

## **FRANCE**

The French vaccination program is under the responsibility of the Ministry of Health, for the setting up of the immunisation schedule and the regulatory as well as organisational aspects of the implementation of the vaccination activities. Several state agencies have a specific mandate within the vaccination program : The InVS is responsible for the epidemiological surveillance of vaccine preventable diseases, the evaluation of vaccine coverage and the a priori evaluation of the relevancy of the introduction of new vaccines into the schedule. The AFSSAPS is responsible for the marketing authorisation procedure at national level and the post-marketing pharmaco-vigilance activities. The INPES is in charge of the promotion of vaccination and of carrying out studies in the general population or among health professionals regarding attitudes and practices towards vaccination. All the information and analysis generated by these agencies and sometimes by other private or public institutions are brought to the Advisory board on Immunisation (CTV), a permanent working group of the High Committee of Public Hygiene (CSHPF) in charge of proposing each year to the Ministry of health a revised immunisation schedule.

The schedule concerns all age groups even if most vaccines are directed towards infant or young children. Most vaccination are recommended, although the oldest ones, namely BCG, diphtheria, tetanus and poliomyelitis vaccinations remain mandatory as an inheritance of past.

The schedule is set at national level and applies to the whole country. There is no local decision power enable to modify it. Even in the case of an outbreak justifying a local vaccination campaign (such as Men C vaccination in an hyperendemic department), the decision is taken at the ministry level, in liaison with local health authorities.

Most of the vaccinations are administered in the private sector. The proportion of infant immunisations performed by private practitioners is around 85 %, with almost an equal share between paediatricians and GPs. The remaining 15 % are performed in public maternal and child health (MCH) clinics, covering children up to 6 years of age. These clinics are under the responsibility of the local (departmental) authorities and their geographical distribution depends on the priority given locally to preventive care. Similarly, some departments have also invested in immunisation clinics for older children and adults. In all public clinics, mandatory vaccines are given free of charge and MCH clinics usually also offer at least some of the recommended vaccines free of charge. Since January 2006, the responsibility of the limited vaccination activities performed through the public sector, for people older than 6 years of age, have been moved to the State level. For vaccinations performed in the private sector, the Social Security Scheme reimbursed 65 % of the cost of the vaccines, the remaining being borne either by the family or its voluntary complementary insurance (covering 80 % to 85 % of the population). The only exceptions are MMR and influenza vaccination respectively for children under 13 years and for elderly persons or patients with certain chronic diseases for which these vaccines are offered free of charge, even in the private sector. Promotion of these 2 vaccinations is carried out by the National Health Insurance Scheme.

The choice of the products, for those vaccinated in the private sector, is left to the prescribing physician. Currently 5 vaccines manufacturers have at least one product marketed in France. A comprehensive vaccination guide, has been distributed to all

vaccinators in 1995, 1999 and 2003. An updated version, which will be modified each year as the vaccination schedule evolves, has just been posted on the MOH and the INPES websites and will be distributed to the physicians on request. It can be found at [www.sante.gouv.fr/htm/dossiers/](http://www.sante.gouv.fr/htm/dossiers/) or

<http://www.inpes.sante.fr/CFESBases/catalogue/pdf/927.pdf>

The full immunisation schedule is available at

[http://www.invs.sante.fr/beh/2006/29\\_30/beh\\_29\\_30\\_2006.pdf](http://www.invs.sante.fr/beh/2006/29_30/beh_29_30_2006.pdf)

It describes the changes since last year, the recommendations for the general population and for certain groups (occupational vaccinations, vaccination recommended for specific target groups or individuals). It includes the recent statements of the CTV which have led to the changes in 2006. The table below shows the latest version of the general immunisation schedule.

French 2006 Immunisation Schedule – General recommendations

Age	Vaccines <sup>1</sup>									
	BCG	Diphtheria tetanus	Poliomyelitis	Pertussis ( <i>acellular</i> )	Hib	Hep B	Pneumo coccus <sup>2</sup>	Measles, mumps, rubella	Influenza <sup>b</sup>	
Birth	BCG <sup>1</sup>					Hep B <sup>2</sup>				
2 months	BCG <sup>1</sup>	DT	Polio	aC	Hib	Hep B	Pn7			
3 months		DT	Polio	aC	Hib		Pn7			
4 months		DT	Polio	aC	Hib	Hep B	Pn7			
9 months								Measles – mumps - rubella <sup>3</sup>		
12 months							Pn7	Measles – mumps - rubella <sup>3</sup>		
16-18 months		DT	Polio	aC	Hib	Hep B		Measles – mumps - rubella <sup>3</sup>		
24 months							catch- up	catch-up (2 doses)		
< 6 years										
6 years		DT	Polio							
11-13 years		DT	Polio	aC						
16-18 years	dT	Polio					catch-up (1 dose)			
18-26 years		dT (every 10 years)	Polio (every 10 years)	aC <sup>4</sup>						
> 26 years							Rubella <sup>5</sup>			
> 65 years		dT (every 10 years)	Polio (every 10 years)					Influenza ( <i>yearly</i> )		

<sup>1</sup> Grey boxes indicate vaccines existing as combined vaccines

<sup>2</sup> Influenza and Pneumococcal (Pn23) vaccinations are also recommended for all age groups for individuals with certain underlying conditions

1. BCG vaccination must be given to high risk infants during the first weeks of life and is mandatory before starting collective life (at the latest at 6 years)
2. Hepatitis vaccination must be given at birth for infants born to HBs Ag positive mothers
3. MMR vaccination includes 2 doses : for children in day-care centers, at 9 months and 12-15 months. For other children, the first dose at 12 months, and the second dose at least one month after, but not later than at 24 months of age.
4. For certain categories of health professionals and adults that may become parents in the following months or years
5. For unimmunised women in child-bearing age