



## Immunisation news

### Babies' first immunisations – have you got the right vaccine and having got it, are you reconstituting it?



PHE has been made aware of reports of two issues with the use of Infanrix-IPV+Hib. Firstly, some immunisers have selected the wrong vaccine for primary immunisations. Primary immunisations must be with Infanrix-IPV+Hib (or Pediacel, if you've still got some in your fridge) not Infanrix-IPV. By incorrectly selecting Infanrix-IPV babies will not receive the protection they need against *Haemophilus influenzae* type B (Hib).

Secondly, some immunisers are failing to reconstitute the *Haemophilus influenzae* type B (Hib) component of the Infanrix-IPV+Hib vaccine prior to administration. The Hib component is supplied as a freeze-dried preparation in a separate glass vial that must be reconstituted with the pre-filled syringe containing diphtheria, tetanus, acellular pertussis and inactivated poliomyelitis antigens.

It is important for all immunisers to be familiar with the packaging of Infanrix-IPV+Hib (in the pink packaging) and not to mistake it with the pre-school booster of Infanrix-IPV (in the green packaging) and to ensure that all components of the vaccine are reconstituted as per manufacturer's instructions.

Further information on Infanrix-IPV+Hib vaccine and what actions to take in the event of an administration error can be found in the Information for Healthcare Professionals document at [web link 1](#).

The complete immunisation schedule detailing which brands of vaccine should be used throughout the routine childhood programme can be viewed at [web link 2](#).

## Fluenz Tetra isn't licensed for children under two – everyone knows that, don't they?



PHE has received a number of reports of children aged less than two years receiving the live intranasal vaccine Fluenz Tetra. Whilst this vaccine will produce a good immune response, it is not licensed in those aged less than two years of age as studies have shown they are at increased risk of fever and wheezing in the six weeks post-vaccination. For this reason, children aged from six months to less than two years of age requiring immunisation against flu because they are in a clinical risk group, should be offered inactivated trivalent influenza vaccine. Parents of children who have been inadvertently immunised with the nasal vaccine should be informed about the potential risk of fever and wheezing in the short term but reassured that no long term effects from receiving Fluenz Tetra are anticipated.

Any children in this age group who have inadvertently received Fluenz Tetra for their first dose, and who have not received influenza vaccine previously, should be offered a dose of inactivated vaccine for their second dose at least four weeks later. However, if in the intervening period, the child reaches their second birthday and a second dose of influenza vaccine is required, a further dose of Fluenz Tetra can be given at least four weeks after the first.

## Keep vaccinating to keep flu at bay

As highlighted in last month's issue, flu can continue to circulate well beyond January and February, and whilst it's highly desirable to complete the flu vaccination programme before the end of December, clinicians should apply clinical judgement to assess the needs of individual patients for vaccination during and beyond this time period. In particular, healthcare workers should continue to attend for a flu vaccination because uptake levels are still down on last year's.

## What do parents think about immunisation?

Public Health England has commissioned a new three-year tracking survey to explore parental attitudes to childhood immunisation to inform the planning of future immunisation programmes. Three surveys will be undertaken on an annual basis and the results will build on previous surveys completed over a 20-year period.

The agency, BMG Research, has been commissioned to do the work. Researchers will interview at least 1000 parents of children aged 0-2 and 1000 parents of children aged 3-4, on an England-wide basis, using face to face computer-assisted interviewing. Interviews will be held in randomly selected locations from January 2015 and parents will be recruited door-to-door for these age groups.

The survey will cover parents' experience of the service offered, trust in the healthcare providers and how these relate to their acceptance of the programme, decision-making about vaccination and beliefs about risk of vaccination versus risk of disease. Respondents will not require any prior knowledge to take part. The interviewer guides respondents through the interview, using prompt cards where appropriate.

For more information, see [web link 3](#).

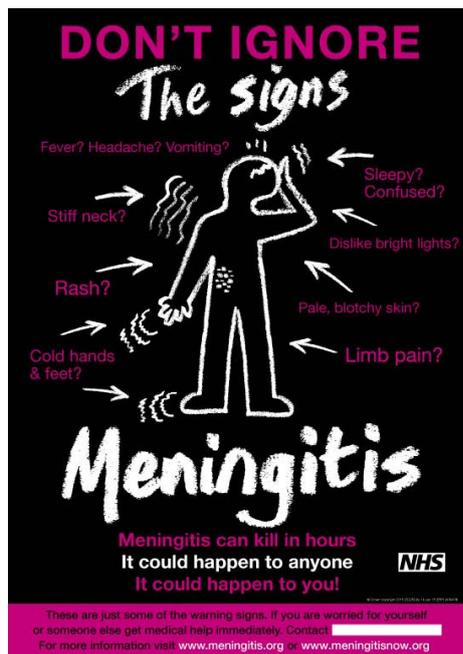
## ImmForm Terms of Use updated

Section 3 of this document, relating to how data should be used, is being updated and will be available at [web link 4](#) in early February.

