### HSE NATIONAL IMMUNISATION OFFICE

# IMMUNISATION BULLETIN 60

### THIS EDITION COVERS

- Spikevax bivalent Original/Omicron BA.4-5, 50 micrograms (0.5ml) for those aged 30 years and older
- The National Immunisation Advisory Committee's (NIAC) new recommendations for the timing of COVID-19 booster vaccines in pregnancy
- Master Medicine Protocol for Comirnaty 3
  micrograms COVID-19 mRNA Vaccine
  Administration and advice regarding children who
  turn 5 years of age during the vaccine schedule
- NIAC Immunisation Guidelines Anaphylaxis Chapter was updated (February 2023)
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Welcome to Bulletin 60 from the HSE National Immunisation Office.

### **COVID-19 vaccine**

Spikevax bivalent Original/Omicron BA.4-5, 50 micrograms (0.5ml) for those aged 30 years and older (SOON TO BE OPERATIONALISED)

The HSE is planning to commence the administration of COVID-19 Spikevax bivalent Original/Omicron BA.4-5, 50 micrograms (0.5ml) adapted booster COVID-19 vaccine from **13th of March** for those aged 30 years and older.

COVID-19 Spikevax bivalent Original/Omicron BA.4-5 vaccine is **not recommended for anyone aged < 30 years**.

Anyone aged 30 years and older who is recommended to receive a COVID-19 booster vaccine may receive Spikevax bivalent Original/Omicron BA.4-5 vaccine regardless of which COVID-19 booster they received previously (provided there are no contraindications or precautions to vaccination present).



Read the relevant medicine protocol and other clinical information materials here.

The National Immunisation Advisory Committee's (NIAC) new recommendations for the timing of COVID-19 booster vaccines in pregnancy (NOT YET OPERATIONALISED)

### **Updated NIAC Recommendations**

- mRNA COVID-19 vaccines remain the preferred option for use in pregnancy
- COVID-19 vaccines, including booster doses, may be administered at any stage of pregnancy
- Those who are pregnant should be up to date with COVID-19 vaccines in line with NIAC recommendations based on age, risk profile and time since prior vaccination or infection.

#### **NIAC Statement**

In July 2022, NIAC recommended that pregnant women should receive a second mRNA COVID-19 booster vaccine at or after 16 weeks gestation if not already boosted in that pregnancy.

Since the end of December 2022, a second booster has been recommended for all adults aged 18 years and older who are more than six months since a previous booster dose or COVID-19 infection. This recommendation for a second adult booster created an anomaly in that a pregnant person who is at less than 16 weeks' gestation cannot receive a second booster, even if more than six months have elapsed since their first booster. This extends the interval between the booster doses increasing their susceptibility to infection.

Vaccination during pregnancy reduces the frequency and severity of COVID-19 disease and may prevent stillbirths. Vaccination during pregnancy has also been shown to increase antibody levels in neonates and can help protect against severe COVID-19 disease in the first six months of life.

NIAC recently reviewed the evidence regarding safety and timing of COVID-19 primary and booster vaccines in pregnancy. Current data are very reassuring regarding the safety of COVID-19 mRNA vaccines given at any stage in pregnancy either as a primary series or as a booster. The European Medicines Agency (EMA), UK Health Security Agency (UKHSA), and the Centers for Disease Control and Prevention (CDC) have been monitoring the safety of COVID-19 vaccines in pregnancy. These safety monitoring systems have not reported any safety concerns for people who receive an mRNA COVID-19 vaccine at any stage of pregnancy. Less data are available regarding non-mRNA vaccines.

COVID-19 vaccine updates continue on page 3











# Master Medicine Protocol for Comirnaty 3 micrograms COVID-19 mRNA Vaccine Administration and advice regarding children who turn 5 years of age during the vaccine schedule

An explanatory note has been added under the inclusion criteria in line with the NIAC recommendations to the Medicine Protocol for the Comirnaty 3mcg vaccine for children aged 6 months – 4 years:

A 4-year-old child who received the initial dose (or doses) of Comirnaty 3 micrograms and who is 5 years of age at the time of their second or third dose should receive the next dose(s) of Comirnaty 10 micrograms.

