



Kenya Medical Association

NATIONAL EXECUTIVE

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Framework for the Creation of A National Policy on Adolescent & Adult Vaccination - A Medical Round Table Engagement with Pfizer Laboratories Limited, Kenya

The Kenya Medical Association is the umbrella professional body for doctors registered in Kenya. It was founded in 1968 with a twin mission: to champion for the doctor's welfare and quality healthcare in Kenya. KMA considers health policy advocacy, development, and implementation a key focus area in the 2022-2026 strategic plan. This key strategic goal is driven through the Policy and Advocacy committee within the Association.

The Kenya Medical Association acknowledges that:

The current vaccine schedule covers up to age 18 months for KEPI then additional two dose HPV between ages 9 and 10.

The KEPI vaccine schedule has been very effective in managing endemic and epidemic prone childhood illnesses and worked towards reducing infant mortality rates.

As people grow older, they are faced with waning immunity as a result of:

1. Decreasing immunity from childhood vaccines
2. Decreased natural immunity that occurs with age
3. Increased susceptibility due to immunosuppressive conditions, pregnancy, risks of travel, and intravenous drug use.
4. Increased risk exposure from lifestyle choices e.g. travel, occupation
5. And the risk of morbidity and mortality worsened by burden of drug resistant and multidrug resistant organisms

These clustered risks, present a separate challenge than exists with childhood illness as there are multiple clusters with variable risks. Additionally due to the increased mobility of adults there is increased risk of spread of diseases across counties and borders.

Many of the vaccine preventable diseases in adulthood cause significant morbidity and often times mortality, which have a bearing on Disability adjusted life years and Years of Life lost. Vaccines touted as the greatest invention of the 21st Century generate good outcomes for people, populations and economies.

There may be no global approach to adult vaccination, but there is an urgent need to safeguard these at-risk populations from prevalent illnesses. Here we make mention of the more common Vaccine preventable conditions.

Group at risk	Vaccine available
Over 65	Meningococcal, Pneumococcal, Influenza, Covid
Immunosuppressed e.g. steroid users, Diabetes, Cancer, chronic liver and kidney disease	Meningococcal, Pneumococcal, Covid, Influenza, Hep A and B
Cardiovascular disease	Pneumococcal, Covid

Intravenous drug users, MSM, CSWs	Hepatitis B
High risk workers e.g. Hospital workers	Hepatitis B
Pregnancy	Hepatitis B
Booster shots	Tdap-IPV

Recommendation:

1. Develop standalone adult vaccination policy that captures the need to make vaccines available for at risk groups, how the vaccines will be accessed and distributed.
2. Establish a registry for high-risk clusters.
3. Need for sensitization campaign on the role of vaccines to prevent hesitancy.
4. Establish effective funding mechanism to ensure continuous access to vaccines as cost is a barrier to vaccine uptake.



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