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For further Information on the Immunisation Program:

Postal address:

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(03) 9637 4186

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immunisation@dhs.vic.gov.au

Webpage:

www.health.vic.gov.au/immunisation

Prevenar Vaccine

All immunisation providers should have Prevenar vaccine stock now as the childhood pneumococcal program commenced on 1 January 2005. Prevenar vaccine can be ordered through the Immunisation Vaccine Order form located at: http://www.health.vic.gov.au/immunisation/downloads/vaccine_order.doc or telephone the Immunisation Program on 1300 882 008 for a faxed form or email immunisation@dhs.vic.gov.au.

Children eligible for free Prevenar vaccine catch-up are those born on or after 1 January 2003 to 31 December 2004. Depending on the age of the child, they will require the following number of doses of Prevenar vaccine:

- 2 – 6 months = 3 doses
- 7 – 17 months = 2 doses
- 18+ months = 1 dose

Remember to remind families their child may require either a second or third dose of Prevenar vaccine and they will need to return 1 to 2 months later for catch-up doses.

Infants born from 1 January 2005 will routinely receive the Prevenar vaccine from 2 months of age with their other scheduled vaccines. This means the vaccine is due at 2, 4 and 6 months of age. The Prevenar vaccine is given in the thigh by itself and the Infanrix and Comvax can be given in the opposite thigh in separate syringes and separated by 2.5cm.

All vaccines due should be administered on the same day in separate syringes and at separate sites as long as no true contra-indication exists.

Never combine separate vaccines into the same syringe or include other drugs or chemicals. This is not recommended unless specifically registered for use in this manner.

New Combination Vaccines

New combination vaccines have become registered in Australia and are available. Informed consent requires the immunisation provider to advise parents/caregivers and adult patients about the choices available with regard to free vaccines and the alternative combined vaccines. Discussion should cover the vaccines not funded on the National Immunisation Program such as chickenpox vaccine and injectable polio vaccine (IPV). IPV vaccine is funded for specific medical risk factors when OPV is contraindicated (see page 241, 8th Ed. Australian Immunisation Handbook).

Infanrix hexa vaccine is a new combination vaccine containing 6 antigens:

- Diphtheria
- Tetanus
- Pertussis (acellular)
- *Haemophilus influenzae* type b (Hib)

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- Hepatitis B
- Poliomyelitis (inactivated)

5 antigens are present in the pre-filled syringe and the 6th antigen being Hib is presented separately as a tablet in a vial requiring reconstitution with the pre-filled syringe just prior to use.

Infanrix hexa vaccine requires doses to be given at 2, 4 and 6 months of age. Important issues to note with *Infanrix hexa* are:

- It is not recommended for use in Aboriginal and Torres Strait Islander children (the Hib component is not suitable)
- The Hib antigen received at 2, 4 and 6 months requires a booster dose at 12 months of age. This can be given as Comvax or PedvaxHib
- As an extra hepatitis B dose is given at 6 months, it is safe and will not increase the incidence of adverse events when a 5th dose of hepatitis B as Comvax is given at 12 months of age
- A Pneumococcal antigen is not included in the vaccine therefore Prevenar should be administered separately in the other thigh
- As it contains IPV, this is the preferred poliomyelitis vaccine on the Australian Standard Vaccination Schedule (ASVS)
- An approximate retail cost of the vaccine is \$140.00 per dose

Other combination vaccines available are:

Infanrix IPV:

- Diphtheria
- Tetanus
- Pertussis (acellular)
- Poliomyelitis (inactivated)
- An approximate retail cost of the vaccine is \$80.00 per dose

Infanrix Penta:

- Diphtheria
- Tetanus
- Pertussis (acellular)
- Poliomyelitis (inactivated)
- Hepatitis B
- An approximate retail cost of the vaccine is \$100.00 per dose

Pertussis (Whooping Cough)

Confirmed cases of pertussis in Victoria have increased to 233 in November/December 2004; compared to 132 in November/December 2003, an increase of 76%.

In 2004 in Victoria there were 31 confirmed cases in infants. None of these babies had completed pertussis immunisation. 84% were less than 6 months old. There was one infant death due to pertussis in Victoria in 2004. The highest numbers of notifications were in the 10-14 and 15-19 year age groups. Babies less than 6 months old are at the greatest risk of severe disease, but are too young to be completely immunised and so can only be protected by immunising the older children and adults around them.