If a child turns five years of age before completion of the recommended course, the schedule should be completed with the age appropriate dose, Comirnaty 10 microgram as follows:

- If they have received one dose of Comirnaty 3 micrograms: leave an interval of three weeks, then give two doses of Comirnaty 10 micrograms eight weeks apart
- If they have received two doses of Comirnaty 3 micrograms: leave an interval of eight weeks, then give one dose of Comirnaty 10 micrograms

### **NIAC Immunisation Guidelines**

### NIAC Immunisation Guidelines: Anaphylaxis Chapter was recently updated (February 2023)

**New advice**: The recommended needle length for IM injections in the anterolateral thigh is 25mm (38-40mm for males weighing >120kg and females weighing >90kgs and 16mm in infants weighing 2.5-3.0kg).

Old advice: The recommended needle length for IM injections in the anterolateral thigh is 25mm (38-40mm for those weighing more than 100kg and 16mm in infants weighing 2.5 – 3.0 kg).



Read the updated NIAC Anaphylaxis Chapter here.

# Differences in advice between NIAC Immunisation Guidelines and the Summary of Product Characteristics (SmPC) of the vaccines

The National Immunisation Advisory Committee (NIAC) has developed the Immunisation Guidelines for Ireland. The guidelines provide up to date and accurate information about vaccines and immunisation for healthcare professionals.

NIAC guidance documents clearly state: "In some circumstances, advice in these guidelines may differ from that in the Summary of Product Characteristics (SmPC) of the vaccines. When this occurs, the recommendations in these guidelines, which are based on current expert advice from NIAC, should be followed."

The information produced by the HSE's National Immunisation Office (in the clinical guidance and HSE patient information leaflets) will be in line with NIAC advice.

In some circumstances, advice in these guidelines may differ from that in the Summary of Product Characteristics (SmPC) of the vaccines. When this occurs, the recommendations in these guidelines, which are based on current expert advice from NIAC, should be followed.







### **Frequently Asked Questions**

### If the MMR Vaccine is given before 12 months of age does the vaccine need to be repeated?

If the MMR vaccine (or any vaccine recommended at 12 months of age) is given **more than 4 days** before a child's 1st birthday, then the vaccination is not a valid dose and should be repeated after an interval of 1 month to provide protection to the child from the vaccine preventable diseases covered by the vaccine.

See advice below from the NIAC Immunisation Guidelines:

#### 2.2.5 Vaccination before minimum recommended age or interval

Giving a dose ≤4 days before the minimum age or interval (the four day rule) is unlikely to have a significant adverse effect on the immune response to that dose and does not need to be repeated.

If a vaccine is given >4 days before the recommended minimum age or interval, it is not a valid dose. The dose should be disregarded and another dose given, at least 1 month after the disregarded dose.

The four day rule should not be used for

- rabies or Japanese encephalitis vaccines, because of their schedules (1, 7, 28 days)
- ii. the  $2^{nd}$  or  $3^{rd}$  doses of the accelerated Hepatitis B schedule (0, 7, 21 days and 12 months).
- iii. the 28-day interval between two different live parenteral vaccines not administered at the same visit (Table 2.5).

### **NIO Lunch and Learn session**

The NIO hosted the February Lunch and Learn earlier this month and covered Vaccines for BOTP and IPAs.

- You can watch the lunch and learn.
- · You can also listen to the session on Spotify.
- You can view the slides presented at the session.

We plan to host a session each month.









### Website



Visit website here.

Visit our website <u>www.immunisation.ie</u> regularly for information to support vaccinators and health professionals responding to queries.

### **HSeLanD Vaccination Training Programme**



Visit HSeLanD here.



Contact HSeLanD here.

You will find programmes developed by our office by logging into your account on <a href="www.hseland.ie">www.hseland.ie</a> selecting courses then selecting clinical skills and finally selecting National Immunisation Office.

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

### Do you have queries?



Send your query here.

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

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

- email pharmacynio@hse.ie
- Leah Gaughan: mobile 087 1881667
- Achal Gupta: mobile 087 4064810
- Cliona Kiersey: mobile 087 9915452

If you have a query about errors or changes to records on COVAX, please contact the Contact Management Programme on 01 240 8786.

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



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