

LATVIA

1. According to the Epidemiological Safety Law the Cabinet determines against which infectious diseases the vaccination of persons is obligatory, as well as the procedures for such vaccination and the target groups for such vaccination.

2. Vaccinations is organized and implemented by vaccination institutions (health facilities (mostly GP's practices), which conform to the mandatory requirements specified in regulatory enactments, educational institutions, as well as other undertakings (companies) and institutions, which conform to the mandatory minimum security requirements for performing vaccinations), and the State supervision and control is provided by the Ministry of Health and authorities thereof.

3. Since 1997, the vaccination schedule in Latvia provides for vaccination against 10 infections. According to the vaccination schedule (see below) accepted by the Cabinet vaccination is obligatory for children – against tuberculosis, diphtheria, tetanus, whooping cough, poliomyelitis, measles, rubella, mumps, Hib infection, hepatitis B.

4. According to the Cabinet Regulation No. 330 "Vaccination Regulations":

- Vaccination is obligatory also for adults – against diphtheria, tetanus and for children and adults – against rabies after contact with animals or humans who are ill or are suspected of being ill with rabies. Expenses for these vaccinations are covered from the state budget.
- In the tick-borne encephalitis highly endemic areas the children less than 18 years of age are vaccinated against tick-borne encephalitis. Expenses for these vaccinations are covered from the state budget.
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5-6. The Latvian Childhood Vaccination Schedule as on July 2006 (the same for the whole country)

	DTaP ¹	IPV	Hib	HepB	OPV	MMR	DT	dT	BCG
Birth (0-12 h)				Yes					
Birth (4-5 days)									Yes
1 month				Yes					
3 months	Yes	Yes	Yes						
4 1/2 months	Yes	Yes	Yes						
6 months	Yes	Yes	Yes						
6-8 months				Yes					
15 months						Yes			
18 months	Yes				Yes				
7 years					Yes	Yes	Yes		
12 years						Yes ²			
14 years				Yes ³	Yes			Yes	

¹ DtaP-IPV-Hib is given as the 1st, 2nd and 3rd dose.

² Vaccination to all previously unvaccinated girls and re-vaccination of girls who have only been vaccinated once before.

³ 3 doses for non-vaccinated adolescents.

7. According to the Cabinet Regulation No. 330 "Vaccination Regulations":

- In performing vaccinations a medical practitioner has a duty to explain importance of vaccination and if the vaccination is not included into Immunization schedule (not obligatory vaccinations) to suggest immunization to the risk group persons:
 - according to the individual risk or medical indications against influenza, tick-borne encephalitis, hepatitis A, hepatitis B, pneumococcal infection, pneumococcal infection, chicken-pox, rotovirus infection;
 - to prevent CRS — for women of childbearing age who previously have not had rubella.
- For preventing occupational infections vaccination of employees shall be mandatory against the following infectious diseases: hepatitis B, rabies, tick-borne encephalitis and yellow fever. Expenses for these vaccinations are covered by employers.

8. All functions of vaccine procurement are shared between different agencies which are under jurisdiction of the Ministry of Health. Since 2001, the process of purchases has been separated from the monitoring of the Immunization program. Health Compulsory Insurance State Agency (HCISA) is responsible for purchasing of vaccines used in the official immunization program in the country.

9-10. Most of the vaccines are available on the private market. Vaccination institutions have rights to perform vaccinations for a charge utilizing vaccines, which have been acquired outside of the State procurement if the person to be vaccinated or his or her legal representative so agrees. In such cases medical practitioners have a duty to inform the patients regarding the opportunity to be vaccinated free of charge with other vaccines, if such an opportunity exists. There are no local vaccine manufacturers.

11. Vaccines included in the official program (obligatory vaccinations) are provided to the target population free of charge. Expenses, which are associated with obligatory vaccination, are covered from the State budget. Vaccinations which are not determined by the Cabinet are voluntary, individual and all expenditures relating to such are covered by the vaccinated person, or his or her employer, or other natural or legal persons. Payment for health care facilities is made through a system of contract between the medical institution and the Health Compulsory Insurance State Agency.

12. There are no significant differences in immunization coverage across sub-national areas for childhood vaccinations although the coverage of adult population by dT vaccine is not so homogeneous in different districts.

13. The State Public Health Agency (PHA) is under jurisdiction of the Ministry of Health and is responsible for monitoring of coverage, forecasting and planning of annual vaccine requirements and epidemiological surveillance of infectious diseases.

14. Data on vaccination is available in Latvian in the web site of the State Public Health Agency (www.sva.lv).

More information on the childhood vaccination schedule in Latvia can be obtained from the Public Health Agency, Department of Epidemiological Surveillance of Infectious Diseases, 7 Klijanu Street, Riga, LV-1012, Latvia, tel.: +371 7081521, fax: +371 7339006, e-mail: jurijs.perevoscikovs@sva.lv.