In this issue:

- Pertussis prevention for new parents
- Varicella and the ACIR history statement
- Varicella – reporting natural immunity to the ACIR
- Time is running out for HPV catch-up doses 2 and 3
- Papscreen has turned 18!
- SAEFVIC
- Warrnambool City Council’s home visiting service
- Hepatitis B vaccine for high-risk contacts
- Aboriginal immunisation coverage data
- Further reading
Pertussis prevention for new parents

- Free Boostrix® vaccine for parents with an infant born from 15 June 2009
- Time limited program
- Order Boostrix vaccine by using the special order form

The Department of Human Services is making available a limited supply of free pertussis containing vaccine (Boostrix) for new parents. The program commenced for parents of infants born from 15 June 2009. Offer Boostrix vaccine to parents as soon as possible after the birth. The supply of Boostrix vaccine is a time limited measure.

Victoria has experienced a sharp increase in pertussis notifications in recent months and the pertussis outbreak is occurring nationwide. The free vaccine program will be reviewed regularly to manage the end of the time limited program. All immunisation providers including maternity services have the opportunity to participate in this program with other immunisation providers.

Babies are at risk from pertussis infection as no protection is passed from the mother to the newborn infant. Infants do not develop sufficient pertussis protection until the three dose course of pertussis containing vaccine is completed. Pertussis is most serious in babies less than six months of age and around one in every 200 infants less than six months of age who catches pertussis will die. There have been two infant deaths in Australia in this outbreak.

Remind parents of the importance of timely vaccination for infants.

A pamphlet, Protect your baby from whooping cough (pertussis) can be ordered for new parents from the following web link:

For information regarding Boostrix vaccine ordering, please call the Immunisation Program on 1300 882 008.

The Year 10 secondary school program for Boostrix vaccine started in January 2004. Therefore younger parents may have already received a Boostrix vaccine and will not require a further dose with the birth of their baby.

The following graph indicates the current pertussis outbreak in Victoria in all age groups.
Varicella and the ACIR history statement

The Australian Childhood Immunisation Register (ACIR) history statement sent to parents when their child attains five years of age will not be complete unless the ACIR have recorded all due vaccines. This includes either the administration of varicella vaccine or a report of ‘natural immunity’ to varicella in the event the child has already had varicella infection.

Varicella vaccine commenced on the National Immunisation Program schedule on 1 November 2005 for babies at 18 months of age. In Year 7 of secondary school, a child who has not had varicella infection or the vaccine is eligible for a free catch-up dose. A child can be vaccinated against varicella if there is uncertainty about the child’s natural immunity status to this disease.

Varicella – reporting natural immunity to the ACIR

1. If a child has had chickenpox, the medical practitioner reports natural immunity to the ACIR.

2. Notification of natural immunity is reported on practice letterhead with the medical practitioner’s signature and provider number (see sample letter).

3. Forward to the ACIR by medical practitioners (not ancillary providers such as councils or community health nurses). Please find attached a sample natural immunity notification letter. This letter can be used as a template for medical practitioners to send natural immunity notifications to the ACIR on their own letterhead.

(Date)

Australian Childhood Immunisation Register
Medicare Australia
GPO Box 295
HOBART TAS 7001

Dear Sir/Madam,

Child name:
Date of birth:
Medicare card number:

I have determined that the above named child has a natural immunity to varicella and does not require vaccination against this disease.

(Signature)

(Medical practitioner name)
(Medicare provider number)
Time is running out for HPV catch-up doses 2 and 3

FREE Gardasil vaccine eligibility:

- Females in Year 7 of secondary school
- Females 13 to 26 years of age who commenced a vaccine course prior to 30 June 2009 have the opportunity to complete the Gardasil course by 31 December 2009
- From 2010 HPV vaccine will be provided to Year 7 secondary school girls (or age equivalent) and any Year 8 secondary school girls (or age equivalent) who commenced the course in the previous year.

Report administered doses of HPV vaccine to the HPV Register
Telephone: 1800 478 734
Internet: www.hpvregister.org.au

Happy 18th birthday PapScreen Victoria!

2009 marks the 18th year of PapScreen Victoria, the Victorian component of the National Cervical Screening Program. To celebrate the thousands of women’s lives saved over the program’s 18-year history, a birthday party was held for key stakeholders, women who have survived cervical cancer and PapScreen and Cancer Council Victoria staff.

PapScreen, together with the Victorian Cervical Cytology Registry and the Victorian Cytology Service, have achieved significant gains in preventing cervical cancer in Victoria since PapScreen was established in 1991.

The Graph shows the actual number of cervical cancer diagnoses over the past 18 years, and the expected additional diagnoses we would have seen without a coordinated program. This is based on pre-PapScreen incidence rates. This equates to a 50 per cent decrease in cervical cancer diagnoses in Victoria over the 18-year period.

All women aged between 18 and 69 who have ever had sex should have a Pap test every two years. The HPV vaccine is NOT a replacement for Pap tests. For more information about cervical cancer, Pap tests or the human papillomavirus vaccine please visit www.papscreen.org.au.

Surveillance of Adverse Events Following Vaccination In the Community (SAEFVIC)

Illustrative case: Bruising post immunisation

A boy was referred to the SAEFVIC Immunisation Safety Clinic by his immunisation provider because of increased bruising noted after his routine 6 month immunisations.

