

02-10

## STATEMENT OF POLICY

### ASSURING THE NATION'S VACCINE SUPPLY AND DISTRIBUTION SYSTEM

The National Association of County and City Health Officials (NACCHO) urges the federal government to develop an integrated set of policies that will assure an uninterrupted supply of vaccines needed for sustaining and improving the immunization rates of the population of this nation. NACCHO also urges recognition of and support for the unique role local health departments play in this endeavor.

NACCHO urges that the federal government:

- Embark on a bold, far-reaching examination of how the nation can ensure a reliable supply of essential vaccines through federal purchase and distribution.
- Engage in a candid public discussion about needed public-private collaboration and how that can protect against inequities in coverage due to unequal access to vaccines and vaccine administrators;
- Encourage transparency in communications between the federal government and state and local health officials, including complete disclosure of what is known and not known about vaccine supply; and,
- Promote flexibility in implementation so that local health departments can make decisions that best meet the needs of their varied communities;

NACCHO urges the federal government to develop a comprehensive set of federal policies to:

- Minimize the likelihood of vaccine shortages from recurring and to prevent any future shortages;
- Increase the supply and demand for vaccines;
- Prevent and correct geographic maldistribution of vaccines; and,
- Assure availability of vaccines to individuals at high risk when vaccine shortages cause limitations on usage.

In addition, NACCHO urges on-going federal government support for local health departments to contribute to an assured and sustained vaccine supply as only they can by supporting their capacity to:

- Monitor vaccine availability at the local level;
- Assure that access to vaccines are equitable among all segments of the population; and
- Intervene when necessary to correct mal-distribution, particularly during shortages and supply disruptions.

### **Justification**

The use of vaccines has transformed the health of individuals and communities in the United States by converting serious infectious diseases, often with epidemic potential, into diseases of much reduced incidence



and impact.<sup>1-2</sup> Vaccines coupled with immunization programs have contributed immensely to public health practices and are a cost-effective public health tool. Shortages of childhood and adult vaccines have recurred consistently in recent years.<sup>3-6</sup> Multiple factors can and have converged to cause shortages in vaccines available to local communities. These include production problems, reduction in the number of vaccine manufacturers; increased number of vaccines; increased costs to purchase vaccines; and unexpected overwhelming demand for certain vaccines.<sup>7-8</sup> Timely and uninterrupted access to vaccines is a critical component in the fight to prevent the resurgence of debilitating diseases such as mumps, measles, rubella, pertussis, polio, tetanus, and diphtheria, as well as the annual threat of influenza.

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<sup>1</sup> Roush SW, Murphy TV and the Vaccine-Preventable Disease Table Working Group. Historical comparisons of morbidity and mortality for vaccine-preventable diseases in the United States. JAMA. 2007; 298(18):2155-2163

<sup>2</sup> Ten great public health achievements – United States 1900-1999. Retrieved from <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm4850bx.htm> October 11, 2010

<sup>3</sup> Sloan, F., Berman, S., Rosenbaum, S., Chalk, R., and Giffin, R. The Fragility of the U.S. Vaccine Supply. NEJM. 2004. 351(23):2443-2447.

<sup>4</sup> Heinrich, Janet. Flu Vaccine: Recent Supply Shortages Underscore Ongoing Challenges. Testimony Before the Subcommittee on Health and the Subcommittee on Oversight and Investigations, Committee on Energy and Commerce, House of Representatives. United States Government Accountability Office. November 18, 2004

<sup>5</sup> Jacobsen SH, Sewell EC, Proana RA. An analysis of the pediatric vaccine supply shortage problem. Health Care Manag Sci. 2006; Nov 9 (4):371-389

<sup>6</sup> Hinman AR, Orenstein WA, Santoli JM, Rodewald LE, Cochi SL. Vaccine shortages: history, impact, and prospects for the future. Annu Rev Public Health. 2006; 27:235-259

<sup>7</sup> Hammer LD, Curry ES, Harlor AD, Laughlin JJ, Leeds AJ, Lessens HR, Rodgers CT, Granado-Villar DC, Brown JM, Cotton JH, Gaines BM, Gambon TB, Gitterman BA, Gorski PA, Kraft CA, Marino RV, Paz-Soldan GJ, Zind B, and Committee on Practice and Ambulatory Medicine, Council on Community Pediatrics. Increasing immunization coverage. Pediatrics. 2010. Jun; 125(6):1295-1304

<sup>8</sup> Gellin B, Shen A. “*Financing Vaccines: Cornerstone of Prevention.*” Pediatrics. 2009. 124(Supplement 5): S457-S458

## **Record of Action**

*Based on Resolution 02-10, proposed by the Immunization Subgroup of the Community Health & Prevention Advisory Committee*

*Adopted by NACCHO Board of Directors, November 10, 2002.*

*Revised July 14, 2004*

*Revised by May 2005.*

*Revised July 2006*

*Revised October 2010*