## Resources

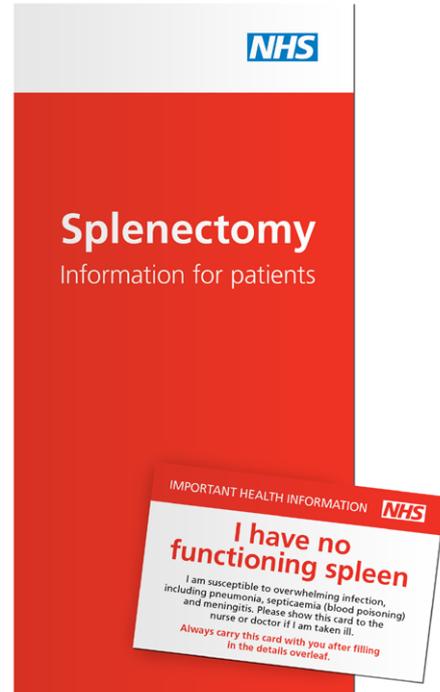
### Splenectomy leaflet and card revamped

These important resources have been updated and re-designed. They can be viewed at [web link 5](#) and ordered in the usual way from the DH orderline at [web link 6](#).



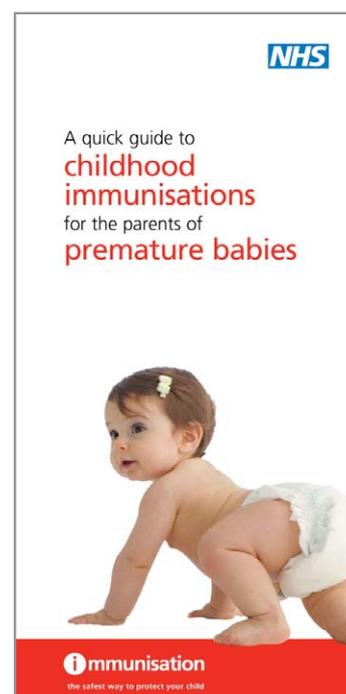
### Don't ignore the signs meningitis poster updated

Now that the Meningitis Trust and Meningitis UK have joined forces to form the charity Meningitis Now, we have updated this poster with links to the new [Meningitis Now](#) web address, alongside the link for the [Meningitis Research Foundation](#). It's available to order at [web link 6](#) in the usual way.

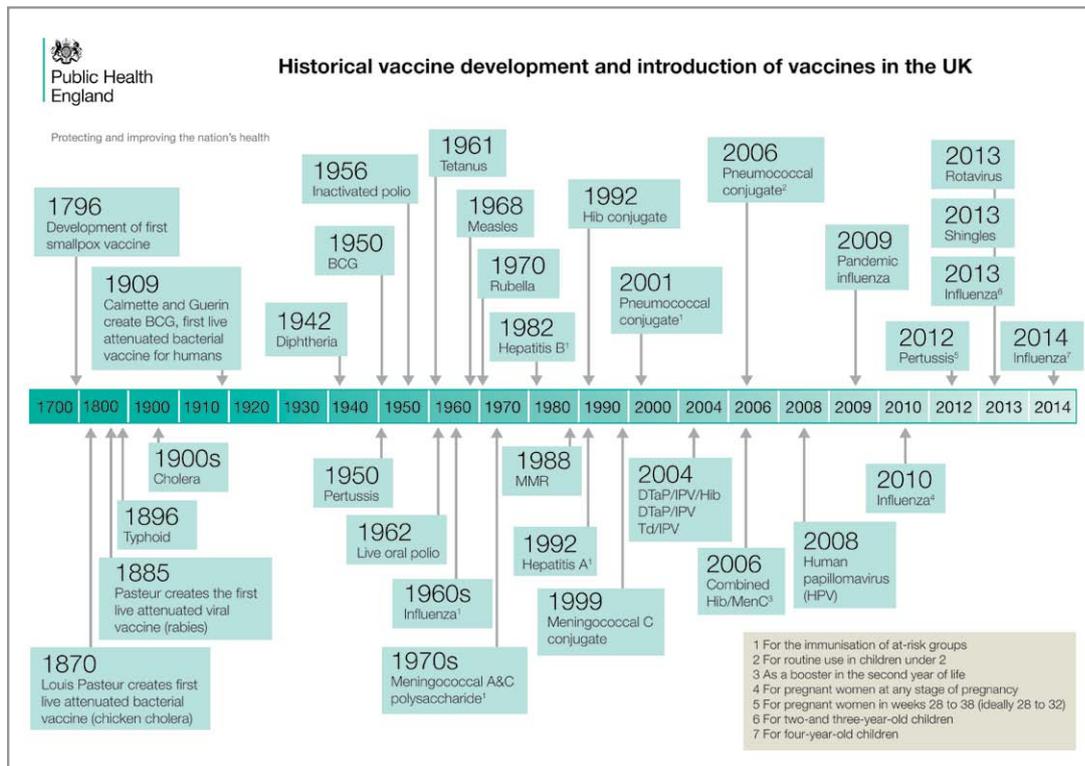


### Immunisations for premature babies

The guidance in this leaflet regarding the administration of the first routine immunisation has been updated, and the schedule has also been updated and shortened to make it more relevant to premature babies, see [web link 7](#).



