

The evolution of polio immunization— one of the greatest medical success stories in US history

The earliest record of typical signs of paralytic poliomyelitis is from an Egyptian hieroglyph dating from around 3700 BC.¹

Courtesy of the March of Dimes Birth Defects Foundation.



3700 BC
Polio symptoms first recorded



1921
FDR contracts polio

Franklin Delano Roosevelt, one of polio's most famous victims, contracts the disease in the summer of 1921.²

1955
The first polio vaccine



Courtesy of the March of Dimes Birth Defects Foundation.

The Salk inactivated polio vaccine (IPV) reduces paralytic polio cases by 90% in the US.³

1961
The oral polio vaccine



The Sabin oral polio vaccine (OPV) eradicates natural or "wild-type polio" in the US by 1979, and in the Western Hemisphere by 1991.³

1991
The enhanced-potency polio vaccine



An enhanced polio vaccine (e-IPV) joins the fight against polio. It is more potent than the original Salk IPV.³



1996
IPV-OPV fight polio together

Rarely, OPV itself may cause vaccine-associated paralytic polio (VAPP). To prevent this, e-IPV was reintroduced in the US and used in a sequential polio vaccination schedule.³

2000
All-IPV recommended schedule



e-IPV is used exclusively for all 4 doses of the polio vaccination series and VAPP is eliminated in the US.^{3,4}



2007
Today and tomorrow—the one you can trust

The use of e-IPV for all 4 doses of the polio vaccination series continues to provide protection against polio.^{3,4}

Safety Information

IPOL® (Poliovirus Vaccine Inactivated) is given to infants (as young as 6 weeks of age), children, and adults to prevent polio caused by poliovirus Types 1, 2, and 3. As with any vaccine, vaccination with IPOL vaccine may not protect 100% of individuals. There are risks associated with all vaccines. The most common local and systemic adverse reactions with IPOL vaccine may include pain, swelling, and redness at the injection site; fever, anorexia, fussiness, and drowsiness. Other side effects may occur. IPOL vaccine is contraindicated in persons with a history of hypersensitivity to any component of the vaccine. Because any intramuscular injection can cause injection site hematoma in persons with any bleeding disorders such as hemophilia or thrombocytopenia, or in persons on anticoagulant therapy, IPOL vaccine should not be administered by the intramuscular route to such persons. If the decision is made to administer IPOL vaccine to such persons, it should be administered by the subcutaneous route. Before administering IPOL vaccine, please see accompanying full Prescribing Information.

IPOL vaccine is manufactured by Sanofi Pasteur SA and distributed by Sanofi Pasteur Inc.

Sources: 1. Cann AJ. *Principles of Molecular Virology*. 4th ed. San Diego, Calif: Elsevier Academic Press; 2005. Available at: www-micro.msb.le.ac.uk/109/introduction.html. Accessed October 4, 2006. 2. The White House Web site. Biography of Franklin D. Roosevelt. Available at: <http://www.whitehouse.gov/history/presidents/fr32.html>. Accessed October 4, 2006. 3. Centers for Disease Control and Prevention (CDC). *Epidemiology and Prevention of Vaccine-Preventable Diseases: The Pink Book*. 9th ed. Washington, DC: Public Health Foundation; 2006:97-110. 4. CDC. Summary of notifiable diseases—United States, 2003. *MMWR*. 2005;52(54):73.

Talk to your health-care provider about IPOL vaccine and make sure your child is vaccinated.

To learn more, log onto

