

## Preface

This 1996 edition of Immunisation against Infectious Disease (the 'Green Book') almost exactly coincides with the bicentenary of Jenner's remarkable demonstration that an individual could be rendered immune to smallpox by the inoculation of James Phipps with material obtained from a cowpox vesicle. Recent changes in immunity brought about by immunisation have been equally remarkable. The 1992 edition of the 'Green Book' coincided with the introduction of *Haemophilus influenzae* b vaccine (Hib). *Haemophilus influenzae* meningitis, epiglottitis and other serious infections from this organism have now virtually disappeared from paediatric wards.

In 1992, the changing age distribution of measles was noted and some modification in immunisation strategy anticipated. Mass measles-rubella immunisation to prevent an epidemic of measles in school-age children was conducted during November 1994. The Measles/Rubella Immunisation Campaign reached over 8 million children and necessitated an enormous exercise in planning and implementation throughout the UK. It also involved a vast number of doctors, nurses and other health personnel, particularly in the school health service, and we are greatly indebted to them for its success. Susceptibility to measles in this target population has dropped dramatically and the few cases of measles since the campaign occur mostly in adults or infants too young to have been protected by immunisation. The inclusion of rubella vaccine has greatly reduced the susceptibility to rubella in males and therefore the risk to susceptible pregnant women. It is logical to follow up this campaign by introducing a two-dose strategy for MMR vaccine to prevent further accumulations of susceptible children which could sustain future epidemics of measles, and to allow the termination of the schoolgirl rubella immunisation programme. Other changes reflect the continuing importance of surveillance and of monitoring the epidemiology of infection not only in this country but world-wide: the outbreaks of diphtheria in eastern Europe and the resurgence of tuberculosis are two problems of particular concern.

The Joint Committee on Vaccination and Immunisation (JCVI) continues to pay close attention to vaccine safety. Particular care was taken to monitor and investigate the apparent adverse reactions that occurred during the Measles/Rubella Immunisation Campaign. In this edition separate chapters are devoted to adverse reactions and to the problem of anaphylaxis; and information is provided on the vaccine damage payments scheme. It is always difficult to distinguish true vaccine reactions from coincidental events in a child's life, but doctors are urged to be meticulous in reporting reactions and in obtaining the details and appropriate specimens that will help in their thorough investigation.

## Preface

I should like to record my gratitude and that of my colleagues on the Joint Committee to all those who worked on this Handbook, but particularly to the editors Dr David Salisbury and Dr Norman Begg, their contributors in the Department of Health, and to Mrs Maureen Ambler.

A handwritten signature in black ink, appearing to read 'A G M Campbell'.

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## Acknowledgements

Many people, from the Department of Health and the PHLS in particular, have contributed to this edition. We would like to thank especially Mrs Maureen Ambler for her tireless efforts in creating order out of chaos, Dr Jane Leese, Dr Hugh Nicholas, Ms Helen Campbell (Department of Health), Dr Elizabeth Miller and Ms Joanne White (PHLS) for their technical contributions.

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