Recommendations for the use of Pneumovax 23® in adults

- A single dose of Pneumovax 23® should be given to Australian adults at 65 years of age. Every effort should be made to provide a dose to anyone aged >65 years who has not previously received a dose of Pneumovax 23®.
- For non-Indigenous adults aged >65 years who do not have any condition that predisposes them to an increased risk of IPD (see Table A), a repeat dose of Pneumovax 23® is no longer recommended.
- For adults aged ≥65 years who have a condition that predisposes them to an increased risk of IPD (see Table A), a second dose (a single revaccination) of Pneumovax 23® is recommended. This dose is to be given ≥five years after the first dose. (The recommendation for this population subgroup is unchanged.)
- Recommendations for the use of Pneumovax 23® in those <65 years, including for Aboriginal and Torres Strait Islander adolescents and adults, are unchanged from the 9th edition of The Australian Immunisation Handbook.

Table A: Risk factors predisposing adolescents and adults to invasive pneumococcal disease (IPD)

<table>
<thead>
<tr>
<th>A. Underlying chronic medical conditions that predispose to IPD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asplenia, either functional (including sickle-cell disease) or anatomical; where possible, the vaccine should be given at least 14 days before splenectomy</td>
</tr>
<tr>
<td>Impaired immunity, including HIV infection before the development of AIDS, acute nephrotic syndrome, multiple myeloma, lymphoma, Hodgkin’s disease and organ transplantation</td>
</tr>
<tr>
<td>Chronic illness, including chronic cardiac, renal, or pulmonary disease, diabetes, alcohol-related problems</td>
</tr>
<tr>
<td>CSF leak</td>
</tr>
</tbody>
</table>

| B. Tobacco smokers |

Recommendations for the use of Pneumovax 23® in adults (continued)

Revaccination with 23vPPV for people ≥15 years of age

<table>
<thead>
<tr>
<th>Primary dose 23vPPV (First dose) given to</th>
<th>First 23vPPV revaccination (Second dose)</th>
<th>Second 23vPPV revaccination (Third dose)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Indigenous adults ≥65 years without any underlying chronic medical conditions who are not tobacco smokers</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Non-Indigenous adults ≥65 years with underlying chronic medical conditions or smoker</td>
<td>5 years after first dose</td>
<td>No</td>
</tr>
<tr>
<td>Non-Indigenous adults &lt;65 years with underlying chronic medical conditions or smoker</td>
<td>5 years after first dose</td>
<td>Either 5 years after first revaccination (second dose) or at 65 years of age, whichever is later</td>
</tr>
<tr>
<td>Indigenous adults aged ≥50 years</td>
<td>5 years after first dose</td>
<td>No</td>
</tr>
<tr>
<td>Indigenous adults aged &lt;50 years with underlying chronic medical conditions or smoker</td>
<td>5 years after first dose</td>
<td>Either 5 years after first revaccination (second dose) or at 50 years of age, whichever is later</td>
</tr>
<tr>
<td>Asplenic individuals</td>
<td>5 years after first dose</td>
<td>Either 5 years after first revaccination (second dose) or at 50 years of age (for Indigenous adults), or at 65 years of age (for non-Indigenous adults), whichever is later</td>
</tr>
</tbody>
</table>

Update on Prevenar 13®

Infants who received their Prevenar 13® vaccine at any point in their primary vaccine schedule at ages two, four and six months or four and six months or at six months only, do not require the supplementary dose from 12 months of age. The only consideration for a booster dose would be if the child has a high risk medical condition that predisposes them to invasive pneumococcal disease.

A single free supplementary dose of Prevenar 13® will be provided to children aged between 12 and 35 months who have completed their primary vaccine course with the Prevenar vaccine. This will ensure these children can also benefit from the improved vaccine.

Prevenar 13® protects against 13 strains of pneumococcal disease to broaden the protection for children against pneumococcal bacteria. The supplementary program is available for one year from 1 October 2011 to 30 September 2012.

Immunisation newsletter goes green

The Immunisation newsletter is now wrapped in Biowrap - an environmentally friendly plastic wrap that is fully degradable. It is printed on chlorine free paper made from recycled sugar cane.
**Boostrix® vaccine ends 30 June 2012**

The time limited free Boostrix® vaccine program for parents of newborn babies is due to end on 30 June 2012. The government-funded vaccine program commenced on 15 June 2009 in response to the increasing incidence of pertussis notifications in Victoria. Mothers should ideally have the vaccine administered prior to discharge from hospital or as soon as possible after the birth of the baby. The partner should have the Boostrix® vaccine while the mother is pregnant or as soon as possible after the birth.

If Boostrix® vaccine has previously been administered to either parent with an earlier pregnancy, or in the Year 10 secondary school program, another dose is not required at this time.

**New Commonwealth pertussis resource available**

Free pertussis information brochures can be ordered online from the Immunise Australia Program website at: [http://immunise.health.gov.au/](http://immunise.health.gov.au/). The brochure provides information to identify, protect and prevent against pertussis and is written for the general public.

