



CARE OF BABY HEALTH AND IMMUNIZATION IN INDIA



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ABSTRACT:

Immunization is one of the most cost-effective interventions to prevent the diseases and improve life expectancy. Immunization Programme is one of the key interventions for protection of children from life threatening conditions, which are preventable and it is a major public health intervention in the country. Immunization Programme in India was introduced in 1978 as Expanded Programme of Immunization (EPI). The programme gained momentum in 1985 and was expanded as Universal Immunization Programme (UIP) to be implemented in phased manner to cover all districts in the country by 1989-90. UIP became a part of Child Survival and Safe Motherhood Programme in 1992. Today, UIP is an integral component of the government's flagship Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCH+A) approach. India's Universal Immunization Programme is one of the largest in the world in terms of quantities of vaccine used, the number of beneficiaries, the number of Immunization session organized, the geographical spread and diversity of areas covered.

KEY WORDS: Health diseases, programmes, vaccine, Immunities, death and disability.

INTRODUCTION:

Immunization is the process whereby a person is made immune or resistant to an infectious disease, typically by the administration of a vaccine. Immunization helps protect the child from life threatening diseases. It also helps reduce the spread of disease to others. Vaccines stimulate the body's own immune system to protect the person against subsequent infection or disease. Babies are born with some natural immunity which they get from their mother through breast-feeding. This immunity gradually diminishes as the baby's own immune system starts to develop. Immunization is one of the most cost-effective health investments and vaccination does not require any major lifestyle change. There are two main types of immunization, active immunization and passive immunization. Both types of immunization prepare the body to fight against certain diseases.

Under UIP, Govt is providing vaccination to prevent seven vaccine preventable diseases, Diphtheria, Pertussis, Tetanus, Polio, Measles, Hepatitis B & Tuberculosis.

Sl. No.	Vaccine & its presentation	Protection	Route	No. of doses	Vaccination Schedule
	BCG (Bacillus Calmette Guerin)- Lyophilized vaccine	Tuberculosis	Intra- dermal	1	at birth (upto 1 year if not given earlier)
	OPV (Oral Polio Vaccine)- Liquid vaccine	Poliomyelitis	Oral	5	Birth dose for institutional eliveries, Primary three doses at 6, 10 & 14 week and one booster dose at 16-24 month of age. Given orally
	Hepatitis B – Liquid Vaccine	Hepatitis B	Intramuscular	4	Birth dose (within 24 hours) for institutional eliveries, Primary three doses at 6, 10 & 14 week.
	DPT (Diphtheria, Pertussis and Tetanus Toxoid) – Liquid vaccine	Diphtheria, Pertussis and Tetanus	Intramuscular	5	Three doses at 6, 10 & 14 week and two booster dose at 16-24 month and 5-6 years of age
	Measles - Lyophilized vaccine	Measles	Subcutaneous	2	9-12 months of age and 2nd dose at 16-24 months
	TT (Tetanus Toxoid) – Liquid vaccine	TT (Tetanus Toxoid) – Liquid vaccine	Intramuscular	2	10 years and 16 years of age For pregnant woman, two doses given (one dose if previously vaccinated within 3 Year)
	JE vaccination (in selected high disease burden districts) Lyophilized vaccine	Japanese Encephalitis (Brain fever)	Subcutaneous	2	9-12 months of age and 2nd dose at 16-24 months (6 month after vaccination drive)
	Hib (given as pentavalent containing Hib+DPT+Hep B) (in 8 states) – Liquid vaccine	Hib Pneumonia and Hib meningitis	Intramuscular	3	6, 10 & 14 week of age

Active Immunization

Active immunization is when a substance, known as a "vaccine", is introduced into the body to encourage the body's immune system to produce antibodies against a particular disease.

Passive Immunization

Passive immunization means when a person is given antibodies prepared outside. When these antibodies are given to a person, antibodies help prevent or fight infectious disease agent or toxin. However,

the protection offered by passive immunization is short-lived, usually lasting only a few weeks or months, but it helps to protect immediately in cases carrying high risk of infection.

Both the immunization should be given under medical supervision only. According to WHO, Immunization is a proven tool for controlling and eliminating life-threatening infectious diseases and is estimated to avert between 2 and 3 million deaths each year but an estimated 18.7 million infants worldwide are still missing out on basic vaccines. Every year in India, 5 lakh children die due to vaccine-preventable diseases and another 89 lakh children remain at risk, because they are either unimmunized or partially immunized against vaccine-preventable diseases. Partially immunized and unimmunized children are most susceptible to childhood diseases and are at a much higher risk of dying as compared to fully immunized children. While Routine Immunization has played a significant role in preventing childhood deaths and disability, thousands of children in India continue to die from vaccine preventable diseases each year.

India has one of the largest Universal Immunization Programs (UIP) in the world in terms of the quantities of vaccines used, number of beneficiaries covered, geographical spread and human resources involved. Despite being operational for over 30 years, UIP has been able to fully immunize only 65% children in the first year of their life and the increase in coverage has stagnated. To achieve full immunization coverage for all children, the Government of India launched Mission Indradhanush in December 2014. The first round of Mission Indradhanush was flagged off on 7th April 2015 across all 28 States and Union Territories. The second phase was recently launched on 7th October 2015. The ultimate goal of this program is to ensure full immunization with all available vaccines for children up to two years and pregnant women. Under this programme, all vaccines are available free of cost.

Implementation of Routine Immunization

- RI targets to vaccinate 26 million new born each year with all primary doses and ~100 million children of 1-5 year age with booster doses of UIP vaccines. In addition, 30 million pregnant mothers are targeted for TT vaccination each year.
- To vaccinate this cohort of 156 million beneficiaries, ~9 million immunization sessions are conducted, majority of these are at village level.
- As per Coverage Evaluation Survey (2009), 89.8% of vaccination in India is provided through Public sector (53% from outreach session held at Anganwadi centre (25.6%), sub centre (18.9%) etc.) while private sector contributed to only 8.7%.
- ASHA and AWW support ANM by mobilizing eligible children to session site thus try to ensure that no child is missed. ASHA is also provided an incentive of Rs. 150/session for this activity.
- To ensure potent and safe vaccines are delivered to children, a network of ~27,000 cold chain points have been created across the country where vaccines are stored at recommended temperatures.

REF.:

1. Universal Immunization Programme.
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