## When was the MenC vaccine introduced?



This timeline, which shows all the vaccine developments and introductions in the UK, has been updated to include last year's introduction of the influenza vaccine for four-year-olds and can be viewed at [web link 8](#).

## Vaccine supply

### Last chance to order Fluenz Tetra

The final batch of Fluenz Tetra for the 2014/15 flu season will expire on **25 February**, therefore ordering for this vaccine will close at 11.55am on Monday 16 February.

Inactivated flu vaccines (Fluarix Tetra and inactivated influenza vaccine (split virion) BP), remain available to order.

The expiry date should always be checked before use. Expired Fluenz Tetra should be disposed of in line with local policies. To help us evaluate the amount of unused vaccine, please report any disposal through ImmForm's stock incident capture using the reason: Fluenz Tetra vaccine expired before it could be used.

Welsh GPs should adhere to the guidance provided by the Welsh Government on order limits.

## Men C vaccine for freshers

The programme offering a booster dose of meningococcal C conjugate (MenC) vaccine to new university entrants aged between 17 and 25 years of age is extended until March 2015. This programme will offer NeisVac-C to university freshers' to protect them from meningococcal C disease.

When placing orders for Men C vaccine for the freshers' programme please select the product called **'MEN C – NeisVac-C for Adolescents & Freshers'**.

## Boostrix IPV

Boostrix IPV is available for pregnant women to protect their new-borns against whooping cough.

Boostrix IPV should only be used for the pregnant women programme and not for the pre-school booster, or in response to outbreaks. Infanrix IPV is available for the pre-school booster instead.

## Availability of Infanrix IPV Hib and Pediacel

Infanrix IPV + Hib is available to order. Pediacel is not currently available.

Where possible and if local stock allows, it is preferable that the same DTaP/IPV-Hib containing vaccine be used for all three doses of the primary course. However, vaccination should never be delayed because the vaccine used for previous doses is not known or unavailable.

## Zostavax

The second year of the shingles programme started on 1 September 2014 and runs until 31 August 2015, covering those aged 70, 78 and 79 years on 1 September 2014.

Please order Zostavax alongside your usual childhood vaccine ordering to minimise the number of additional orders that have to be processed at this busy time of year.

## PPD2TU (Mantoux test)

Tuberculin purified protein derivative (PPD) containing two tuberculin units per 0.1ml (2TU) is currently available to order but a restriction of one order for one pack every two weeks is in place. Please note that each pack of PPD2TU contains ten vials with a minimum of ten doses per vial, i.e. 100 doses in all.

## BCG vaccine

BCG vaccine is currently available to order but a restriction of one pack per order per week is in place. Please note that each pack of BCG vaccine contains ten vials with a minimum of ten doses per vial, i.e. 100 doses in all.

## European viper venom

Orders for antivenom to the common European viper (adder) are not currently being accepted on ImmForm. We are awaiting further stock which is undergoing testing and ordering is expected to reopen in early 2015. Where possible, in-date stocks of European viper venom antiserum (EVVa) and ViperaTAb held locally should be shared between hospitals as the need arises.

PHE retains a small reserve of stock for emergencies. In an emergency, if you have exhausted all possible avenues for securing EVVa or ViperaTAb locally, you should contact the ImmForm helpdesk on 0844 376 0040 to request emergency stock.

For emergency supply which occurs out of office hours please contact either the Medical Toxicology Information Services (London) on 0207 188 0600 or the Royal Liverpool Hospital on 0151 706 2000 (Bleep the pharmacy).

## Web links

- web link 1 [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/345538/Infanrix-IPV\\_Hib\\_information\\_for\\_healthcare\\_professionals\\_August\\_2014.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/345538/Infanrix-IPV_Hib_information_for_healthcare_professionals_August_2014.pdf)
- web link 2 [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/315489/PHE-Routine-childhood-imm-July-2014-03.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/315489/PHE-Routine-childhood-imm-July-2014-03.pdf)
- web link 3 [www.bmgresearch.co.uk/public-health-england-survey-parental-attitudes-childhood-immunisation/](http://www.bmgresearch.co.uk/public-health-england-survey-parental-attitudes-childhood-immunisation/)
- web link 4 <https://www.immform.dh.gov.uk/help/ImmForm%20Terms%20of%20Use%20V1.0.pdf>
- web link 5 <https://www.gov.uk/government/publications/splenectomy-leaflet-and-card?ghgh>
- web link 6 [https://www.orderline.dh.gov.uk/ecom\\_dh/public/home.jsf](https://www.orderline.dh.gov.uk/ecom_dh/public/home.jsf)
- web link 7 <https://www.gov.uk/government/publications/a-quick-guide-to-childhood-immunisation-for-the-parents-of-premature-babies>
- web link 8 <https://www.gov.uk/government/publications/vaccination-timeline>