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# Government's UIP: Pressure from international organizations to include vaccines for other diseases

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In 2010 the government's Universal Immunization Programme (UIP) consisted of vaccines against six diseases: polio, tuberculosis, measles, diphtheria, tetanus and whooping cough. They cost less than Rs 100 per child. Meantime new vaccines were developed globally against other diseases — H influenza B, hepatitis B, some strains of HPV, pneumococcal bacteria and diarrhoea causing rotavirus. There was pressure from the manufacturers and international aid organizations concerned to include all these vaccines in the UIP of developing countries. However, many of these new vaccines have limited usefulness. Their introduction will increase the cost of immunization 10 fold to Rs 1,000 per child. Sometimes studies are done locally to demonstrate the need for the vaccine. Interestingly, if the studies show unacceptable affects these studies are ignored and only others are quoted to push for utilization. Three case studies below illustrate this point:



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## THE HPV STORY

This is best described in the words of the 72nd report of the Parliamentary Committee on Health and Family Welfare that makes reference to PATH (funded by BMGF) and Indian regulatory authorities for trying to promote HPV vaccine. It states: "PATH by carrying out the clinical trials for HPV vaccines in Andhra Pradesh and Gujarat under the pretext of observation project has violated all laws and regulations.... Its sole aim has been to promote the commercial interests of HPV vaccine manufacturers who would have reaped windfall profits had PATH been successful in getting the HPV vaccine included in the UIP of the country."

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## THE 116E ROTAVIRUS VACCINE STORY

The vaccine was licensed by the DCGI after being tested on only 4,500 babies. The US drug licensing authority requires testing new rotavirus vaccines in 30,000 children because some strains have been known to produce a potentially fatal intestinal obstruction once in every 10,000 babies. The DCGI admits the studies done so far are inadequate; but it says this can be evaluated in post marketing surveillance! In effect, the infants in India will get the vaccine and unwitting will be trial subjects to provide data needed for global licensing of the vaccine.

## THE PENTAVALENT EXPERIENCE

Pentavalent was initially introduced in Kerala and Tamil Nadu. When deaths following vaccination were reported repeatedly in these two states, many were initially attributed to Sudden Infant Death Syndrome. The WHO declared that there was no proof that the vaccine was the cause of the deaths and the programme was extended to other states. Everywhere in India where the vaccine has been introduced, about one in 10,000 babies die immediately. There have been recent reports of two more babies dying due to the vaccine in Haryana.

*(The writer is head of pediatrics department, St Stephen's Hospital, and advises government on immunization)*

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