

# VACCINES

## 1. Introduction

- **Vaccine:** A biological preparation that provides **active acquired immunity** to a particular infectious disease.
- It stimulates the body's **immune system** to recognize, fight, and “remember” specific pathogens (viruses or bacteria) **without causing disease**.
- **Immunization** is the process of making an individual immune to an infection, usually by vaccination.



## 2. History

- **1796 – Edward Jenner:** Developed the first vaccine (smallpox) using cowpox virus.
- **1885 – Louis Pasteur:** Developed rabies vaccine.
- Since then, vaccines have eradicated or controlled many deadly diseases (e.g., smallpox eradicated in 1980).

## 3. Principle of Vaccination

- Based on the concept of **immune memory**.
- When a vaccine (antigen) is introduced:
  - The immune system produces **specific antibodies** and **memory B and T cells**.
  - On future exposure to the pathogen, the immune response is **faster and stronger**, preventing disease.

#### 4. Types of Immunity

Type	Definition	Example
<b>Active immunity</b>	Body produces its own antibodies after exposure to antigen	Natural infection or vaccination
<b>Passive immunity</b>	Ready-made antibodies are transferred	Maternal antibodies, immunoglobulin injection
<b>Artificial active immunity</b>	Through vaccines	Measles, polio vaccine
<b>Artificial passive immunity</b>	Through injected antibodies	Anti-rabies serum, antitoxin

#### 5. Types of Vaccines

- Vaccines can be classified by how they are made and what they contain.

##### A. Live Attenuated Vaccines

- Contain **weakened (attenuated)** form of the pathogen.
- Closely mimic natural infection → strong, long-lasting immunity.
- Usually need **only one or two doses**.

##### Examples:

- BCG (tuberculosis)
- OPV (oral polio vaccine, Sabin)
- MMR (measles, mumps, rubella)
- Varicella (chickenpox)
- Yellow fever vaccine

##### Advantages:

- Strong cellular and humoral response
- Long-lasting immunity

##### Disadvantages:

- Can revert to virulence (rare)
- Not safe for immunocompromised or pregnant individuals

##### B. Inactivated (Killed) Vaccines

- Contain **killed or inactivated pathogens**.
- Safe, but induce weaker immunity — require **booster doses**.

**Examples:**

- IPV (inactivated polio vaccine, Salk)
- Rabies vaccine
- Hepatitis A vaccine
- Cholera vaccine
- Influenza (inactivated) vaccine

**C. Subunit / Acellular Vaccines**

- Contain only specific **antigenic parts** of the pathogen (proteins, polysaccharides).
- Cannot cause disease.

**Examples:**

- Hepatitis B (recombinant surface antigen)
- HPV (human papillomavirus)
- Pertussis (acellular)
- Pneumococcal polysaccharide vaccine

**D. Toxoid Vaccines**

- Contain **inactivated bacterial toxins (toxoids)**.
- Stimulate immunity against the toxin, not the pathogen.

**Examples:**

- Diphtheria toxoid
- Tetanus toxoid

**E. Conjugate Vaccines**

- Link a **polysaccharide antigen** to a **protein carrier** to enhance immune response (especially in infants).

**Examples:**

- Haemophilus influenzae type b (Hib)
- Meningococcal conjugate vaccine
- Pneumococcal conjugate vaccine

**F. Recombinant / Genetic Vaccines**

- Use **genetic engineering** to produce antigens or viral components.

**Examples:**

- Hepatitis B (recombinant DNA)
- HPV (virus-like particles)

### **G. mRNA and Vector-Based Vaccines (Newer Technologies)**

- **mRNA vaccines:** Deliver genetic code for antigen (e.g., COVID-19 spike protein).
  - Examples: Pfizer-BioNTech, Moderna (COVID-19)
- **Viral vector vaccines:** Use harmless virus to deliver antigen genes.
  - Examples: Oxford–AstraZeneca (Covishield), Johnson & Johnson (COVID-19)

### **6. Components of a Vaccine**

Component	Function
<b>Antigen</b>	Stimulates immune response
<b>Adjuvant</b>	Enhances immune response (e.g., aluminum salts)
<b>Stabilizer</b>	Maintains vaccine potency during storage (e.g., sugars, gelatin)
<b>Preservative</b>	Prevents contamination (e.g., thiomersal)
<b>Diluent</b>	Used for reconstitution of freeze-dried vaccines

### **7. Routes of Vaccine Administration**

Route	Example
<b>Intramuscular (IM)</b>	DTP, Hepatitis B, Influenza
<b>Subcutaneous (SC)</b>	Measles, MMR, Yellow fever
<b>Intradermal (ID)</b>	BCG
<b>Oral</b>	OPV, Rotavirus, Typhoid (oral)
<b>Nasal</b>	Live attenuated influenza vaccine (FluMist)

### **8. Vaccine Schedule (Example: India's Universal Immunization Programme)**

Age	Vaccine(s)
<b>At birth</b>	BCG, OPV (0 dose), Hepatitis B
<b>6 weeks</b>	DTP-1, OPV-1, Hepatitis B-2, Hib-1
<b>10 weeks</b>	DTP-2, OPV-2, Hib-2
<b>14 weeks</b>	DTP-3, OPV-3, Hepatitis B-3, Hib-3
<b>9–12 months</b>	Measles / MR vaccine
<b>16–24 months</b>	DTP booster, OPV booster, MMR-2
<b>5 years</b>	DTP booster-2, OPV booster
<b>10 &amp; 16 years</b>	Tetanus, Diphtheria booster (Td)

*(Schedules may vary by country.)*

## 9. Combination Vaccines

- Contain antigens from multiple diseases in one injection → reduces number of shots.

### Examples:

- DTP (Diphtheria, Tetanus, Pertussis)
- Pentavalent (DTP + Hepatitis B + Hib)
- MMR (Measles, Mumps, Rubella)

## 10. Cold Chain System

- Vaccines must be kept within a specific **temperature range (usually 2–8°C)** to maintain potency.
- **Cold chain** includes all equipment and procedures for safe storage and transport.

### Components:

- Cold rooms, refrigerators, vaccine carriers, ice packs, cold boxes.
- **Never freeze:** Hepatitis B, DTP, Tetanus toxoid (damage risk).

## 11. Adverse Effects of Vaccination

Most vaccines are safe, but some side effects can occur:

Reaction	Example / Description
Local	Pain, redness, swelling at injection site
Systemic	Mild fever, malaise
Allergic	Rash, urticaria, anaphylaxis (rare)
Vaccine-derived infections	Rare (e.g., OPV reversion → vaccine-derived polio virus)

## 12. Contraindications

Type	Examples
Absolute	Severe allergic reaction to previous dose, anaphylaxis
Temporary	Moderate/severe acute illness, fever, pregnancy (for live vaccines)
Relative	Immunodeficiency (avoid live vaccines)

#### 14. Challenges in Vaccination

- Vaccine hesitancy and misinformation
- Cold chain maintenance issues
- Limited access in developing countries
- Mutation of pathogens (e.g., influenza variants)
- Adverse event fears

#### 15. New and Emerging Vaccines

Vaccine	Target Disease
mRNA vaccines	COVID-19, Influenza (in development)
Dengue vaccine (CYD-TDV)	Dengue fever
Malaria vaccine (RTS,S/AS01 – Mosquirix)	Plasmodium falciparum
RSV vaccine	Respiratory syncytial virus
Ebola vaccine (rVSV-ZEBOV)	Ebola virus