HPV vaccine catch up opportunity for girls in second level school

HPV vaccines are used to prevent cervical cancer. In September 2016, the HSE launched a catch-up programme in order to offer the HPV vaccine to all second level schoolgirls who missed out on the first dose because they were not in second level school at the time. If parents have any questions, they can contact the HSE National Immunisation Office on 1850 24 24 50 or via email: immunisation@hse.ie

To get National Immunisation News emailed directly to you, visit www.immunisation.ie and sign up to the newsletter. If you have any questions or concerns, please email immunisation@hse.ie

www.immunisation.ie

The newsletter of the HSE National Immunisation Office

April 2017

HPV vaccine catch up opportunity for girls in second level school

HPV vaccine is cancer prevention.

HPV vaccination in cancer prevention.

The HSE vaccination teams are now vaccinating children to provide the second dose of the HPV vaccine. If girls missed out on the first dose of HPV vaccine in September they can now start the HPV vaccine schedule. Parents are urged to protect their daughters against cervical cancer by ensuring they receive the HPV vaccine.

Information leaflets containing micronutrient vaccine pharmacovigilance data on Gardasil/HPV vaccine give false information on vaccine side effects and continue to be distributed to parents by groups and advertised in some local papers. The NIO continues to work with all key stakeholders to correct this misinformation.

Current Vaccines List
Updated April 2017

Primary Childhood Vaccines

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Product Name</th>
<th>Manufacturer</th>
<th>Pack Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 in 1</td>
<td>INFANRIX HEXA</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>Men B</td>
<td>NEOMUNE</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>MenC</td>
<td>MENJUGATE</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>PCV</td>
<td>PREVENAR 13</td>
<td>Pfizer</td>
<td>10</td>
</tr>
<tr>
<td>MMR</td>
<td>MMR Vac Pro</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>WPR</td>
<td>WPR Vac Pro</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>Rose</td>
<td>RETARIX</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>Hib</td>
<td>HBVAXPRO</td>
<td>MSD</td>
<td>10</td>
</tr>
</tbody>
</table>

Adult Vaccines

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Product Name</th>
<th>Manufacturer</th>
<th>Pack Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Td</td>
<td>DT/BOOSTER</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>Pneumococcal</td>
<td>PNEUMOVAX 23</td>
<td>MSD</td>
<td>10</td>
</tr>
</tbody>
</table>

Vaccines Used by HSE

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Product Name</th>
<th>Manufacturer</th>
<th>Pack Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuberculin</td>
<td>TUBERCULIN 2 TU</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>4 in 1</td>
<td>INFANRIX-IPV</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>MMR</td>
<td>MMR PRO</td>
<td>MMR Vac Pro</td>
<td>10</td>
</tr>
<tr>
<td>Tdap</td>
<td>Tdap BOOSTER</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>HPV B</td>
<td>HPV B</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>MenC</td>
<td>MENJUGATE</td>
<td>GSK</td>
<td>10</td>
</tr>
</tbody>
</table>

Restricted Vaccines Requiring Authorisation

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Product Name</th>
<th>Manufacturer</th>
<th>Pack Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis A</td>
<td>AVOLDA</td>
<td>Savo/Plaster</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>HAVRIX Junior Monodose</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>ENGERIX (pediatric)</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>ENGERIX</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>ENGERIX-ADT</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>ENGERIX-3mg</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>ENGERIX-10mg</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>ENGERIX-40mg</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>ENGERIX (adult)</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>ENGERIX (adult)</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
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<td>GSK</td>
<td>10</td>
</tr>
<tr>
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<td>IPV-Boostrix</td>
<td>MSD</td>
<td>10</td>
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<tr>
<td>MenC/IPV</td>
<td>MMR Vac Pro</td>
<td>MSD</td>
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www.immunisation.ie

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Dr Brenda Corcoran, Consultant in Public Health Medicine
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ORDER INFORMATION MATERIALS

Visit www.healthpromotion.ie today to order our immunisation information materials. You will find our materials in the immunisation section.