The Public Health Division urges doctors to:

- Remind parents that it is important that immunisations are given on time and offer catch-up for infants and young children who are behind schedule for their vaccinations
- Encourage teenagers to have their **diphtheria/tetanus/pertussis booster (dTpa "Boostrix") in Year 10** as part of the routine vaccination schedule

The following groups are also recommended and encouraged to receive dTpa (Boostrix) however it is **not a free** vaccine:

- couples who are planning a pregnancy and parents of new babies
- adults who work with young children, especially health care workers and child care workers in contact with young infants
- any adult who wishes to be protected against pertussis including the use of dTpa instead of ADT at 50 years of age

Remember - pertussis cases should be notified to the State Health Department. Try on-line notification:

<http://www.health.vic.gov.au/ideas/notifying/howto.htm>

More information about pertussis is available at:

http://www.health.vic.gov.au/ideas/diseases/pert_clinicians.htm



PROGRAM NEWSLETTER

Meningococcal C Vaccine

A mop-up program is still underway for all children and adolescence that were eligible in 2003 for free meningococcal C vaccine. GP clinics and local government can provide free meningococcal C vaccine to all children including primary and secondary school aged children.

ADT Vaccine Availability

CSL Pharmaceuticals have improved the presentation of diphtheria, tetanus vaccine, adsorbed for adults (ADT) vaccine. The new presentation of ADT vaccine is a pre-filled syringe (instead of an ampoule).

The ADT vaccine is only supplied by DHS for the purpose of:

- Children and adults 8 years of age and over who have not commenced or completed a course of tetanus and diphtheria containing vaccine
- Adults aged 50 years as a scheduled booster for tetanus

ADT vaccine for tetanus prone wounds can be accessed through the Emergency Drug (Doctor's Bag) supply. ADT vaccine required for travel purposes can be purchased with a prescription from the pharmacy.

Influenza Season

Influenza vaccine should be administered to any person who wishes to reduce the likelihood of becoming ill with influenza.

Influenza can be given to children as young as 6 months of age. **Children under 2 years of age with medical risk factors are at greater risk of severe influenza illness.**

Infants from 6 months to 9 years of age receiving influenza vaccine for the first year require 2 doses. The 8th Edition Australian Immunisation Handbook, page 170, provides detail on the dosage required for each age range for children.

Influenza vaccine is strongly recommended and is **free** for:

- Everyone aged 65 years or older
- Aboriginal and Torres Strait Islander people aged between 15 and 49 years with health risks
- Aboriginal and Torres Strait Islander people aged 50 years and over
- Public hospital outpatients (in the hospital setting) and inpatients at high risk for complications of influenza

Influenza vaccine is also strongly recommended (however it is not funded unless the person is also in the free group) for people over 6 months of age with:

- Chronic heart disorders
- Diabetes and kidney disorders
- Asthma and chronic respiratory disorders
- Suppressed immune system due to illness or treatment
- Live in a nursing home or hostel
- Are a worker in a hospital, long term care facility or nursing home
- Live or care for someone who has chronic illness or is aged

Influenza immunisation is also recommended (however it is not funded unless the person is also in the free group) for:

- Severe asthmatics
- Children on long term Aspirin therapy
- Pregnant women
- Workers
- Travellers in groups

Pneumovax 23 Vaccine

The following groups are those eligible for **free pneumococcal vaccine**:

- Everyone aged 65 years and older
- Public hospital outpatients (in the hospital setting) and inpatients at high risk for pneumococcal disease
- Aboriginal and Torres Strait Islanders aged between 15 and 49 years with health risks and those aged 50 years and older
- Children at 4 to 5 years of age with underlying high risk medical conditions (these children will have already completed a course of Prevenar vaccine)



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The Pneumovax 23 vaccine is also recommended for the following people (however it is not funded unless the person is also in the free group)

- People aged 5 years and over with serious health problems, such as heart or lung disease, diabetes or kidney disease
- People aged 5 years and over with illnesses that reduce immunity to infections, such as leukaemia or HIV or who are being treated with drugs that suppress the immune system
- Transplant recipients or people with a damaged spleen or no spleen
- People aged over 5 years with a CSF leak
- Tobacco smokers

Pneumovax 23 Booster

The 8th Edition Australian Immunisation Handbook states the recommendation for booster doses of Pneumovax23 are as follows:

- Non-indigenous adults aged 65 years and older:
 - **A single revaccination 5 years later**
- Aboriginal and Torres Strait Islander adults aged 15 to 49 years with risk factors:
 - **Revaccination 5 years after the first dose then again at age 50 years or 10 years after the first revaccination, whichever comes later**

Practice Nurses Scholarship Scheme

The Australian Government in association with Australian Practice Nurses Association and Australian Divisions of General Practice, has funded a Wound Management and Immunisation Training for Practice Nurses Scholarship Scheme.

This scheme is one of a range of strategies to assist nurses working in a General Practice setting with skill development in the areas of wound management and immunisation.

The scheme provides financial assistance in the form of a scholarship worth up to \$900 per applicant for an immunisation training/education program and up to \$300 per applicant for a wound management training/education program.

The scholarship application form and guidelines as well as a list of courses available, will be on the Australian Practice Nurses Association website www.apna.asn.au from 11am Monday 31st January 2005. Applications will remain open for 1 month, closing on Friday 25th February 2005.

For further information regarding these scholarships please see the website or call Jacqui Young, Education Coordinator on 07 3105 8380.

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