

- [Jacob Puliye](#) 2014 Mar 12 10:47 p.m.

## 6500 PENTAVALENT-VACCINE AEFI-DEATHS IN INDIA EACH YEAR CANNOT BE ACCEPTABLE

I thank Dr Malik for endorsing the opinion that the AEFI guidelines need to be revised. Unfortunately neither Tozzi and colleagues, nor [Bonhoeffer et al](#) ([Bonhoeffer J, 2009](#)) have responded and we do not know if the authors agree with us.

Dr Malik's comment points out that India lacks a strong system of AEFI surveillance and investigation. This is undisputable. The fact of this poor surveillance in some States is clearly illustrated by the data obtained under the Right to Information from the Government of India, published by the Center for Science and Environment in their magazine – [Down to Earth](#). Goa - a State with good surveillance and a low infant mortality rate (IMR 10/1000 live births) reported 26 AEFI deaths per 100,000 infants vaccinated with the Pentavalent vaccine whereas Gujarat, with poorer health infrastructure and high IMR, reported only 0.4 deaths per 100,000 infants vaccinated (Gujarat IMR is 50/1000 live births). The correlation between reported AEFI rate and IMR is [illustrated here](#) ( $R^2 = 0.458$ ).

Clearly AEFI deaths (following Pentavalent vaccination) in States like Goa and Kerala is much higher than previously (with the older DPT vaccine). If the Goa 'AEFI-death-rate' (reliable data from the state with the lowest IMR and presumably the best health infrastructure and surveillance systems) is projected nationwide and 26 babies are to die among every 100,000 babies vaccinated, 6500 AEFI deaths can be anticipated when the year's birth cohort of 25 million babies in India are vaccinated. This cannot be acceptable.

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