A letter from the Australian Government Chief Medical Officer outlining the importance of vaccination against pertussis and a brochure is being sent to new parents registering their newborn on their Medicare card. The new parent letter is scheduled to continue until May 2013. The pertussis brochure will also be included in the Centrelink Parent pack.

**New immunisation catch-up aid developed**

A new resource has been developed to assist immunisation providers plan an immunisation catch-up schedule for people who present with an incomplete immunisation history.

This resource provides a table for you to document an individual's immunisation history of vaccines previously administered and the dates they were given. It is designed to develop an individual plan for your patient that they and your service can retain. The plan can be updated as missed vaccines are given, even if another provider gives the vaccine.

The aid includes web links to provide support to plan the catch-up. The web links include, but are not limited to, the National Immunisation Program schedule, The Criteria for use of government vaccine and the RotaTeq cut-off dates. There is also a list of common acronyms regularly seen on immunisation records to assist in understanding antigens administered.


**The Victorian Spleen Register (VSR)**

**Do you know someone with no spleen or a poorly functioning spleen?**

The VSR is inviting people without a spleen and those with a poorly functioning spleen to participate in this register by calling (03) 9076 3828.

**How does the register work?**

Patients are responsible for their ongoing health after a splenectomy or after a diagnosis of a poorly functioning spleen. The register will assist patients in this aspect with an education and medical package. The patient will be sent information on ways to reduce their risk of acquiring bacterial infections. Once registered, a yearly newsletter will provide patients with the latest medical advice on this aspect of their health, a reminder to check when booster vaccinations are due and a report on VSR activities.

[www.spleen.org.au](http://www.spleen.org.au)
Catch-up immunisation quiz

Andrew’s immunisation history shows he is overdue. He is 12 months old and a well toddler with no contraindications to immunisation. Andrew’s date of birth is 1 February 2011.

To date he has had the following vaccines:

- 2 months old: Rota Teq®, Prevenar® and Infanrix hexa®
- 4 months old: Rota Teq®, Prevenar® and Infanrix hexa®

What vaccines will you recommend to his parent to bring him up to date for his age?

**Answers**

- **Two months later: Hiberix® booster dose 4 at 14 months of age.**
- **Now: Infanrix hexa® dose 3; Prevenar 13® dose 3; Neisvac® dose 1; Priorix® dose 1.**

Influenza vaccination for pregnant women should be routine

A new statement from the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) November 2011:

Influenza vaccination during pregnancy should be routine. Safety is well established and both maternal and infant benefit is now proven. Preventing influenza during pregnancy is an essential part of antenatal care because pregnant women are at an increased risk of serious illness due to influenza. Excess morbidity and mortality for pregnant women infected with influenza compared with non-pregnant women of similar age who are infected with influenza has been noted during pandemics as long ago as 1918 but drew public and professional attention most recently during 2009.

To read more, please visit RANZCOG, New College Statement in the Women’s Health section at: [http://www.ranzcog.edu.au/](http://www.ranzcog.edu.au/)

2012 seasonal influenza vaccine coming

**Who is eligible for annual free influenza vaccine?**

People who can receive free influenza vaccine in 2012 are:

- 65 years of age and over
- pregnant women
- Indigenous people 15 years of age and over
- residents of nursing homes and other long-term care facilities.
- any person six months of age and over with a condition predisposing them to severe influenza illness, who requires regular medical follow up or hospitalisation, such as: cardiac disease, chronic respiratory disease, impaired immunity or chronic neuromuscular disease.

**Pre-allocated initial delivery**

The initial stock of the 2012 seasonal influenza vaccine and Pneumovax23® vaccine will be pre-allocated to medical centres, community health centres and Aboriginal health services. Do not book patients for their influenza vaccine until your stock has arrived. After the initial delivery has arrived you can place further orders.

To view your pre-allocated stock or to download the government funded vaccine order form, please visit: [www.health.vic.gov.au/immunisation](http://www.health.vic.gov.au/immunisation)

All 2011 influenza vaccine stock should be discarded into your yellow biohazard clinical waste container.
How to order and receive vaccines

How to order vaccines

1. Use the current vaccine order form at: www.health.vic.gov.au/immunisation

2. Order vaccine stock for one month of use and aim to order once a month.
   - Have one person responsible for managing the vaccine stock.
   - Do not overstock vaccine to maintain air circulation in the vaccine fridge.
   - Allow a small buffer stock while waiting for your vaccine delivery.

3. Complete all sections on the vaccine order form including:
   - the centre account number and delivery address
   - the doctor’s Medical Practitioner registration number or the Health Service Permit number
   - the current stock quantities of each vaccine you are ordering.

4. Submit the vaccine order form via:
   - Fax: 1300 768 088 or email: immunisation@health.vic.gov.au

5. Allow a minimum of three business days for processing and delivery of your vaccine order.
   Note: No country deliveries on a Monday.

