

## RUBELLA AND CRS ELIMINATION IN THE AMERICAS

**What are the potential benefits of the rubella elimination initiative in the development and strengthening of health services?**

1. Reduce CRS leading to financial savings
2. In the prevention of CRS achieve savings to health systems in terms of long term care – twice amount of funds to support affected children – acute cases, long term care – double the amount of funds to support affected children – acute cases; long-term care
3. Savings can be put into other aspects of health services
4. Also strengthening technical competence within health system for other congenital anomalies
5. strengthening infrastructure and putting systems in place for diagnostic capabilities, etc. Will extend beyond rubella and other diagnostic initiatives

**Which are the opportunities and mechanisms for horizontal work and interprogrammatic work..?**

1. Strengthening of infrastructure – pediatricians and OBYS, etc.
2. Opportunities for leaning in both areas
3. Other opportunities that exist, surveillance program; women's health, etc.
4. Bridge into adolescent health and men's health; family health; interprogramatic approach; Horizontal work and interprogramtic work
5. standardized and implement guidelines for laboratory procedures
6. More indepth and collaborative procedures including certain NGOs, (society for blind, deaf etc); also collaboration between govts, corporate and civil sectors
  - collaboration to involve targeting specific sectors in elaborating specific policies and programs re vaccination of workers

**How should the private sector participate and which could be the mechanism to integrate it into immunization activities as well as in rubella and CRS surveillance**

1. Pvt sector should be part of national advisory group and their inter-agency collaborative committee
2. Gaining free access to vaccines
3. Encourage corporate sector to partner in financing/sponsoring supportive activities

**What other main elements should be considered to make this a successful initiative in the Americas?**

1. Strengthening all other aspects of the process e.g. transportation; supply management; logistics; organization and coordination; cold chain; social communication and information dissemination; linkages with other key sectors e.g. MOE
2. Promote, introduction a standardized system to evaluate the vaccination/immunization status generally and pregnant women in particular – vaccinate those deemed to be negative
3. Policies and legislation for entry into educational institutions; also employment medicals to insist on vaccination status for all groups

**IMMUIZATION**

**What are the main concerns and limitation for the implementation of the rubella vaccination campaigns targeting adults (men and women)?**

1. Selective targeting, using different or relevant strategies creatively for men and women
2. ensure that conditions necessary for the successful implementation are in place. E.g. transportation, Staff, general supplies
3. involving all medical associations

**LABORATORY**

**Which laboratory tests should be incorporated for use in specific risk groups such as pregnant women? When should these be used?**

1. For a pregnant woman, a laboratory test can be done diagnostic if she is symptomatic, or to determine her rubella status; and the specific test should be utilized should be defined by the laboratory scientist.

Lab tests for pregnant women either are done for screening purposes (IgG) or diagnostic (IgM)

2. For rubella diagnosis by IgM detection, is it necessary to collect a second sample? Yes. IF yes, how many days after first sample and up to how long thereafter? First sample within five days. Second sample after two weeks. What are the operation implications of this recommendation?  
Outreach, timely specimen collection, detailed record keeping of clients, adequate specimen transport. Are there specific groups in which the second sample should be repeated routinely? Yes, pregnant women whose first sample was taken secondary to clinical suspicion or clustering of cases. No for children under one years of age unless equivocal or presentation of a cluster of cases as previously stated.
3. What should be the role of laboratory tests in individuals with unapparent suspected rubella infections (such as pregnancy)?  
General discussion.
4. What is the role of virus isolation and molecular studies?  
Should there be an indicator to monitor the ability of countries to isolate virus? General discussion.

5. What is the role of seroprevalence studies for the progress of rubella elimination? It is ideal to conduct seroprevalence studies to track achievements/progress; however, the exorbitant costs are prohibitive. Hence, initiating seroprevalence studies for monitoring the progress of rubella elimination should be incorporated within emerging HIV seroprevalence studies being conducted among pregnant women.