



Rota Talk NEWSLETTER

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Follow COVID appropriate behaviours everyday and help keep COVID-19 away

- Wear Mask** (Illustration of a person wearing a face mask)
- Wash your hands frequently** (Illustration of hands being washed with soap bubbles)
- Maintain physical distance** (Illustration of two people standing 2 meters / 6 feet apart)
- Avoid crowded places** (Illustration of a group of people in a crowded setting)

Rotavirus vaccine: product switch

The new Rotavirus vaccine (RVV) product- Rotasil liquid will now be introduced in the Universal Immunization Programme (UIP) in few States and Union Territories (UTs). Rotasil liquid is indigenously manufactured and comes in a single dose packaging. For the new RVV liquid product, only the presentation has changed, with the vaccine schedule, route of administration, vaccine storage, contraindications and reporting and recording remaining the same. The national level training of trainers for the product switch has already been conducted. The selected states/ UTs will gradually switch to the new product after the currently used RVV product gets stocked out.



Training for the product switch in Gujarat



Discussion Point	Rotavac	Rotasiil Lyophilized	Rotasiil Liquid
Type of Product	Liquid frozen	Lyophilized	Liquid
Reconstitution	Not needed	Needed	Not needed
Dose	5 drops	2.5 ml	2 ml (entire quantity in the tube)
VVM	Type 2	Type 30	Type 7
Dose schedule	3 doses at 6, 10 and 14 weeks	3 doses at 6, 10 and 14 weeks	3 doses at 6, 10 and 14 weeks
Presentation	5 dose/vial	2 dose/vial	1 dose/plastic tube

The oral liquid RVV is the new product which will be introduced in all states/UTs which are currently using the lyophilized RVV and in few states/UTs which are currently using the liquid frozen RVV. Programmatically, all these vaccine products can be used interchangeably.



Rotavirus vaccine (RVV) rollout under Universal Immunization Programme

Message from
SEPIOs

Message from SEPIO Goa

The nation-wide roll-out of Rotavirus vaccine (RVV) under the Universal Immunization Programme (UIP) of India has been an example of the commendable association of the Government of India and all the stakeholders.

The efficacious Rotavirus vaccine (RVV) against the dreadful Rotavirus diarrhoea was launched in Goa during the fourth phase of the RVV expansion project, in the month of July 2019. Since then the beneficiaries are being administered with all the three doses of RVV effectively.

To track the RVV coverage, monitoring by the State health team of Goa and the partner agencies is being carried out. Constant and sound monitoring is the most significant initiative taken by the State to ensure uninterrupted delivery of RVV to beneficiaries.

While 49,286 doses of RVV were administered from April 2020 to March 2021, in the year 2021-22 from April to October state has administered 21,621 doses of RVV. The successful implementation of RVV in the state since the launch has been attributed to the outstanding efforts of all the health officials, staff and the frontline health workers immunizing the under 5 children with RVV. This is a remarkable achievement for the state that will reduce Rotavirus related diarrheal morbidities and mortalities.

State is looking forward for switch to the easy to administer, single dose liquid Rotasiil vaccine from the current RVV lyophilised vaccine once we deplete the existing vaccine stock and fresh stock of the single dose, liquid Rotasiil vaccine is received.



Dr. Rajendra M. Borkar
SEPIO Goa

Message from SEPIO Gujarat

The Universal Immunization Programme (UIP) of India launched in 1985 is one of the largest programmes in the world. In an attempt to expand the basket of vaccines under UIP, a new vaccine namely, Rotavirus vaccine (RVV) offering protection against Rotavirus diarrhoea in under five children was introduced in the UIP by Government of India (GoI) through a seamless public-private partnership.

The vaccine was introduced in the country during 2016-2019 in a phased manner. RVV was rolled out in Gujarat during its 4th phase following the accomplishment of the cascade of trainings of healthcare workforce. Extensive efforts of our frontline workers continued amidst the unprecedented COVID-19 pandemic situation in the State of Gujarat to protect the children against vaccine preventable diseases (VPDs).

The tremendous efforts of the State health department to conduct immunization sessions regularly and effectively adopting all covid appropriate behaviours have resulted in the increased coverage of RVV. Total 6,60,592 doses of RVV administered in April to June 2021 while 6,78,841 doses of RVV administered in July to Sept 2021. The vaccine will impeccably reduce the rotavirus diarrhoea morbidity and mortality.

The commitment of GoI and the State health department to immunize all the children under five-years will definitely turn out to be a landmark in the history of the disease.



