

National Immunisation News

The newsletter of the HSE National Immunisation Office

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www.immunisation.ie

Changes to the Primary Childhood Immunisation Programme

The National Immunisation Advisory Committee (NIAC) has recommended changing the meningococcalC (MenC) immunisation schedule in the primary childhood programme from three doses at 4, 6 and 13 months to two doses at 4 and 13 months because of evidence that a single dose of MenC vaccine provides protection for the first year of life.

This new primary childhood immunisation schedule will be introduced for all babies born on or after July 1st 2015. Further details and new information materials for the Primary Childhood Immunisation Programme are being developed.

Primary Childhood Immunisation Schedule							
	CURRENT SCHEDULE		NEW SCHEDULE				
Date of birth	Babies born up to 30 th June 2015		Babies born on or after 1*July 2015				
Age	Immunisations	Comment	Immunisations	Comment			
2 months	6 in 1 + PCV	2 injections	6 in 1 + PCV	2 injections			
4 months	6 in 1 + MenC	2 injections	6 in 1 + MenC	2 injections			
6 months	6 in 1 + PCV + MenC	3 injections	6 in 1 + PCV	2 injections			
12 months	MMR + PCV	2 injections	MMR + PCV	2 injections			
13 months	MenC + Hib	2 injections	MenC + Hib	2 injections			

6 in 1 Diphtheria, Tetanus, Pertussis, Polio, Hepatitis B, Haemophilus influenzae b

PCV Pneumococcal conjugate vaccine

MenC MeningococcalC vaccine

MMR Measles, Mumps, Rubella

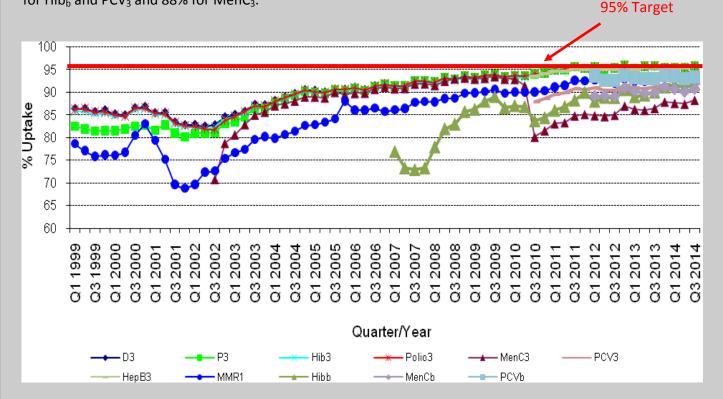
Hib Haemophilus influenzae b



Please continue to use the current primary childhood schedule.

UPTAKE RATES STILL BELOW TARGET FOR 12 AND 13 MONTH VISITS

National immunisation uptake rates at 24 months for Quarter 3 2014 were 96% for DPT, 93% for MMR_1 , 92% for Hib_b and PCV_3 and 88% for $MenC_3$.



Source: HPSC

Only Roscommon, Laois/Offaly and Longford/Westmeath reached the target of 95% for PCV and MenC boosters so many children are not fully vaccinated.

Please remind parents of the importance of completing all FIVE visits on time and send details of the vaccinations soon after to your local immunisation office.

For more details see

http://www.hpsc.ie/hpsc/A-Z/VaccinePreventable/Vaccination/ImmunisationUptakeStatistics/QuarterlyReports/

and check out your local area uptake rates at

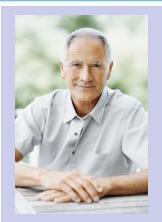
http://www.hpsc.ie/hpsc/A-Z/VaccinePreventable/Vaccination/ImmunisationUptakeStatistics/ ImmunisationUptakeStatisticsSummary/

Pneumovax name change

The name of the pneumococcal polysaccharide vaccine has changed from Pneumovax II to Pneumovax 23.

There is no change to the content of the product.

Please use your existing supplies of Pneumovax II before ordering Pneumovax 23.



The Flu season – not over yet

The flu season continues until the end of April 2015 so all those in the at risk groups who have not had the vaccine should be encouraged to get it.

This particularly includes pregnant women and those who are newly diagnosed in the at risk groups.

Please do not send back any unused flu vaccine until after the end of April.

COMMON QUERIES

Must a baby be vaccinated with the BCG before receiving their other childhood vaccines?

Parents should NOT postpone the 2, 4 or 6 month vaccines for their baby while they are waiting for a BCG appointment.

BCG and the 2, 4 and 6 month vaccines can be given on the same day or at any interval before or after each other.

The BCG and MMR are live vaccines <u>so these</u> vaccines can be given on the same day or else a one month interval must be left between them.

Why is Tdap vaccine recommended in every pregnancy?

Babies under 3 months old are at greatest risk of complications and death from pertussis. These babies are too young to be fully vaccinated. The only way that very young infants can be protected from pertussis infection is by the transmission of maternal antibodies from Tdap (Boostrix) vaccination in late pregnancy.

These maternal pertussis antibody levels wane substantially during the first year after vaccination so a single dose of Tdap during one pregnancy is insufficient to provide protection for subsequent pregnancies.

Tdap (Boostrix) should be given between 27-36 weeks gestation during every pregnancy.

For more information see http://www.hse.ie/eng/health/immunisation/hcpinfo/ OtherVaccines/pertussis/



The Schools Immunisation System will be in use in all areas of the country for all schools based vaccinations i.e. 4 in1, MMR, HPV, Tdap and MenC from September 2015 onwards. This means that all vaccines given in schools will be recorded electronically on a national system.

