



INJECTABLE POLIO VACCINE

FACT SHEET

Introduction

Uganda continues to be at high risk of a Polio outbreak due to Polio importation from neighbouring countries. Ten years of not reporting any indigenous cases of Polio (type 3), Uganda was certified Polio free in October 2006. However the porous nature of our borders that enables free movement of people amongst countries puts Uganda at high risk of importing the Polio virus. In the recent past the country has experienced outbreaks of the Polio virus in February 2009 and October 2010 imported from South Sudan and Kenya respectively. In July 2011 a Polio case was detected in Kenya and investigations showed that the Polio case was linked to the Polio outbreak in Bugiri, Uganda in November 2010. In 2013 and early 2014, cases have been detected in Somalia and Kenya. There is urgent need to stop importation and transmission of the Polio virus in Uganda.

Uganda joins the rest of the world in the Global Polio Eradication initiative to eliminate all Polio disease. The introduction of Injectable Polio Vaccine (IPV) into routine immunisation schedules is a critical step to achieve a lasting Polio free world. IPV, when administered in conjunction with Oral Polio Vaccine (OPV), has been found to boost immunity better than administering OPV alone. The introduction of IPV and gradual removal of OPV is necessary to secure a lasting Polio free world, free of all Polio disease.

What is Injectable Polio Vaccine (IPV)?

IPV is Injectable Polio Vaccine that targets the three types of polio virus: 1,2 & 3 and it is administered by an injection on the right upper thigh of the child.

What is the difference between Injectable Polio Vaccine (IPV) and Oral Polio Vaccine (OPV)?

Uganda is currently using OPV and it is administered orally. IPV is administered through an injection. New evidence shows that when OPV and IPV are used together it provides better protection for children against Polio.

Is the Injectable Polio Vaccine (IPV) safe?

IPV is an extremely safe vaccine, whether used alone or in combination with other vaccines and protects children against all 3 types of Polio virus. No serious side effects have ever been reported following vaccination with IPV, including when used alone or in combination with other vaccines. Minor local reactions, such as redness and pain, may occur following the IPV injection.

Can IPV be given along with other injections in one visit?

Evidence in other countries has shown that it is safe to have multiple injections at the same time. IPV vaccine is safe and effective when taken alone or with other vaccines.

How many doses of IPV are needed for maximum protection?

At least one dose of IPV should be given to children in addition to multiple doses of OPV as part of routine immunisation activities.

Should the child continue to receive OPV after receiving IPV, when offered in the future?

Yes, until Polio is eradicated globally, IPV should be used in conjunction with OPV, following the scheduled recommended by WHO.

Roles and responsibilities

Political leaders

- Mobilise communities for IPV introduction and routine immunisation
- Sensitise communities on the benefits of immunisation
- Advocate for resources to strengthen routine immunisation and IPV introduction
- Monitor immunisation activities

Religious leaders

- Mobilise communities for IPV introduction and routine immunisation
- Sensitise congregations on the benefits of immunisation

Cultural / traditional leaders

- Mobilise communities for IPV introduction and routine immunisation
- Sensitise communities on the benefits of immunisation

Civil societies

- Sensitise communities on the benefits of immunisation
- Advocate for resources to strengthen routine immunisation and IPV introduction
- Monitor immunisation services

Service clubs

- Sensitise communities on the benefits of immunisation
- Mobilise resources to strengthen routine immunisation
- Provide resource persons and equipment
- Empower communities to demand for immunisation services
- Strengthen existing social structures to mobilise communities for immunisation

Development Partners

- Provide technical support and financial support for immunisation services

Media

- Sensitise communities on the benefits of immunisation
- Disseminate immunisation related information to the public
- Monitor and report on immunisation services
- Mobilise communities for IPV introduction and routine immunisation

Professional bodies

- Organise in service training on immunisation
- Support the immunisation programme by providing scientific evidence

Line ministries

Local Government, Gender

- Allocate resources from local revenue for immunisation
- Ensure utilisation of the existing local structure (Local Councils, Parish Chiefs, Sub County Chiefs, Community Development Officers, Health Assistants, District Education Officers) to strengthen mobilisation and advocacy for routine immunisation

Security (Army, Police, Prisons)

- Mobilise communities
- Provide resource persons and equipment
- Maintain security for health workers during immunisation campaigns
- Support DHTs to follow up defaulters and resistant groups for immunisation

Key messages:

- Polio is a highly infectious and dangerous disease that causes paralysis, lameness or death.
- Polio can easily prevented by safe, effective and free vaccines given orally (OPV) and by injection (IPV)
- All children at 14 weeks of age or above but still less than 1 year will receive one dose of IPV and all the other doses of OPV
- This vaccine will be found at the nearest health facility or at routine immunisation outreach posts
- IPV does not interfere with the routine immunisation schedule (it is part of the usual immunisation schedule)
- Always remember to report any child under the age of 15 years who develops sudden weakness in the arms or legs to the nearest health facility for examination and appropriate management. This could be Polio.