

HUMAN VACCINATION: CURRENT TRENDS AND CHALLENGES IN HUNGARY

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Vaccine-preventable infectious diseases continue to represent a significant challenge in Europe due to various reasons. These include the spreading reluctance of parents to get their children vaccinated, the quality and efficacy of vaccines, concerns of revaccination to provide long-term immunity, vaccination of pregnant women, financial issues, geographical mobility and recent outbreaks in Europe, particularly measles. The vaccination rate in Hungary is traditionally very high, almost 100% due to the good compliance. The vaccination schedule is also updated on an annual basis according to current trends and requirements. These changes include the introduction of obligatory pneumococcal conjugate vaccine (PCV-13) from 2 months (in 2014) and offering human papilloma virus (HPV) vaccine for girls at the age of 12 years (bi-, tetra- and nonavalent vaccines are available). Current issues relate to meningococcal vaccines that are available but not financially supported. Vaccines against B and C serogroups of *Neisseria meningitidis* are recommended to certain groups of people, being the two most prevalent serogroups in Hungary in the last few years with a strong dominance of group B (32 out of 48 cases in 2016/2017 season). There are similar concerns about rotavirus and chicken pox vaccines which may be the next new obligatory vaccine in Hungary. Other experts suggest serological screening for varicella to check immunity. The most important non-obligatory vaccines in Hungary may be considered: the meningococcal vaccines: group C or groups A,C,Y,W-135 and group B because of the high lethality of systemic meningococcal infections; HPV vaccines because of the oncogenicity of certain serotypes; hepatitis A vaccine due to recently increased incidence in Hungary and neighbouring countries; vaccine against tick-borne encephalitis (FSME), as the number of reported cases has been increasing in several European countries including Poland and the Czech Republic.

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