ONLINE ORDERING

One of the recommendations of the **HSE National Cold Chain Service Customer Satisfaction Survey 2014** was the need for an online ordering service.

This has been developed by the National Cold Chain Delivery Service and the National Immunisation Office and went live in December 2014.



The website for this service is https://ordervaccines.ie/login.aspx

The majority of GP sites (85%) have completed their compulsory online stock take and a third of GPs have already placed their first monthly online order. All sites should be using online ordering by March 2015.

COLD CHAIN BREACH

All vaccines should be stored in accordance with the summary of product characteristics, i.e. refrigerated between $+2^{\circ}$ C and $+8^{\circ}$ C.

A cold chain breach has occurred if vaccine storage temperature has been outside the recommended range of $+2^{\circ}$ C to $+8^{\circ}$ C.

However all vaccines retain acceptable potency when protected from light but exposed to room temperature (up to 25°C) for a period of time. The duration of temperature breach permitted is both vaccine and batch specific.

Therefore a risk assessment of the vaccines must be carried out on a case by case basis to establish whether it is appropriate to use the vaccines or whether they should be returned to the HSE National Cold chain for destruction.

If the fridge temperature is found to be **outside the permitted range for more than 15 minutes** contact the Chief Pharmacist or the Medical Officer in the National Immunisation Office (at 087 9915452/ cliona.kiersey@hse.ie or 01 8676108) as soon as possible for further advice.

A fridge temperature increase above +8°C which lasts **less than 15 minutes** (e.g. due to stock taking or restocking) is not considered a cold chain breach.

	Current Vaccines List Updated February 2015					
Primary Childhood Vaccines						
Vaccine	Product Name	Manufacturer	Pack Size			
6 in 1	INFANRIX HEXA	GSK	10			
PCV	PREVENAR 13	Pfizer	1			
MenC	MENJUGATE	Novartis	1			
MMR	PRIORIX	GSK	10			
MMR	MMRVAXPRO	Sanofi Pasteur MSD	1			
Hib	HIBERIX	GSK	1			
4 in 1	INFANRIX-IPV	GSK	1			
	Adult Vaccines	8				
Vaccine	Product Name	Manufacturer	Pack Size			
Td	DITE BOOSTER	SSI	5			
Flu	INFLUVAC	Abbott	10			
Pneumococcal	PNEUMOVAX 23	Sanofi Pasteur MSD	1			
Vaccines Used By HSE						
Vaccine	Product Name	Manufacturer	Pack Size			
BCG	BCG	SSI	5			
Tuberculin	TUBERCULIN 2 TU	SSI	10			
4 in 1	INFANRIX-IPV	GSK	1			
MMR	PRIORIX	GSK	10			
MMR	MMRVAXPRO	Sanofi Pasteur MSD	1			
HPV	GARDASIL	Sanofi Pasteur MSD	1			
Tdap	BOOSTRIX	GSK	1			
	Restricted Vaccines Requirin	g Authorisation				
Vaccine	Product Name	Manufacturer	Pack Size			
Hepatitis A	HAVRIX MONODOSE	GSK	1			
	HAVRIX JUNIOR MONODOSE	GSK	1			
Hepatitis B	ENGERIX (adult)	GSK	1			
	ENGERIX (paediatric)	GSK	1			
	FENDRIX (renal insufficiency)	GSK	1			
	HBVAXPRO 5mcg	Sanofi Pasteur MSD	1			
	HBVAXPRO 10mcg	Sanofi Pasteur MSD	1			
	HBVAXPRO 40mcg	Sanofi Pasteur MSD	1			
Hepatitis A+B	TWINRIX (adult)	GSK	1			
	TWINRIX (paediatric)	GSK	1			
MenACW ₁₃₅ Y	MENVEO	Novartis	1			
MenB	BEXSERO	Novartis	1			
Tdap	BOOSTRIX	GSK	1			
Tdap/IPV	IPV-BOOSTRIX	GSK	1			
Td/IPV	REVAXIS	Sanofi Pasteur MSD	1			

Prepare your vaccines correctly

The following table outlines the presentation and instructions for use for vaccines used in the primary childhood immunisation programme.

Name	Presentation	Needles	Instructions
Infanrix Hexa	Prefilled syringe with		
(6 in 1)	DTaP/IPV/Hep B		
	and		
	Vial containing Hib powder		
	Prefilled syringe with diluent		Attach needle to syringe
Menjugate	and	2 unattached needles	, ,
(MenC)	Vial containing MenC powder		Insert contents of prefilled syringe into
	Prefilled syringe with diluent	1 for reconstitution	vial
Priorix	and		
(MMR)	Vial containing MMR powder	1 for administration	Mix and then draw back into syringe
	Prefilled syringe with diluent		
MMRVAXPRO	and		Change needle and administer
(MMR)	Vial containing MMR powder		
	Prefilled syringe with diluent		
Hiberix	and		
(Hib)	Vial containing Hib powder		
Infanrix-IPV	Prefilled syringe with		Attach age/size appropriate needle to
(4 in 1)	DTaP/IPV	2 unattached needles	syringe and administer
Prevenar			Attach needle to syringe and
(PCV)	Prefilled syringe with PCV	1 unattached needle	administer

Note Vaccines should be reconstituted as recommended by the vaccine manufacturer

Reconstituted vaccines should NOT be mixed in the same syringe

- with other reconstituted vaccines
- with other prefilled syringes

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