Dutch National Immunisation Programme (NIP)

The RIVM continuously monitors the effectiveness and safety of the NIP in order to keep the programme optimal.

Highlights in the NIP surveillance

**Area 1 - Surveillance of vaccination uptake**
National vaccination coverage data

- **2014 - 2015**
  - > 94% of newborns is vaccinated
  - Uptake for MMR-2 is below the WHO-target of 95%
  - Uptake for HPV (2 doses) increased to 61%

**Area 2 - Surveillance of adverse events**
Enhanced spontaneous reporting of adverse events following immunisation

- **2014 - 2015**
  - Decreased number of reported adverse events

**Area 3 - Disease surveillance**
Notifications by law, mortality, hospital admissions and general practitioner consultations

- **2014 - 2015**
  - Disease burden highest for invasive pneumococcal disease (IPD)
  - Reduced number of IPD after introduction of 10-valent PCV
  - Increased pertussis incidence

**Area 4 - Pathogen surveillance**
Laboratory data

- **2014 - 2015**
  - Increase in circulating pertactin-deficient pertussis strains

**Area 5 - Immunosurveillance**
Seroprevalence data from a representative sample

- **2014 - 2015**
  - People vaccinated against diphtheria remain protected for long time
  - The design of a new seroprevalence survey (Pienter3) got approval of the medical ethical committee

**Vaccinations**

- **DT-IPV**
- **DTaP-IPV**
- **MMR**
- **HPV**
- **PCV**
- **MenC**

1957: Diphtheria (D), Pertussis (Pe), Tetanus (T), Polio (Po)
1974: Rubella (R)
1976: Measles (Me)
1987: Mumps (Mu)
1993: Haemophilus influenzae type b (Hib)
2002: Meningococcal C (MenC) disease
2006: Pneumococcal (Pneu) disease
2009: Human papillomavirus (HPV)
2011: Hepatitis B (HepB)

**Introduce of target disease into the NIP**

- **6-9 weeks**
- **4 months**
- **14 months**
- **9 years**
- **3 months**
- **11 months**
- **4 years**
- **12 years (girls only)**