If you register an account on the website you will have access to more materials and be able to order larger quantities for your practice.

VISIT OUR WEBSITE

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Vaccines work

European Immunization Week - Vaccines work

This year, European Immunization Week, taking place from 24-30 April 2017, is “Vaccines Work” and a call to action for everyone on the importance of vaccines. This provides an opportunity for countries and individuals to promote the importance of immunisation to health, well-being and benefits of vaccines.

For more information see our website www.immunisation.ie and European Immunization Week - Romania, European Union countries.pdf


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European Immunization Week - Vaccines work

This year’s European Immunization Week, taking place from 24-30 April 2017, the World Health Organization provides an opportunity for countries and territories to promote the importance of vaccines and the benefits of vaccination. The theme for this year is “Vaccines Work” and a number of media events are planned.

In this era of “fake news” it is more important than ever to promote the value of vaccines.

The flu season continues until the end of April 2017 so all those in the at risk groups who have not had the vaccine should be encouraged to get the vaccine.

Pertussis cases have been reported in babies less than 6 months of age in recent weeks. Tdap vaccine in pregnancy

Intussusceptions may be idiopathic or associated with underlying diseases. Intussusceptions may be idiopathic or associated with underlying diseases. Intussusceptions may be idiopathic or associated with underlying diseases.

Should a baby with a history of intussusception in a

This question is asked to discover if there is a family history of any underlying diseases.

Some of these are outlined below.

A family history of autoimmune disease is a contraindication to rotavirus oral vaccine.

Remember to ask about diseases in the baby's family that affect the immune system in early childhood requiring bone marrow transplant.

A family history of immunosuppression due to other diseases e.g. cancer or treatment is not a contraindication to rotavirus vaccine.

What should you do if the rotavirus vaccine was spat out?

If more rotavirus oral vaccine was spat out rather than swallowed, a single replacement dose should be given straight away.

If the baby spits out more than 10-15 minutes after the initial vaccine, it is considered absorbed and a replacement dose is not needed.

If the regurgitation takes place during the clinic visit, give a replacement dose.

Should a baby with a history of intussusception in a

Vaccines Work • return these vaccines to the National Cold Chain Service • place them in a box store in a secure convenient place • do not keep the vaccines in your fridge.

Fridge spring clean


A baby’s history is the key to finding a possible cause of intussusception.

The question is asked to discover if there is a family history of immunosuppression diagnosed in early childhood requiring bone marrow transplant.

A family history of immunosuppression due to other diseases e.g. cancer or treatment is not a contraindication to rotavirus vaccine.

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Vaccination promotes life-course approach

For more information see


This year, European Immunization Week takes place from 24–30 April 2017. The World Health Organization initiative provides an opportunity for countries and individuals to promote the importance of vaccination and its public health benefits. The theme for this year is “Vaccines Work” and a number of media events are planned.

In this era of “fake news” it is even more important that we all continue to promote the value of vaccination.

Please remember parents the best way to protect their baby from meningococcal C (and the other serious diseases) is to complete the FIVE vaccine visit on time.

For more information see our website www.immunisation.ie

The flu season 2016/17 – not over yet

The flu season continues until the end of April 2017 as all those in the at risk groups who have not had the vaccine should be encouraged to get the vaccine.

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 May 2017.

Note: while some batches do not expire until February 2018, HSE comment that they should be returned once the 2017/18 flu season is over.

The optimal interval is 2 months and public health benefits are greatest if both doses are given within 1 month of each other.

Adolescent MenC and Tdap vaccine uptake

First year students are offered a booster dose of MenC and Tdap vaccine to maintain immunity from serious infectious diseases.

Update of both vaccines was above 85% in 2015/16 but has not reached the 90% target.

MenC and Tdap 2012/13 to 2015/16

Tdap vaccine in pregnancy

Parturient cases have been reported in babies less than 6 months of age (too young to be fully vaccinated).

