Taiwan is one of a few countries in the world built active surveillance of BCG-related adverse events. Data shows that BCG-associated ostitis or osteomyelitis cases received vaccinations within three months after birth. Although there is no direct evidence proving the connection between the timing of vaccination and ostitis or osteomyelitis, we have planned to postpone BCG vaccination to reduce the incidence of ostitis or osteomyelitis.

Why postponing BCG vaccination?

BCG vaccine has a history of over a century. Due to limited prevention resources in the past, it has become the primary option for TB prevention. Following medical technology advancement and the advent of anti-TB drugs, however, the importance of BCG vaccine in TB prevention has been reducing. As Taiwan has not reach the IUATLD’s criteria for discontinuation of BCG vaccination, complete cessation of BCG vaccination is not recommended.

Optimal time for vaccination

From January 1, 2016 onward, we will adjust the recommended time of vaccination from 24 hours after birth or as early as possible to months 5-8 or no later than one year old.

Current TB status in Taiwan

With the concerted effort of public health and healthcare professionals, the TB incidence rate in Taiwan was reduced by 40% compared to last decade. Except for some specific townships, the TB incidence rate is decreasing in most part of Taiwan. The TB incidence rate was 48 cases per 100,000 people in 2014.

Dealing with the impact of vaccination postponement

Countermeasures for easing doubts about increasing child TB cases from vaccination postponement:

• Our research found that LTBI treatment reduced 96% of the risk of disease development among TB infected infants. When an infant is recognized as a TB contact, public health professionals will immediately activate the LTBI test and/or referral to assessment of LTBI treatment. Those who receive LTBI therapy as early as possible, so as to prevent TB development.

• Continuously strengthening prevention strategies (including active case finding, case management, and contact tracing) are implemented to shorten the infectious period and thereby reduce the risk of exposure for infants.