two doses be given, regardless of the health status of the individuals in question. Responsibility for the dosage schedule selected for the various target groups for vaccination rests with national governments.

During the deliberations of 23 November, we discussed with the experts the issue of whether the above extension of the dosage instructions should have repercussions for public vaccination programmes in the Netherlands.

The experts noted that most of the data underpinning EMEA's decision to extend the dosage schedule had been discussed by the panel of experts on previous occasions. In relation to the advisory report of 9 November, the experts are not aware of any new evidence that might cast a different light on the issue of the number of doses required for adequate protection. As yet, the

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Subject : Vaccination against pandemic influenza A/H1N1 2009: dosage

Our reference : U 5630/KG/mj/824-Q Publication no. 2009/19E

Page : 2

Date : November 25, 2009



possibility cannot be excluded that the study results concerning the efficacy of a single dose may, to some extent, have been influenced by the use of an overly sensitive technique or by previous contacts between the study's subjects and influenza A/H1N1 2009 or a related virus. With regard to vaccination, the experts reiterated their conclusion that it should have the greatest and broadest possible efficacy (either for the protection of the vaccinated individuals themselves or that of vulnerable individuals entrusted to their care). They also take the view that current dosage recommendations (a vaccination schedule consisting of two doses) should be retained.

Based on the above considerations, the advice remains unchanged. All target groups for vaccination should receive two doses of vaccine. The target groups are: children from six months to four years of age; all those who are eligible for vaccination on the basis of a medical risk; healthy individuals aged 60 and above; pregnant women from the fourth month of pregnancy onwards; anyone sharing accommodation with infants below the age of six months; health professionals who may come into contact with patients in the medical risk groups; and the informal carers of individuals who are at very high risk of serious illness and mortality from influenza.

Yours sincerely,

(signed) (signed)

Professor J.A. Knottnerus

Professor R.A. Coutinho

President, Health Council of the

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Director, RIVM Centre for
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Subject: Vaccination against pandemic influenza A/H1N1 2009: dosage

Our reference : U 5630/KG/mj/824-Q Publication no. 2009/19E

Page : 3

Date : November 25, 2009



The experts

This advisory report has been produced jointly by the Health Council of the Netherlands and the Centre for Infectious Disease Control Netherlands (part of the National Institute for Public Health and the Environment; RIVM), based on telephone deliberation held on 23 November 2009.

The following experts participated in this deliberation or were consulted by letter subsequently:

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President

Health Council of the Netherlands

Subject : Vaccination against pandemic influenza A/H1N1 2009: dosage

Our reference : U 5630/KG/mj/824-Q Publication no. 2009/19E

Page: 4

Date : November 25, 2009



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President

Health Council of the Netherlands

Subject: Vaccination against pandemic influenza A/H1N1 2009: dosage

Our reference : U 5630/KG/mj/824-Q Publication no. 2009/19E

Page : 5

Date : November 25, 2009



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This report has been reviewed by the Standing Committee on Immunology and Infectious Diseases of the Health Council of the Netherlands.

The Health Council and interests

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