### IN-CONFIDENCE

JCVI WORKING PARTY ON THE INTRODUCTION OF MEASLES, MUMPS AND RUBELLA VACCINE

NOTE OF MEETING HELD ON 11 FEBRUARY 1988 IN ROOM 63 IN HANNIBAL HOUSE

Present:

Sir John Badenoch - Chairman

Dr C Bowie

Dr C Burns

Dr N Begg

Mr R Clarke

Mr J Flaherty

Dr M Judd

Dr Z Kurtz

Dr C Miller

Dr E Ross

Dr J W G Smith

From DHSS:

Dr D M Salisbury

Miss D M Horridge

Mr L T Wilson

Mr P J Martin

#### 1. APOLOGIES AND ANNOUNCEMENTS

The Chairman reminded those present that the proceedings of the Working Party were confidential. He welcomed Mr Clarke who was attending on behalf of the NRC, Mr Flaherty from the HEA and Mr Reid from DHSS Information Division. Apologies had been received from Dr Jones and Dr Zealley. Dr Jones had indicated that Dr Walker would in future attend in his place.

2. MINUTES OF THE MEETING HELD ON 8 OCTOBER 1988

The following amendments were agreed:

- paragraph 4, "haemourhage" was corrected to "haemorrhage"
- paragraph 4, "update" was corrected to "uptake"
- paragraph 6, "community" was corrected to "immunity"
- paragraph 12, "Colindele" was corrected to "Colindale"
- paragraph 13, "Subjected" was corrected to "Subjects"

# 3. MATTERS ARISING

Dr Bowie reported that it had been decided diaries should be continued after the 1000 mark had been reached. Dr Miller reported that saliva tests had now been started in Fife.

#### 4. LICENSING OF VACCINE

Merieux and SKF had both submitted applications for product licences. MSD had been granted a licence which had lapsed; its vaccine contained a different strain of mumps (Jeryl-Lyn).

### 5. MMR VACCINATION IN CANADA

Members read a report of cases of mumps encephalitis which had been associated with MMR vaccine containing the URABE strain of the mumps virus. The Canadian authorities had suspended the licences of MMR vaccines containing the URABE strain, but Dr Salisbury considered that the data on which the decision had been based was slender. It was agreed that North Hertfordshire would use the Jeryl-Lyn vaccine, if it was available from MSD, to obtain comparative data. A statement would be prepared in anticipation of any adverse publicity which might arise.

### 6. HEALTH DIARIES

Dr Miller reported that a very high proportion of children were being followed up and said that data were similar for children in all three districts. 12% of children had been seen as a result of post-vaccination symptoms; this was a very similar rate to the single-antigen measles vaccine. 7 children out of 4000 had been admitted to hospital, which was considered a low rate. 8 out of 3868 children had suffered convulsions, again a rate similar to that encountered with the single-antigen measles vaccine.

### 7. PUBLICITY

A paper prepared by the MMR Publicity Group was presented, by Mr Flaherty and Mr Reid, for the Group to discuss and to approve the general approach it contained. Dr Ross considered that the priority was to get the message across to doctors, health visitors and other nurses. It was agreed that the Publicity Group would be extended to include Drs Bowie, Judd, Miller and Walker to help prepare material for professional groups. Mr Clarke would join the group when it considered the preparation of publicity material for the general public.

### 8. QUESTION AND ANSWER PAPER

Members considered that the paper needed to be clearly addressed. It would be useful as raw material for other publicity but needed to show its authorship in order to carry authority.

### 9. FUNDING SITUATION

£800,000 had been set aside for publicity and £1.4 million had been set aside to cover the period October 1988 - March 1989 to assist health authorities with increased vaccine costs, the education of professionals and for the re-programming of child health computers. Members noted that the Statement of Fees and Allowances would need altering to include an item of service payment for MMR.

# 10. ANY OTHER BUSINESS

There was no other business.

# 11. DATE OF NEXT MEETING

The next meeting was arranged for Tuesday, 17 May 1988 at 10.30am.