Tdap should be offered as early as possible after 16 weeks and up to 26 weeks gestation in each pregnancy, to protect pregnant women and their infants.

Tdap can also be given at any time in pregnancy after 36 weeks gestation although it may be less effective in providing passive protection to the infant.

Tdap should be offered in the week after delivery to those who were not vaccinated during their pregnancy.

New guidelines for meningococcal C (MenC) vaccination

The highest rate of meningococcal disease occurs in young adolescents 16-19 years of age.

Please reminded parents the adolescent boosters are the best way to protect their teenager from Meningococcal C (and the other serious diseases).

Vaccination uptake rates

Vaccination uptake rates at 12 and 24 months of age.

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Rate 12 months</th>
<th>Rate 24 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hib</td>
<td>98%</td>
<td>97%</td>
</tr>
<tr>
<td>DTP</td>
<td>97%</td>
<td>96%</td>
</tr>
<tr>
<td>Polio</td>
<td>96%</td>
<td>95%</td>
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<tr>
<td>Measles</td>
<td>95%</td>
<td>94%</td>
</tr>
<tr>
<td>MMR</td>
<td>95%</td>
<td>94%</td>
</tr>
<tr>
<td>6in1 vaccine</td>
<td>95%</td>
<td>94%</td>
</tr>
</tbody>
</table>

Hib, booster and PCV13 are 98%, 97% and 99% respectively.

Immunisation uptake statistics at 12 and 24 months of age/quarter 3 2016

Meningococcal C uptake is especially important as it is the only vaccine given to infants. The highest rate of meningococcal disease occurs in young adolescents 16-19 years of age.

Please remember parents the adolescent boosters are the best way to protect their teenager from Meningococcal C (and the other serious diseases).

Check out your local area uptake rates at

http://www.hse.ie/eng/health/immunisation/hcpinfo/hivaciveptake.html

Fridge spring clean

To avoid vaccination errors, never leave expired vaccines in your fridge.

In May, please return all expired flu vaccines from the fridge.

If more rotavirus oral vaccine was spat out rather than swallowed, a single replacement dose should be given straight away.

If the baby spits out more than 10-15 minutes after the initial vaccine it is considered absorbed and a replacement dose is not needed.

Should a baby have a history of intussusception in a sibling have the rotavirus oral vaccine?

A baby with a history of intussusception in a sibling as a contraindication to the rotavirus oral vaccine.

Should a baby with a history of intussusception in a sibling have the rotavirus oral vaccine?

The NIAC immunisation guidelines do not include a family history of intussusception in a sibling as a contraindication to receiving the rotavirus oral vaccine.

See further information at frequently asked questions on the new vaccine schedule available at

http://www.hse.ie/eng/health/immunisation/hcpinfo/vaccineordering/17vaccine-ordering.html

What should you do if rotavirus vaccine was spat out?

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</tr>
<tr>
<td>PCV</td>
<td>PREVENAR 13</td>
<td>Pfizer</td>
<td>10</td>
</tr>
<tr>
<td>Hib</td>
<td>PREVENAR 10</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>MMR</td>
<td>MMR vac Pro</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>Rose</td>
<td>ROTARIX</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>Hib</td>
<td>INFANRIX</td>
<td>MSD</td>
<td>10</td>
</tr>
</tbody>
</table>

**Adult Vaccines**

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Product Name</th>
<th>Manufacturer</th>
<th>Pack Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Td</td>
<td>OUT-BOOSTER</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>Pneumococcal</td>
<td>PNEUMOVAX 23</td>
<td>MSD</td>
<td>10</td>
</tr>
</tbody>
</table>

