Vaccines A Thorough Analysis

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I. INTRODUCTION

In the last century, vaccination has been the most effective medical intervention to reduce the mortality rate caused by infectious diseases. It is believed that vaccines save at least 2–3 million lives per year worldwide. A prime example of their efficiency can be seen in the eradication of Smallpox and the significant depletion of polio through global vaccine campaigns. Most of the viral and bacterial infections that traditionally affected children have been drastically reduced thanks to national immunization programs in a number of countries. Therefore, the use of vaccines has become indispensable to the eradication of disease.

History

The first golden age of vaccines started when Pasteur, Koch, Ramon, and Mérieux established the germ theory and developed vaccines based on inactivated pathogens and toxins. These vaccines protected against rabies, diphtheria, tetanus, pertussis, and tuberculosis in infants.

The second golden age of vaccines was a consequence of innovation in cell culture technologies in the second half of the 20th century. The ‘cell culture revolution’ allowed for effective inactivated vaccines to prevent polio (IPV) and hepatitis A, and live-attenuated vaccines against polio (OPV), mumps, rubella, measles (MMR), rotavirus, and varicella.

A number of such vaccines are given to healthy subjects to prevent infections. In addition, some prevent cancer associated with chronic infection. The therapeutic use of vaccination based on specific antigens associated with the disease has not had equal success despite many attempts to cure chronic infections and cancer. However, in 2010, the FDA approved Sipuleucel-T, the first therapeutic vaccine for prostate cancer. Although the immunization process is very complex and expensive, Sipuleucel-T represents a milestone and may pave the way for a wider use of cancer vaccine immunotherapy based on innovative technologies that allow for simpler immunization methods.
is produced naturally as part of one’s metabolism. It's required for the synthesis of amino acids as well as several DNA components. The dosage in vaccinations is never more than 0.1 (mg) per dose.

**Aluminium:** Dialysis patients exposed to higher quantities of aluminium in their dialysis fluid for an extended period of time have a number of sideeffects, including brain and nervous system damage. Every vaccination has less than one mg of aluminium per dosage, and the majority have less than half of that. As a result, aluminium exposure from immunizations is minimal.

**Antibiotics:** Some antibiotics (such as penicillin) can cause hypersensitivity reactions; they are not utilized in vaccine manufacture.

**Types of Vaccines**

**LIVE RECOMBINANT VACCINES**

Live Attenuated viruses (or bacterial strains) are used as vectors in recombinant vaccines: a virus or bacterium from one disease works as a delivery vehicle for an immunogenic protein from another infectious agent. It prevents mumps, rubella, and measles (MMR combined vaccine), yellow fever, rotavirus, smallpox and chickenpox.

**DNA VACCINES**

It consists of DNA coding for a particular antigen, which is directly injected into the muscle. The DNA itself inserts into the individual’s cells producing the antigen from the infectious agent. It grants no risk of infection and ease of development due to DNA’s high stability and ease of production.

**mRNA VACCINES**

A ribonucleic acid (RNA) vaccine induces an immune response by using a copy of a molecule called messenger. The vaccine infects immune cells with synthetic RNA molecules, which act as mRNA and cause the cells to create a foreign protein that would typically be produced by a pathogen (such as a virus) or a cancer cell.

**Recent Developments**

Recent ventures in advancing the effectiveness of vaccines have lead researches to delve at the core of genetics. Entire viral genomes can now be cloned into bacterial or yeast vectors, allowing manipulation of genes prior to rescue or regeneration of infectious organisms in culture. These techniques enable the rapid custom design of organisms for use in vaccines. A variety of virus types, engineered by these methods to be safe in humans, are being used to express immunogenic foreign proteins outside of the context of the virulent parent organism. As an example, adenoviruses in which critical virulence genes are deleted have been used to express proteins from HIV and are being utilized in clinical trials for many other pathogens such as the Ebola virus and malaria. Presently, scientists around the world are developing many potential vaccines for COVID-19. These vaccines are all designed to teach the body’s immune system to safely recognize and block the virus that causes COVID-19. Several different types of potential vaccines for COVID-19 are in development including RNA and DNA vaccines, a cutting-edge approach that uses genetically engineered RNA or DNA to generate a protein that itself safely prompts an immune response.

**II. CONCLUSION**

Today, more than 70 vaccines have been licensed for use against approximately 30 microbes, sparing countless lives. The success of this public health intervention emanates not only from the identification of effective vaccines but also from a robust infrastructure for vaccine manufacturing, regulatory and safety oversight, and structured approaches to delivery. Vaccines represent the least expensive and most facile way to protect against devastating epidemics. Society derives economic benefits by preventing hospitalization and avoiding long-term disability. In brief, vaccines provide the most cost-effective means to save lives, preserve good health, and maintain a high quality of life.

**REFERENCES**

1. [https://www.who.int/](https://www.who.int/)
2. [https://www.embopress.org/](https://www.embopress.org/)
3. [https://www.nejm.org/](https://www.nejm.org/)
4. [https://www.nejm.org/](https://www.nejm.org/)