6. Consider the different vaccine brands listed in the National Immunisation Program and the number of times they are used to estimate quantity of each vaccine brand. Refer to the following table:

<table>
<thead>
<tr>
<th>Vaccine brand</th>
<th>Age given</th>
<th>Times used on schedule</th>
<th>One month of vaccine use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infanrix hexa and RotaTeq</td>
<td>2, 4 and 6 months</td>
<td>3 times</td>
<td>How many infants visit each month?</td>
</tr>
<tr>
<td>Prevenar 13</td>
<td>2, 4 and 6 months and supplementary single dose</td>
<td>3 times</td>
<td>How many infants and toddlers between 1 and less than 3 years visit each month?</td>
</tr>
<tr>
<td>Priorix</td>
<td>12 months and 4 years</td>
<td>2 times</td>
<td>How many 1 and 4 year olds visit each month?</td>
</tr>
<tr>
<td>Hiberoxix and NeisVacC</td>
<td>12 months</td>
<td>1 time</td>
<td>How many 1 year olds visit each month?</td>
</tr>
<tr>
<td>Varilrix</td>
<td>18 months</td>
<td>1 time</td>
<td>How many 18 month olds visit each month?</td>
</tr>
<tr>
<td>Infanrix IPV</td>
<td>4 years of age</td>
<td>1 time</td>
<td>How many 4 year olds visit each month?</td>
</tr>
</tbody>
</table>

How to receive vaccines

1. Vaccines should be received by cold chain educated practice staff.

2. Sign the delivery docket and return to the courier.

3. Promptly unpack the vaccines into the vaccine fridge; educate all staff on the urgency of this process.

4. Check that the vaccine consignment matches the delivery invoice.

5. Minimise the time that the refrigerator door is open.

6. Rotate newly received vaccines behind the current vaccine stock.

7. To protect them from light and temperature fluctuations, do not remove vaccine from their packets.

8. Check and report any change in the temperature indicators as soon as possible:
   - freeze indicator (COLDMARK): clear bulbs that release a dye at or below 0 °C
   - heat indicator (Bulls eye): colour change in the centre circle on the indicator.

9. If you are concerned about your vaccine delivery, isolate the vaccines in the refrigerator, do not use and contact the Immunisation Section, Department of Health on 1300 882 008 that day or the next business day after delivery.
What vaccines are given in secondary school?

All secondary schools in Victoria are visited by local council immunisation services each year. The school-based program visits adolescents in Years 7 and 10 or age equivalent. The following table lists vaccines offered in these year levels.

<table>
<thead>
<tr>
<th>School Year (age)</th>
<th>Antigen</th>
<th>Vaccine</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year 7 (12-13)</td>
<td>Hepatitis B</td>
<td>HBVaxII Adult</td>
<td>Not given if a course has been completed.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>formulation</td>
<td>Two-dose course 0, 6 months.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Catch-up program ends 31 December 2012.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Final dose can be given in Year 8 if course started in Year 7.</td>
</tr>
<tr>
<td>Year 7 (12-13)</td>
<td>Varicella</td>
<td>Varilrix</td>
<td>Not given if a history of chickenpox disease.</td>
</tr>
<tr>
<td>Year 7 (12-13)</td>
<td>HPV</td>
<td>Gardasil</td>
<td>Girls only.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Call 1300 882 008 to request a dose.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Three-dose course 0, 2 months, 6 months.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Final doses can be given in Year 8 if course started in Year 7.</td>
</tr>
<tr>
<td>Year 10 (15-16)</td>
<td>Diphtheria,</td>
<td>Boostrix</td>
<td>No spacing is required in relation to administration of a recent ADT vaccine.</td>
</tr>
<tr>
<td></td>
<td>Tetanus,</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pertussis</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


Please report administered doses of the HPV vaccine to the National HPV Vaccination Register. **Phone: 1800 478 734**

Website: [www.hpvregister.org.au](http://www.hpvregister.org.au)

Gardasil® vaccine must first be requested by calling the Immunisation Section on 1300 882 008 then completing the order form.

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**New HPV immunisation resource from Cancer Council Victoria**

Cancer Council Victoria has developed a new online video resource on HPV, the HPV immunisation program, and its link to cervical cancer. The educational resource is specifically targeted to 12-13 year olds, with the information presented by young teenage girls in a fun and engaging manner.

The video is accessible to view on the homepage of the cervical cancer vaccine website [www.cervicalcancervaccine.org.au](http://www.cervicalcancervaccine.org.au) and aims to achieve the following:

- **increase awareness of the vaccine and its links to cervical cancer**
- **alleviate any fears or uncertainties teenage girls may have about having the vaccine**
- **encourage girls to talk with their parents about having the vaccine**
- **remind all girls that, whether they are vaccinated or not, Pap tests will still be important in the future.**

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**Contact**

For further information on the Immunisation Section please contact:

**Immunisation Section, Department of Health**

50 Lonsdale Street, Melbourne 3000

**Phone:** 1300 882 008

**Fax:** 1300 768 088

**Email:** immunisation@health.vic.gov.au