Unanswered questions

Week 1 -Day 2

Question from Naveen Thacker to Aurelia Nguyen:

- ***Answer from Aurelia Nguyen to the question on Zero dose*** - please find an overview here: https://www.gavi.org/our-alliance/strategy/phase-5-2021-2025/equity-goal/zero-dose-children-missed-communities

Question from Naveen Thacker to Niklas Danielsson:

- ***Answer from Niklas Danielsson on vaccinating children against Covid-19****: The benefit - risk calculation of vaccination is just one of several dimension to consider when coming to a decision on whether to routinely vaccinate children against COVID-19. Countries must also consider public health aspects such as cost-benefit at population level and opportunity costs for public immunization programs. That includes weighing the benefit of Covid-19 vaccination for children against the benefits of vaccines such as PCV, HPV, Hepatitis B birth dose, OCV, and TCV in terms of deaths prevented and DALYs saved.*

Question from Naveen Thacker to Joachim Hombach:

- ***Answer from Joachim Hombach on the one dose HPV question:*** *we see an increasing number of countries switching to one dose schedule, including high income countries. There is also increasing Gavi applications for one dose (Aurélia can comment). For the future, it will be important that for the more recent HPV vaccines the necessary data allowing for one dose schedule will be generated. Lastly, it is highly desirable that this schedule will be reflected in the product label, to get out of an off-label situation.*

Question from Student to Joachim Hombach:

- **Is this recommendation gender specific or for males as well?**

- ***Answer from Joachim Hombach:*** *The reference document is the WHO position paper from 16 December 2022, published in the WER. WHO's primary vaccination target group is girls 9-14 years of age from the perspective of prevention of cervical cancer. Vaccination of boys and girls >15 years represents a secondary target. The single dose option can also be offered to this secondary target population up to the age of 20 year. It should be noted that there is very little data as to the effectiveness of the one dose schedule in boys, but immunological data do not show any difference in response between girls and boys. As stated in WHO's position paper, further evidence should be generated.*

Question from Student to Melanie Saville:

- **Do we have data about the evolution of MIS-C frequency and severity? Paediatricians should be involved in the decision?**

⇨ ***Answer from Melanie Saville:*** *Multisystem Inflammatory Syndrome in Children (MIS-C) is a rare but potentially serious complication with SARS-CoV-2 that occurs in neonates, children, and adolescents. Symptoms may vary from mild to severe. It is characterized by inflammation across multiple organs. Most MIS-C cases were observed in the beginning of the COVID-19 pandemic and the number of cases reported decreased from 2020 to 2022. Studies have reported that early in the COVID-19 pandemic, MIS-C occurred in 1 of approximately 3,000 to 4,000. (source: CDC). Pediatricians shall be involved in the clinical management of these population.*