On further history, he was noted to have prolonged bleeding from his heel prick site soon after birth. His parents also commented that he does bruise very easily after a bump or fall.

At the age of 6 months, he had his routine immunisations, and had a bruise that covered half the thigh on one leg. He had had no problems with his 2 and 4 month immunisations.

On examination he had multiple bruises, including unusual locations such as his upper arm, buttock and a large bruise on his chest wall.

Investigations subsequently confirmed he had Haemophilia A (factor VIII deficiency) and he was referred to the paediatric haematologists for ongoing management.

Lesson learnt

This case highlighted how important it is to refer patients who have symptoms beyond what would be normally expected post immunisation. A small bruise may sometimes be seen at an injection site, but on this occasion it was very extensive. Further clinical history and investigations lead to the diagnosis.

For further information or to report any adverse event following immunisation (AEFI) contact SAEFVIC on 1300 882 924.

Warrnambool City Council’s home visiting service

This mum ruptured her achilles tendon playing netball and will spend 10 weeks in a plaster cast. Her 18 month old daughter, Macey, was booked into our immunisation service to have her varicella vaccination but did not attend. A follow-up call to mum about the missed appointment alerted us of her situation. As a result, this family met the criteria for a home visit (impaired mobility, unable to drive, parents live in Melbourne, husband works full time). The outreach service was explained and offered to her and accepted. This ensured Macey received her varicella vaccination on time.

Photo courtesy of Warrnambool City Council Immunisation service and family.

Hepatitis B vaccine for high-risk contacts

Government funded hepatitis B (HBVax II®) vaccine is available to:

- Children and adults living in the same household as a hepatitis B carrier
- Hepatitis B negative person who injects drugs
- Hepatitis B negative prisoners

Please contact the Immunisation Program on Ph. 1300 882 008 to access the hepatitis B vaccine for your specific need.
Aboriginal immunisation coverage data

The Australian Childhood Immunisation Register (ACIR) has released updated coverage data (see Table). Notably the Aboriginal immunisation coverage at five years of age in Victoria is 78%. Only those immunisation services a child has received up to 60 months of age are included in the data.

The ACIR data at 60 to <63 months has been assessed by reporting doses as: Diphtheria, Tetanus, Pertussis dose four or five, Polio dose four and Measles, Mumps, Rubella dose two.

Table: Non-Aboriginal (N) and Aboriginal (Y) percentage rates as at 30 June 2009 for Victoria and Australia

<table>
<thead>
<tr>
<th>60&lt;63 Months</th>
<th>Aboriginal indicator</th>
<th>% Immunised</th>
</tr>
</thead>
<tbody>
<tr>
<td>VIC N</td>
<td></td>
<td>86</td>
</tr>
<tr>
<td>AUS N</td>
<td></td>
<td>83</td>
</tr>
<tr>
<td>VIC Y</td>
<td></td>
<td>78</td>
</tr>
<tr>
<td>AUS Y</td>
<td></td>
<td>79</td>
</tr>
</tbody>
</table>

The ACIR require reporting of Indigenous status for each child when completing a vaccine encounter following immunisation administration. By asking each family if they are Aboriginal or Torres Strait Islander for the purpose of vaccine recording will provide a better understanding of vaccine coverage for Indigenous children.

Resources available

The National Centre for Aboriginal and Torres Strait Islander Statistics at the Australian Bureau of Statistics (ABS) has developed resources as follows:

- Indigenous identification poster
- A brochure explaining to health providers the reason for asking people if they are Aboriginal or Torres Strait Islander
- A brochure explaining to the public why they are being asked the question

To order these resources contact the ABS by email at: indigenous.statistics@abs.gov.au or by phone on 1800 633 216.

Error in reporting: Immunisation Program newsletter, Issue 39, June 2009

The June issue of the Immunisation Program newsletter reported the Victorian 60 month (5 year old) immunisation coverage at 92 percent compared to Australia 88.9 percent. The correct ACIR calculation for the time period for Victoria was 85.57 percent compared to Australia 80.71 percent.

Medicare Australia identified an error in the immunisation coverage rates assessed for the 60<63 month age cohort, as reported by the ACIR. The error in the coverage for this cohort is a result of an incorrect vaccination cut-off date of 66 months being applied to the coverage calculation, instead of the correct cut-off date of 60 months. This means that the 60<63 month coverage rate has been inflated by around eight percent nationally since the reporting of this cohort began in March 2008.

Medicare Australia has since completed an examination of all immunisation coverage assessments and this has confirmed that all other assessments are correct. Medicare Australia apologised for the error and any inconvenience caused.

Further reading

The National Centre for Immunisation Research and Surveillance (NCIRS) has updated the fact sheet ‘PERTUSSIS VACCINE FOR AUSTRALIAN CHILDREN/ADULTS: INFORMATION FOR IMMUNISATION PROVIDERS’.

Information about pertussis includes disease and epidemiology, who should be vaccinated, vaccine formulation, vaccine efficacy and safety. The new version is available from the NCIRS website at:


Contact

For further information on the Immunisation Program please contact:

**Immunisation Program, Department of Human Services**

50 Lonsdale Street, Melbourne 3000

**Phone:** 1300 882 008  
**Fax:** 1300 768 088  
**Email:** immunisation@dhs.vic.gov.au  