**Vaccines Used by HSE**

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Product Name</th>
<th>Manufacturer</th>
<th>Pack Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hib invent</td>
<td>TYLENOL 1750</td>
<td>ASD</td>
<td>10</td>
</tr>
<tr>
<td>4 in 1</td>
<td>INFANRIX-IPV</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>MMR invent</td>
<td>PREVENAR 13</td>
<td>Pfizer</td>
<td>10</td>
</tr>
<tr>
<td>MMR</td>
<td>MMR vac Pro</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>Tdap</td>
<td>BOOSTRIX</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>Hib invent</td>
<td>PNEUMOVAX 23</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>MenC</td>
<td>MENJUGATE</td>
<td>GSK</td>
<td>10</td>
</tr>
</tbody>
</table>

**Restricted Vaccines Requiring Authorisation**

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Product Name</th>
<th>Manufacturer</th>
<th>Pack Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis A</td>
<td>ADVAMA</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>HAVRIX Junior Monodose</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>ENGERIX</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>ENGRIX (pediatric)</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>PEGIFIX</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>BIAXPRO 5mg</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>BIAXPRO 10mg</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>BIAXPRO 40mg</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis A+B</td>
<td>TYLENIX (adult)</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>Hepatitis A+B</td>
<td>TYLENIX (pediatric)</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>4 in 1</td>
<td>INFANRIX</td>
<td>GSK</td>
<td>10</td>
</tr>
<tr>
<td>Tdap/IPV</td>
<td>IPV-Boostrix</td>
<td>MSD</td>
<td>10</td>
</tr>
<tr>
<td>MenC/2013V</td>
<td>MENJUGATE</td>
<td>GSK</td>
<td>10</td>
</tr>
</tbody>
</table>

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**HPV vaccine catch up opportunity for girls in second level school**

HPV vaccination is cancer prevention.

The HSE vaccination teams are now visiting schools to provide the second dose of the HPV vaccine. If girls missed out on the first dose of HPV vaccine in September they can now start the HPV vaccine schedule. Parents are urged to protect their daughters against cervical cancer by ensuring they receive HPV vaccine.

Information leaflets misinterpreting vaccine pharmacovigilance data on Gardasil HPV vaccine give false information on vaccine side effects and continues to be distributed to parents by groups and advertised in some local papers. The NIO continues to work with all key stakeholders to correct this misinformation.

- HPV vaccine catch up opportunity for girls in second level school
- Measles outbreaks in Europe
- European Immunization Week – Vaccines work
- Vaccine uptake rates still below target for MenC vaccine
- Adolescent MenC and Tdap vaccine uptake
- Timing of primary childhood immunisations
- The flu season 2016/2017 not over yet
- Tdap vaccine during pregnancy
- Temporary changes in packaging of Booster (Tdap) and Menjugate (polyvalent MenC vaccines)
- Fridge spring clean
- Vaccine returns service
- Batch numbers
- Common queries about rotavirus oral vaccine
- List of vaccines available from the National Cold Chain Service

**Measles outbreaks in Europe**

Measles outbreaks are ongoing in Romania, Italy, Austria and Germany.

In Romania there have been more than 3000 cases of measles and 17 deaths reported since September 2016. Cases have also been reported in Belgium and Italy that have been epidemiologically linked to the current outbreak in Romania.
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In Australia, where the vaccine programme commenced in 2007, the HPV vaccine has prevented 1 in every 2 cervical cancers and up to 75% of precancers.

The President of the Royal College of Physicians of Ireland, Professor Frank Murray strongly urges all healthcare professionals to promote HPV vaccine. “We, as healthcare providers, must collectively inform parents about the benefits of this vaccine and recommend that they consent to having their daughters vaccinated to protect them from becoming cancer patients in future years.”

For more information see www.hpc.ie

Measles outbreaks in Europe

Measles outbreaks are ongoing in Romania, Italy, Austria and Germany.

In Romania there have been more than 2000 cases of measles and 17 deaths reported since September 2016. Cases have also been reported in Belgium and Italy that have been epidemiologically linked to the current outbreak in Romania.

Contents

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• Common queries about rotavirus oral vaccination
• Tdap vaccine during pregnancy
• Vaccine returns service
• Fridge spring clean
• Measles outbreaks in Europe
• HPV vaccine catch up opportunity for girls in second level school

April 2017

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