

Welcome to Bulletin 32 from the HSE National Immunisation Office which highlights changes in clinical guidance for the COVID-19 vaccination programme.

Bulletins will be published <u>FORTNIGHTLY</u> or more frequently, if required.

New recommendations from the National Immunisation Advisory Committee

The National immunisation Advisory Committee has issued new recommendations on COVID-19 vaccination which have been accepted by the Department of Health;

The following groups are recommended a single dose of an mRNA vaccine (Comirnaty®/Pfizer-BioNTech or Spikevax®/Comirnaty) as a booster dose:

- People aged 65 years and older living in residential care facilities
- Those aged 80 years and older living in the community

The NIAC recommendations are below:

- 1 All unvaccinated or incompletely vaccinated people of any age, particularly those aged 80 and older, those living in long term care facilities (LTCFs) aged 65 and older and those living with and/or caring for them are strongly encouraged to complete the primary vaccination course.
- 2 A booster dose of an mRNA vaccine should be given to all those aged 80 and older and those living in LTCFs aged 65 and older who have completed their primary course with any vaccine type. The booster dose should be given after an interval of six months following the last dose of an authorised COVID-19 vaccine and can be given at the same time or at any interval before or after seasonal influenza vaccine. In exceptional circumstances, a minimum interval of two months can be used between the booster dose and the last dose of an authorised COVID-19 vaccine.
- 3 All those aged 80 and older, those living in long term care facilities aged 65 and older and those living with and/or caring for them should observe all recommended non pharmaceutical interventions (public health and social measures) to limit COVID-19 exposure.

This recommendation is not yet operational. Planning is underway to incorporate this recommendation into the national immunisation programme. Booster doses are currently not licensed by the European Medicines Agency.Information for vaccine recipients is needed, as well as training, guidance and supporting documents for vaccinators, and changes to the immunisation I.T. system will all be required.

NIAC have already recommended that people who are immunocompromised due to disease or treatment are recommended to receive an extended primary vaccination course, with an additional single dose of an mRNA vaccine a minimum of 2 months after the completion of a recognised COVID-19 vaccine course. This is not a booster dose, but an additional dose to allow them to mount an adequate primary immune response to vaccination.

There are currently no recommendations for booster or additional vaccine doses for any other group.

Read more here



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Minimum Interval between doses of Spikevax®

There has been a change to the minimum interval for Spikevax®/Moderna Vaccine. The minimum interval is now 21 days between doses. Please note that the recommended interval should be used. **The minimum interval should only be used in exceptional circumstances.**

If the interval between doses is longer than 28 days, the second dose should be given as soon as possible. The course does not need to be restarted.

If the second dose was given between 21 and 27 days after the first dose, it is a valid dose.

If the second dose is given before 21 days, this is not considered a valid dose. A third dose should be given 28 days after the second (invalid) dose.

Interval between 1st and 2 nd doses	Action required	
Less than 21 days	This is not considered a valid vaccine. A third dose should be given 28 days after the second (invalid) vaccine.	
21-27 days	No further action needed (Evidence from trial data that this i valid vaccine).	
Longer than 28 days	Give the 2nd dose at whatever interval. The course does not need to be restarted.	

Updates to the licensed documentation for Vaxzevria® and COVID-19 vaccine Janssen®

The following have been added to the licensed documentation as adverse reactions:

COVID-19 Vaccine Janssen®:

- diarrhoea and paraesthesia (uncommon)
- hypoesthesia, lymphadenopathy, vomiting and tinnitus (rare)

Vaxzevria®:

- pain in extremity, influenza-like illness, asthenia (common)
- lethargy (uncommon), urticaria, abdominal pain (uncommon)
- Guillain-Barré Syndrome (very rare)

For more details

Visit EMA website

<u>Read more here</u>

Read more here



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We have included some frequently asked questions of queries we receive through our <u>immunisation inbox</u>



Is there a need to leave a gap between COVID-19 vaccines and the vaccines given in secondary school such as HPV, Tdap and MenACWY?

No. There is no need to leave a gap between these vaccines and a COVID-19 vaccine. The vaccines can be given at the same time, or at any interval. If the vaccines are given at the same time, give COVID-19 vaccine in one arm, and the other vaccines in the other arm, separated by 2.5cm.

We have also been asked by parents if giving the school vaccines together or close to the COVID-19 vaccine will "overwhelm" the immune system of their child.

The answer is no. From the moment we are born we have trillions of bacteria on our skin and are exposed to many more bacteria, viruses and other pathogens in our environment in our daily life. Our immune system copes with these every day. In comparison, the work that our immune system has to do when we are given a vaccine or vaccines is tiny.

B cells and other lymphocytes which mount the immune response to a vaccine are constantly replenished, so a vaccine never "uses up" a fraction of the immune system. For example, it has been estimated that the immune system has the ability to replenish about 2 billion lymphocytes each day.

Read more about the immune system and vaccines from the Vaccine Education Centre of the Children's Hospital of Philadelphia (a member of the WHO Vaccine Safety Net):

<u>Click here</u>

If a woman is receiving a COVID-19 vaccine post-partum, is there a need to leave a gap between delivery and the administration of a COVID-19 vaccine?

No there is no need to leave a gap between delivery and the administration of a COVID-19 vaccine.

If someone has a family history of an adverse reaction to a COVID-19 vaccine, is this a contraindication to vaccination?

No. A family history of any adverse event is not a contraindication to any vaccine including the COVID-19 vaccines.

