

MINISTRY OF HEALTH  
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ANY REPLY TO THIS COMMUNICATION  
SHOULD BE ADDRESSED TO THE  
PERMANENT SECRETARY AND THE  
FOLLOWING REFERENCE QUOTED:

December 17, 2014

Dear Doctor,

**Re: Change to the routine immunization schedule – 2<sup>nd</sup> dose of Measles, Mumps, Rubella (MMR) vaccine at 18 months**

The Ministry of Health wishes to thank you for your continued support in ensuring the health and well-being of our Jamaican children through vaccination. As new evidence and situations arise, from time to time official changes in the vaccine schedule may be required. I wish to take this opportunity to advise you of the revision to the routine immunization schedule with respect to the second dose of MMR vaccine (MMR2) which becomes effective on January 1, 2015.

Currently, the schedule requires that the 1<sup>st</sup> dose of MMR be administered at 12-23 months and the 2<sup>nd</sup> dose at 4-6 years of age. The new schedule will now require that MMR1 be administered at 12 months and MMR2 be administered at 18 months of age. This is based on the current evidence regarding risk of measles infection during outbreaks and the recommendations for MMR vaccination from the WHO Strategic Group of Experts (SAGE) and endorsement of this recommendation by the Immunization Technical Advisory Group (TAG) for the Region of the Americas.

As the Region of the Americas continues to seek certification of elimination of measles and rubella, all CARICOM Member States have endorsed the 2012 PAHO Resolution CSP28.R14 Plan of Action for Maintaining the Elimination of measles and rubella. This requires all countries to ensure at least 95% coverage for both doses of MMR as well as strengthened surveillance for measles and rubella in both the public and private sector.

It is well established that up to 10% of children vaccinated will not seroconvert after one (1) dose of MMR. There is evidence from recent outbreaks in the Region that children who have been vaccinated are becoming infected with the measles virus even in areas with high MMR coverage. Efforts are being made to ensure adequate protection of infants earlier in life. Both SAGE and TAG now recommend that children receive at least two doses of MMR vaccine during their second year of life.

In our country context, MMR1 coverage has been between 88%-94% for the 2011-2013 reporting period compared to the MMR2 coverage for the same period which was 60%-76%. Our population is therefore at risk and measures need to be employed to significantly improve our coverage for the 2<sup>nd</sup> dose of MMR.

The objective of this change in the schedule therefore is to improve measles control by strengthening the two-dose MMR strategy and reducing build-up of the susceptible population. The expected outcome with the change in the age administration of MMR2 to 18 months is to:

1. Improve MMR2 coverage as we aim to meet the national target of  $\geq 95\%$  coverage for all antigens
2. Achieve higher measles protection sooner
3. Prevent measles outbreaks in school aged children by reducing the proportion of the susceptible population

Based on the national immunization schedule therefore the following vaccines will be given at 18 months:

1. 2<sup>nd</sup> dose of Measles, Mumps and Rubella (MMR) vaccine
2. 1<sup>st</sup> booster of Diphtheria, Pertussis and Tetanus (DPT) vaccine
3. 1<sup>st</sup> booster of Polio (OPV or IPV) vaccine

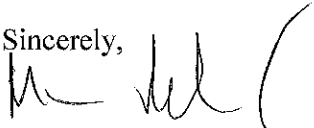
Please see the revised schedule attached for your reference.

The following are important reminders:

- There is no contraindication to the administration of multiple injectable vaccines simultaneously; however they should be given at different sites. e.g., left arm and right arm.
- The minimum interval between the two doses of MMR vaccines should be at least 4 weeks.

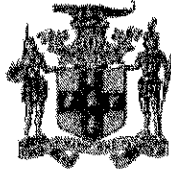
The Immunization programme remains one of the flag-ship programmes of the Ministry of Health and your continued support in maintaining its success is greatly appreciated.

Sincerely,



Dr. Marion Bullock DuCasse  
Chief Medical Officer (Actg.)

Encls.



## MINISTRY OF HEALTH, JAMAICA

### NEW ROUTINE IMMUNIZATION SCHEDULE

AGE	IMMUNIZATION TO BE GIVEN AGAINST	VACCINES
<b>BIRTH – 6 week</b>	Tuberculosis	BCG
<b>6 weeks</b>	Diphtheria, Tetanus, Pertussis Poliomyelitis Hepatitis B Haemophilus influenza type B	1 <sup>st</sup> dose: DPT OPV/IPV HepB Hib
<b>3 months</b>	Diphtheria, Tetanus, Pertussis Poliomyelitis Hepatitis B Haemophilus influenza type B	2 <sup>nd</sup> dose: DPT OPV/IPV HepB Hib
<b>6 months</b>	Diphtheria, Tetanus, Pertussis Poliomyelitis Hepatitis B Haemophilus influenza type B	3 <sup>rd</sup> dose: DPT OPV/IPV HepB Hib
<b>12 months</b>	Measles, Mumps, Rubella	MMR
<b>18 months</b>	Diphtheria, Tetanus, Pertussis Poliomyelitis <b>Measles, Mumps, Rubella</b>	1 <sup>st</sup> Booster doses: DPT OPV/IPV <b>MMR</b>
<b>4-6 years</b>	Diphtheria, Tetanus, Pertussis Poliomyelitis	2 <sup>nd</sup> Booster doses: DPT OPV/IPV
<b>Reproductive-aged females</b>	Rubella	MR/MMR
<b>Pregnant women</b>	Tetanus	DT(A)

\*DPT, Hib, HepB - Pentavalent