Routine Immunisation

The evidence that immunisation against diphtheria with alum-precipitated toxoid (A.P.T.) slightly but definitely increased the risk of paralytic poliomyelitis led the Ministry of Health in 1957 to replace the issue of A.P.T. by that of formal toxoid (F.T.). For the same reason it frowned—but without severity—on the use of combined prophylactics for children. This September it issued to local authorities some suggestions on immunising procedure which amount to a right-about-face.¹

There is some evidence that F.T. is not a satisfactory agent for primary immunisation; and poliomyelitis is at the moment a rare disease. Moreover, vaccination against poliomyelitis makes infection after other immunising procedures unlikely. Many local authorities are already using combinations of prophylactics against diphtheria, whooping-cough, and tetanus without obviously disastrous consequences. There may be theoretical advantages in single inoculations; but mothers do not care to have their infants treated as pin-cushions, and there is evidence that some combinations give no worse, and perhaps give better, immunity. For these reasons the Ministry recommended in September the use of a combined diphtheria-pertussis-tetanus prophylactic (three doses), Salk vaccine (three doses), and vaccination against smallpox—all in the first two years of life. Immunity against diphtheria, tetanus, and smallpox can be reinforced at school and B.C.G. given after the age of 12. Two alternative schedules are suggested. In schedule P whooping-cough vaccine (in combination with diphtheria and tetanus prophylactics) is given early in life, since fatalities from this disease are commonest in the first six months. The disadvantage of this schedule is the risk of paralytic poliomyelitis induced by two toxoids and a bacterial vaccine. Schedule Q begins with vaccination against poliomyelitis and defers immunisation against the other diseases until the age of six months or more, by which time antibody production nears its maximum. The responsibility for the choice and provision of prophylactics will in future lie with the local authorities.

These proposals were no doubt welcomed both by those who hold the needle and by the mothers of those who receive it. We hope that further attention will be given to the problem of marking permanently those who have been immunised against tetanus. A serum reaction is a cheap price to pay for avoiding that disease, but active immunisation is designed to prevent both these misfortunes. The Ministry made it clear that its circular was liable to modification; and already it has authorised routine use of attenuated-virus vaccine, administered by mouth, for immunisation against poliomyelitis.²

Among the questions most often asked of a medical officer of health are those concerning immunisation, and some of these are not easy to answer pat. As a comprehensive source of accurate information we know nothing better than the Memorandum on Immunological Procedures, now issued by the War Office in a new edition.³ It is, of course, primarily concerned with the health of the soldier, but the needs of camp-followers of all ages receive attention. It lists those parts of the world where the traveller must be inoculated against yellow fever. It describes in detail the intradermal administration of t.a.b., which will be new to many and which must have saved a lot of discomfort. There are excellent descriptions of the various kinds of reaction which may follow immunisation and adequate directions for prevention and treatment. There are admirable suggestions for picking up the thread of an interrupted course of prophylaxis. There is a useful table of the expected life of immunising substances stored in the cold and at room temperature. It is, indeed, difficult to find a question which cannot be answered with the help of this very cheap book.


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A NEW IRON LUNG

Dr. W. H. Kelleher writes:

"Although implied, it was not made clear in my article of Nov. 18 that the manufacturers of my new respirator were the Cape Engineering Company Limited, whose works are in Warwick, England."