Vaccination Philosophy and Appeal

13th March 2021

The vaccination is an essential strategy of prevention diseases. In the COVID 19 pandemic, the world has entered in the most crucial phase of fight against the COVID pandemic by using vaccination.

The basic principle of vaccination is to generate immune response in a measured way to counter the infection and break the chain. This way a greater number of people vaccinated will result into development of herd immunity and reduce the rate of transmission of the virus thereby reduce the number of COVID infections itself. Whatever infections happens due to lack of the covid appropriate behaviour can get tackled in the hospitals.

Therefore, during the limited supply of vaccine the first priority is given to the people who are the most vulnerable to acquire infections. Logically health care workers and front-line workers are prioritized. Once these segments are covered the next segment to cover are elderly above 60 years and people above 45 years having morbidity.

Why these segments have been prioritized? These groups are most at risk, upon acquiring COVID infection, they turn out as serious cases and succumb to it. Therefore, it is our responsibility to take care of elderly people by prioritizing them for vaccination.

People are crowding to get vaccinated. ‘ME FIRST’ will not help to control virus transmission, it may result into new infection because of crowding at the Centres. All of us have waited for more than a year for vaccination. It is humbly requested that we may follow the guidelines as follows -

- Read all the advisories available in the official website of the Department
- Register yourself in COVIN portal so as to get hassle free vaccination
- Only after registration on designated day and time visit the Vaccination Centre to get vaccinated.
- Vaccines are safe and available in sufficient numbers. Therefore, do not rush to get vaccinated.
- Vaccination at the Private Hospitals is at cost. Those who can afford to pay Rs 250/- and are in the prioritized group may avail the vaccination services from designated Private Hospitals.
Kerala has demonstrated successfully doing Public Actions in a discipline way for many social issues in the past. If all of us understands the vaccination related guidelines and work accordingly, we will be able to sort out the small issues. The software is for the country and managed at Centre. As size of the beneficiary is huge there are sometimes software glitches experienced. We have taken up the issues with the technical team handling software at Min of Health & Family Welfare Govt of India and they have been working on software glitches.

We all are taking efforts to streamline the vaccination. The enormity of the task may be understood by all of us. We need to do around 60-70 lakh vaccination 1st dose followed by 2nd dose systematically with two different vaccines in the State. This requires proper planning and execution. Kerala’s strength at the grass roots of having strong Local Self Government, Panchayath Functionaries, volunteers will enable to do the vaccination properly. Peoples’ cooperation and involvement will assist us to conduct the vaccination efficiently.

*We sincerely request all to extend cooperation so as to enable to conduct vaccination effectively in short time period and demonstrate the way together we take Public Action for larger GOOD.*

- Kerala HEALTH
FREQUENTLY ASKED QUESTIONS

What is vaccination?

Vaccines contain weakened or inactive parts of a particular organism (antigen) that triggers an immune response within the body.

Vaccination is a simple, safe, and effective way of protecting people against harmful diseases, before they come into contact with them. It uses your body’s natural defences to build resistance to specific infections and makes your immune system stronger.

Since vaccines contain only killed or weakened forms of germs like viruses or bacteria, they do not cause the disease or put you at risk of its complications.

Why is vaccination important?, and what is “Herd Immunity”

When we get vaccinated, we aren’t just protecting ourselves, but also those around us. Some people, like those who are seriously ill, are advised not to get certain vaccines — so they depend on the rest of us to get vaccinated and help reduce the spread of disease.

“Herd Immunity”, also known as ‘population immunity’, is the indirect protection from an infectious disease that happens when a population is immune either through vaccination or immunity developed through previous infection. When vaccine coverage is very high, the risk of disease among those who are non-immune can become similar to those who are truly immune.

WHO supports achieving ‘herd immunity’ through vaccination, not by allowing a disease to spread through any segment of the population, as this would result in unnecessary cases and deaths.

Vaccinations are without doubt one of the greatest achievements of modern medicine, and there is hope that they can constitute a solution to halt the ongoing COVID-19 pandemic. ([https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7928468/)](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7928468/)
How are vaccines developed and approved?

Each vaccine under development must first undergo screenings and evaluations to determine which antigen should be used to invoke an immune response. This preclinical phase is done without testing on humans. An experimental vaccine is first tested in animals to evaluate its safety and potential to prevent disease.

It is then tested in human clinical trials in three phases.

**Phase-1:** The vaccine is given to a small number of volunteers to assess its safety, confirm it generates an immune response, and determine the right dosage. Generally in this phase vaccines are tested in young, healthy adult volunteers.

**Phase-2:** The vaccine is then given to several hundred volunteers to further assess its safety and ability to generate an immune response. Participants in this phase have the same characteristics (such as age, sex) as the people for whom the vaccine is intended. There are usually multiple trials in this phase to evaluate various age groups and different formulations of the vaccine.

**Phase-3:** The vaccine is next given to thousands of volunteers – and compared to a similar group of people who didn’t get the vaccine, but received a comparator product – to determine if the vaccine is effective against the disease it is designed to protect against and to study its safety in a much larger group of people. Most of the time phase three trials are conducted across multiple countries and multiple sites within a country to assure the findings of the vaccine performance apply to many different populations.

Officials in each country closely review the study data and decide whether to authorize the vaccine for use. In India, the NTAGI (National Technical Advisory Group on Immunizations) examines the recommendations of WHO and other world regulatory agencies. Formal approval is given by the Department of the Central Drugs Standard Control Organization (CDSCO), Drugs Controller General of India (DCGI), based on the recommendations of its subject expert committee (SEC). All the vaccines used in India, including COVID-19 are approved.

Further monitoring (post marketing surveillance) takes place in an ongoing way after the vaccine is introduced. There are systems to monitor the safety and effectiveness of all vaccines. This enables scientists to keep track of vaccine
impact and safety even as they are used in a large number of people, over a long time frame.

Does India and Kerala have the capacity to store the COVID vaccine at temperature of +2 to +8 degree Celsius and transport them at required temperature?

India runs one of the largest Immunization programme in the world, catering to the vaccination needs of more than 26 million new-borns and 29 million pregnant women. The programme mechanisms in Kerala are ready to effectively cater to the State’s large and diverse population. The annual Pulse Polio and Rota virus Immunization Program are the examples of the state’s capacity for mass vaccination programs.

References: World Health Organization, PMC, CDC, MOHFW Govt. of India.