PHILIPPINE MEDICAL ASSOCIATION (Letterhead)

PMA STATEMENT ON THE DENGUE VACCINE CONTROVERSY

Letters of inquiries were received by the PMA in connection with the debates now going on about the Dengue controversy and thus this official PMA Statement. In the process of screening medicines (including vaccines) to be listed in the Philippine National Formulary (PNF), the Philippine Medical Association is represented in the DOH's National Center for Pharmaceutical Access and Management-Formulary Executive Council (NCPAM-FEC) in the persons of Dr. Bu C. Castro and Dr. Minerva Calimag (two former PMA Presidents). It is best therefore that the designated spokesperson of the NCPAM-FEC shall give the statement in connection with the FEC's deliberation on the vaccine DENGVAXIA.

But moving on, members of the Philippine Medical Association, most particularly the pediatricians, are still coordinating with the relevant local and international health agencies (experiences in the use of the vaccine in Brazil, Mexico, etc) on the accurate and relevant data for a clearer picture of the current situation given the different expert opinions on all sides of the controversy at the same time that the Philippine Medical Association adopts the position of the Philippine Society for Microbiology and Infectious Disease (PSMID) reiterated partly in this statement as follows -

- There shall be a program of long-term follow-up and a creation of a national registry of patients who have received at least one dose of Dengvaxia. These patients should be monitored regularly for signs and symptoms compatible with dengue for at least 6 years and they shall be advised to consult any physician for signs and symptoms of dengue for proper management, work-up, and immediate notification to health authorities.
- 2. It is recommended that the gov't shall determine *Seroprevalence* of dengue in representative samples across geographic areas and age groups, the identified target population for dengue vaccination.
- For those who have yet to complete the 3 doses, they are advised to wait for further advisory from the Department of Health, pending review of the intention-to-treat analyses of the long-term efficacy of the vaccine.
- 4. For those who intend to be vaccinated, a history of past dengue infection should be determined, and the option of *Serotesting* prior to vaccination should be offered and well explained. Risks and benefits of immunization should be

discussed with the patient prior to vaccination, as well as the risks of not being immunized.

5. It is recommended that there shall be an independent review of the cost effectiveness, efficacy and safety of drugs that are important aspects of patient safety. Right now this is the responsibility of the NCPAM-FEC which is under the Department of Health.

As the PSMID has aptly emphasized, there is no simple solution to preventing dengue. Thus, to have a sustainable program in preventing dengue, appropriate and timely clinical management, laboratory surveillance and prevention efforts such as expansion of disease surveillance to include the communities (especially in the Barangay level) and the private sector, vector control, and strengthening of epidemic response at all levels, should always be emphasized.

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