Dr. N.P. Jani
SEPIO Gujarat



Message from SEPIOs

Message from SEPIO Punjab

Ensuring healthy survival for the newer generation is the utmost priority of the Government of Punjab. Protection of children against the vaccine preventable diseases (VPDs) with tireless routine immunization (RI) services is a key to achieve the goal of healthy and safe childhood. So, the State health department of Punjab with the constant support of the frontline healthcare workers prioritized its RI services amid the COVID-19 pandemic as well ensuring the incorporation of all covid appropriate behaviours.

The continuous immunization sessions are held to achieve maximum coverage of all vaccines under RI including the RVV vaccine that rolled out in the state during the fourth phase of its launch. 78,630 doses of RVV 1, 81,489 doses of RVV 2 and 85,950 doses of RVV 3 were administered from April to June 2021, and for the next quarter, 88,820 doses of RVV 1, 78,028 doses of RVV 2 and 77,941 doses of RVV 3 from July 2021 to September 2021.

Refresher trainings to evaluate and upgrade the knowledge of the frontline workers regarding RVV are also being remarkably conducted by the State health department. Extensive monitoring of the session sites and the planning units by the state health officials to keep a track of the number of doses for RVV received and administered is also being done regularly. These steps being undertaken at all levels in Punjab State is paving the way forward to achieve high RVV coverage, thereby ensuring reduction in diarrhoeal deaths.



Dr. Balwinder Kaur
SEPIO Punjab

Innovations

Vaccine Vial Handling at Immunization Session Sites

Vasai Virar is a densely populated corporation in Palghar district, near Mumbai. Rani Deu Thetle, an ANM works as a vaccinator in the Urban PHC (UPHC) of Sarvoday Vasahat in Nalasopara. Vasai Virar corporation, being a densely populated area, the beneficiary load at routine immunization session sites is often high.

At such times, Rani used to face various difficulties. The handling of vaccine vials at the session site used to be a major challenge for her. The vaccine vials kept on the tray near the ice pack often used to topple down. This not only increased the chances of septum contamination but also made it difficult for her to locate the appropriate vial quickly. A lot of her time used to be spent in finding the right vial.

Immunization Field Monitor, Shri Bharat Gadve, during his routine monitoring visit, witnessed these challenges of Rani. He shared with her some pictures on placement of vials for proper handling of vaccines at session sites. She requested her

husband, who works in the business of acrylic materials to make boxes for proper placement of vaccine vials at the session sites. The acrylic material is sturdy and durable. Hence, he chose acrylic material and made two to three different models with round cut outs for vaccine vials placement. He also denoted those rounds cut outs with the names of the vaccine vials. He made three different models and Rani tried those models and continued with the best suited model for the placement of vaccine vials for immunization sessions.

This model, lets her find any vaccine vial easily and there no possibility of any error in vaccine administration. Now, the vaccine vials sit tall and don't fall often and there is no risk of contaminating the septum of vial.



Her model has become so famous, that at more than 200 session sites in Palghar district, one can find these little boxes which help the ANMs in proper placement of vaccine vials.

“COVID cannot stop me from serving my community”

Field Champions

Says Tmt. G. Indhumathi, as she continues her routine work of vaccinating pregnant women and children. She is Village Health Nurse, at Light House Kuppam health centre. It is located in Minjur Block of Thiruvallur district in Tamil Nadu. The community she serves depends primarily on fishing for their livelihood. In this community there was sub optimal utilization of primary health care services, including vaccination.

She has been working in this health centre for a couple of years now and has gained their confidence. They trust her and now they reach out to her for health care services. This fishing settlement has around 9,000 population. Through the pandemic, due to the unavailability of public transport, she used her own two-wheeler to go and vaccinate women, children and care for COVID patients. She convinced her hesitant family and got their support to continue her work. She had to work long hours to ensure that the community continues to receive the services even during the peak of the pandemic. During this period, she has vaccinated 155 children with all antigens given under the routine immunization programme, including Rotavirus vaccine. She has also registered and provided ante natal services to 84 pregnant women.

During the pandemic, she provided home based care to the 41 people in the fishing community who had tested positive for COVID. In January 2021, when the COVID vaccination started, the community was initially reluctant to get themselves vaccinated. She advocated with the local leaders and village panchayat head and successfully convinced the community to receive COVID vaccine.

