IOM Report Identifies National Vaccine Priorities

BY MIRIAM E. TUCKER

The National Vaccine Plan should prioritize limited resources to meet unmet health needs and to increase funds for safety research and communication, the Institute of Medicine said in a new report.

The Institute of Medicine, an independent advisory body, launched its new report "Priorities for the National Vaccine Plan" at a press briefing in December.

The National Vaccine Plan, first released in 1994, was mandated by the National Childhood Vaccine Injury Act of 1986. A draft update was issued in 2008. Given current budgetary constraints, the National Vaccine Program Office, part of the Department of Health and Human Services, requested guidance from the IOM on prioritization of activities. The plan is expected to be finalized this year.

Dr. Claire Broome, who chaired the 18-member multidisciplinary committee that wrote the report, said the new plan will be broader in scope than was the 1994 document. That one was intended to be used primarily by the NVPO, which coordinates all vaccine-related activities of multiple federal agencies. In contrast, the new plan will also be aimed at other public and private vaccine stakeholders, including public health offices, health care providers, pharmaceutical companies, health care organizations, and the general public.

"Changes in society, medicine, science, and communication were important considerations for our committee as we looked at the plan for the future of vaccines and immunization," said Dr. Broome of the Rollins School of Public Health, Emory University, Atlanta.

The document identifies 18 "priority actions" distributed among five main goals, as well as two additional recommendations regarding the role of the plan as the primary tool to be used for all agencies with roles in the NVPO, and for allocation of resources to ensure implementation of vaccine-related activities within the plan.

Under the heading of Vaccine Development, the report advises that the plan incorporate improvements in the vaccine regulatory process that reflect current science and "encourage innovation without compromising safety and efficacy." Evidence-based approaches should be used to prioritize new and improved vaccine candidates and to develop specifications for high-priority vaccines. Acceleration of high-priority vaccine development should involve the National Institutes of Health and the Department of Defense, as well as private sector partners.

With regard to Vaccine Safety, the committee said that the plan should establish a process to identify potential vaccine safety hypotheses for future basic, clinical, or epidemiologic research through review of data from existing surveillance systems. A framework should be developed to prioritize the national vaccine safety research agenda, and the plan should establish a permanent vaccine safety subcommittee within the National Vaccine Advisory Committee.

The IOM report includes recommendations for development of a national communication strategy on vaccines and immunization targeting both the public and health care professionals. There should be a process for identifying research needs to inform the national communication strategy, the report advises.

Recommendations regarding Vaccine Use and Supply include the development of strategies to eliminate financial barriers to immunization, the application of research and best practices to improve patient access, the exploration of nontraditional approaches to surveillance of disease, vaccine safety, and vaccine coverage.

Global Vaccine Issues within the new National Vaccine Plan should include engagement of U.S. federal agencies and partners in building immunization capacity in low- to middle-income countries through the provision of both expertise and financial resources, and also the endorsement of global policy frameworks to further global adherence to differential pricing in order to ensure access to needed vaccines in all countries.

Dr. Broome and the rest of the committee members do not have any conflicts of interest, according to an IOM spokeswoman. ■