See below from the National Immunisation Advisory Committee Guidelines:

<u>Click here</u>

Frequently asked questions of queries are continued on page 4





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(continued from page 3)



NIAC advise:

- Those who have documentary evidence of a complete COVID-19 vaccination course with a COVID-19 vaccine authorised by the FDA, MHRA or recommended by WHO should be considered fully vaccinated.
- Those who have partially completed a COVID-19 vaccine course with a vaccine authorised by the FDA, MHRA or recommended by WHO should be offered an EMA authorised COVID-19 vaccine to complete the series, and then should be considered fully vaccinated. The minimum interval between the last vaccine dose and an EMA authorised COVID-19 vaccine is 28 days.
- Those who have received a partial or complete course of COVID-19 vaccine not authorised by the FDA, MHRA or recommended by WHO should be offered a complete course of an EMA authorised COVID-19 vaccine. The minimum interval between the last dose and an EMA authorised COVID-19 vaccine is 28 days.

In addition to the vaccines used in Ireland, the vaccines approved by WHO include at present Sinovac-Coronavac® and Sinopharm®.

See below for most up to date list of WHO approved vaccines.

Click here

Please also note that Covishield® produced by the Serum Institute of India is the equivalent of Vaxzevria®.

The National Immunisation Office cannot give any advice about COVID-19 vaccine digital certificates.

Covax System

On the Eligibility form changes were added on the 7th Sept for Pregnancy Eligibility.

The current wording is temporary due to the short timeframe that was available to make these changes.



It will be amended in line with NIAC guidelines on the 20th Sept (approx.)



COVID-19 VACCINE Public Health Advice

COVID-19 VACCINE BULLETIN 32

Research

COVID-19-associated hospitalizations among vaccinated and unvaccinated adults ≥18 years

This paper, available in pre-print and not yet peer-reviewed, compared hospitalisation rates from COVID-19 in the U.S. in vaccinated and unvaccinated individuals.

Population-based hospitalization rates show that unvaccinated adults aged \geq 18 years are 17 times more likely to be hospitalized compared with vaccinated adults. Rates are far higher in unvaccinated persons in all adult age groups, including during a period when the Delta variant was the predominant strain of the SARS-CoV-2 virus.

<u>Read more here</u>

Receipt of mRNA Covid-19 Vaccines in pregnancy: analysis from the Centers for Disease Control and Prevention (CDC) in the US

This analysis from the from the Centers for Disease Control and Prevention (CDC) in the US, reported the rates of miscarriage in women who had received at least one dose of an mRNA Covid-19 vaccine either before conception (30 days before the first day of the last menstrual period through 14 days after) or in pregnancy before 20 weeks of gestation.

They compared rates of miscarriage between 6 and 20 weeks of gestation in women who had received the vaccine, compared with rates in the general population. The analysis found no difference between women vaccinated with an mRNA vaccine and the rates in the general population.

These findings add to the accumulating evidence about the safety of mRNA Covid-19 vaccination in pregnancy.

Read more here

HSeLanD COVID-19 Vaccination Training Programme Updates

The **HSeLanD COVID-19 Vaccination Training Programme** has also been recently updated to support as shown in the table below:

4	Indications, Priority Groups,	Video from Dr Louise Marron, Specialist Registrar in Public Health
	Contraindications and Precautions for the	Medicine, NIO - Pfizer Vaccine
	COVID-19 vaccine	
4	Indications, Priority Groups,	Video from Dr Chantal Migone, Specialist in Public Health Medicine, NIO
	Contraindications and Precautions for the	- AstraZeneca
	COVID-19 vaccine	

We would encourage you to log in and complete the updated content in each programme to refresh your knowledge and ensure you are up to date with your COVID-19 Vaccination Training.

Visit HSeLanD

If you have any issues with the platform please contact HSeLand directly.

Contact HSeLanD





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Website

Visit our website **www.immunisation.ie** regularly for the most up to date information to support vaccinators and health professionals responding to queries.

Our dedicated COVID-19 Vaccination section contains

- Information from the National Immunisation Advisory Committee
- Clinical guidelines
- COVID-19 vaccine studies
- IM injection technique reminders
- Dedicated pages for the licensed COVID-19 vaccines

<u>Visit here</u>

Flu Vaccine Training Webinar

Thank you to all those who registered for and attended the live *Flu Vaccine Training Webinar* hosted by the HSE National Immunisation Office 6th September.

We are finalising the videos and slides and hope to share these with those who registered for the webinar early next week.

For those who attended the live webinar, we would greatly appreciate your feedback.

Visit our website for up to date information for the influenza programmes for 2021/2022

Do you have queries?

Clinical queries from healthcare professionals can be directed to our HSE email address.

Send your query

Should vaccines be exposed to temperatures outside of parameters please contact the National Immunisation Office pharmacists immediately. Contacts include:

- Achal Gupta: mobile 087 4064810
- Mariangela Toma: mobile 087 7575679
- Cliona Kiersey: mobile 087 9915452

The National Immunisation Office is not involved in the allocation or delivery of COVID-19 Vaccines.

Queries that are not clinical or technical cannot be answered by the National Immunisation Office

Read about the role of the National Immunisation Office in supporting the COVID-19 vaccination programme on our **website**.

Recommendations about COVID-19 vaccine are changing as more information becomes available so please visit our **website** for the most up to date information.

10 September 2021



Take our survey

Visit here