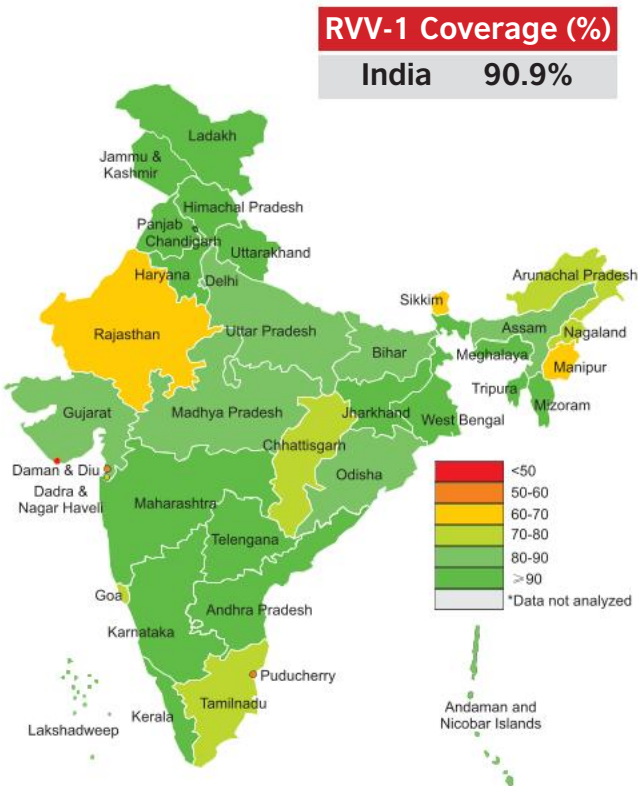


Tmt. G. Indhumathi

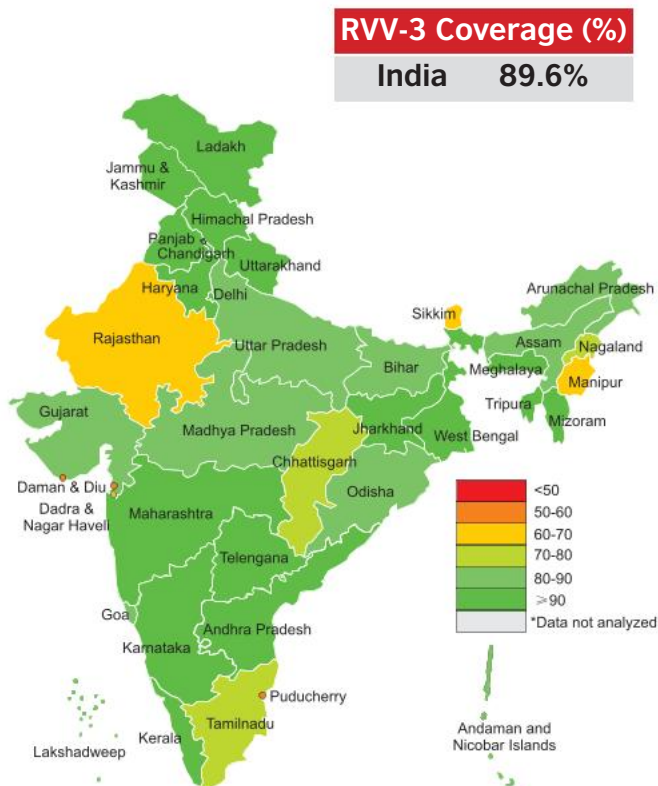


Tmt. G. Indhumathi in action

Rotavirus vaccine coverage dashboard RVV-1 dose (Nov. 2020 to Oct. 2021)



RVV-3 dose (Nov. 2020 to Oct. 2021)



Mind Power Game:

Solve the Riddle to find the answer.

- The first letter is in trump and not in stump
- The second letter is in route and in loop
- The third letter is in tough and not in rough
- The fourth letter is in amend and not in mend
- The fifth letter is in vial and not in trial
- The sixth letter is in influx and not in enflux
- The seventh letter is in rust and not in ribs
- The eighth letter is in unite and not in infinte
- The ninth letter in sea and not in tea



For Answer

Please scan the QR code



ROTA QUICK FACTS

- ✓ The survival of Rotavirus is better in cooler conditions with low relative humidity. Therefore, a relative drop in humidity and rainfall combined with drying of soils might increase the aerial transport of dried, contaminated faecal material containing Rotavirus. (Kumar et al., 2020).
- ✓ Prevalence of Rotavirus in children with hospitalized gastroenteritis declined after RVV introduction, reaching 13.3% by the third-year post-vaccine introduction, indicating the effectiveness. (Varghese et al., 2021).

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