Vaccine uptake

Vaccine uptake in the Dutch National Immunisation Programme stabilised

Immunosurveillance

High antibody concentrations against vaccine types HPV16/18

Overall seroprevalence in Caribbean Netherlands

94% Measles, 85% Mumps, 85% Rubella, 78% Varicella

Intention towards maternal pertussis vaccination

15% 25% 60%

Reported adverse events following immunisation

1,519 reports of 5,208 possible adverse effects

An increase of 9.8% due to introduction of MenACWY vaccination for 14-years-olds

Disease

Measles

Local measles outbreak in low vaccination municipality

2015 2016 2017 2018 2019

5 6 16 24 up to July

2019 45

Meningococcal W

After an increase since 2015, a decrease or stabilization was seen in almost all age groups in the first six months of 2019

2015 2016 2017 2018 2019

9 50 80 103 39 up to July

Meningococcal B disease

Vaccination not recommended

Reassess after 3 years

Uncertainty on the effectiveness

No herd protection

Life threatening disease and possible residual effects

Unfavorable cost-effectiveness

Decisions Ministry of Health

Herpes Zoster

Recommended

Vaccination of elderly people with the new herpes zoster vaccine

According to the Health Council the new herpes zoster vaccine cost-effectiveness should not exceed the commonly used reference value of €20,000 per QALY

Highlights surveillance 2018 - 2019

Pathogen

Incidence of invasive pneumococcal disease

Vaccine serotypes

Low incidence

Non-vaccine serotypes

Incidence is increasing

HPV

Dose schedule

9 years Pre vaccination

4 years Post vaccination

HPV

Recommended to vaccinate

Girls close to nine years of age

Boys in addition to girls

Offer supplemental vaccination to unvaccinated adults up to 26