



Important

Change of vaccine for routine primary baby immunisation programme

This is the good news that later this year Infanrix hexa[®] (DTaP/IPV/Hib/HepB) will replace both Pediacel[®] and Infanrix-IPV+Hib[®] (DTaP/IPV+Hib) for primary baby immunisations. This change means that as well as providing protection against diphtheria, tetanus, pertussis, polio and Hib, **babies will also be given protection against hepatitis B virus.**

The planned change only involves the type of vaccine used. There is no change to the immunisation schedule and the current planning assumption is that babies born on or after 1 August will be offered Infanrix hexa[®] (DTaP/IPV/Hib/HepB) from late September/early October 2017, at the ages of 8, 12 and 16 weeks as part of the routine childhood immunisation schedule.

The exact dates will depend on the remaining availability of pentavalent vaccine.



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Table one: Routine childhood immunisation schedule following the introduction of Infanrix hexa®

Age	Diseases protected against	Vaccines used	
8 weeks	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B	Infanrix hexa	DTaP/IPV/Hib/HepB (thigh)
	Pneumococcal	Prevenar 13	Pneumococcal conjugate vaccine (PCV) (thigh)
	Meningococcal group B	Bexsero	MenB (left thigh)
	Rotavirus	Rotarix	Rotavirus (oral)
12 weeks	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B	Infanrix hexa	DTaP/IPV/Hib/HepB (thigh)
	Rotavirus	Rotarix	Rotavirus (oral)
16 weeks	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B	Infanrix hexa	DTaP/IPV/Hib/HepB (thigh)
	Pneumococcal	Prevenar 13	Pneumococcal conjugate vaccine (PCV) (thigh)
	Meningococcal group B	Bexsero	MenB (left thigh)

Implications for the neonatal selective immunisation programme for babies at risk of hepatitis B

The introduction of Infanrix hexa® (DTaP/IPV/Hib/HepB) does not remove the need for existing programmes of screening for hepatitis B in pregnancy and selective immunisation of neonates born to hepatitis B positive mothers. These babies are exposed to hepatitis B during delivery and are at high risk of acquiring persistent hepatitis B infection without timely immunisation starting immediately at birth.

Pregnant women will still be offered screening for hepatitis B during pregnancy and babies born to hepatitis B positive mothers will still need to receive a dose of monovalent hepatitis B vaccine at birth, and if indicated, also given hepatitis B immunoglobulin (HBIG). These babies will also require a dose of monovalent hepatitis B vaccine at 4 weeks of age.

Those born after 1 August 2017, however, should receive Infanrix hexa® (DTaP/IPV/Hib/HepB) at 8 weeks of age, instead of a dose of monovalent hepatitis B vaccine. They should then receive Infanrix hexa® (DTaP/IPV/Hib/HepB) again at 12 and 16 weeks.

Babies born to hepatitis B positive mothers will still require a dose of monovalent hepatitis B vaccine at one year of age, along with a blood test for HBsAg to exclude infection, but no longer require a pre-school booster dose of monovalent hepatitis B vaccine pre-school (table two).

Further information, training materials and a national template PGD for Infanrix hexa® (DTaP/IPV/Hib/HepB) will be made available in due course

Table two: Hepatitis B in the Immunisation schedule for routine childhood and selective neonatal hepatitis B programmes following the introduction of the Infanrix hexa®

Age		Routine childhood		Babies born to hepatitis B infected mothers
Birth	X		✓	Monovalent HepB (Engerix B or HBvaxPRO Paediatric) (with HBIG if indicated)
4 weeks	X		✓	Monovalent HepB (Engerix B or HBvaxPRO Paediatric)
8 weeks	✓	DTaP/IPV/Hib/HepB (Infanrix hexa)	✓	DTaP/IPV/Hib/HepB (Infanrix hexa)
12 weeks	✓	DTaP/IPV/Hib/HepB (Infanrix hexa)	✓	DTaP/IPV/Hib/HepB (Infanrix hexa)
16 weeks	✓	DTaP/IPV/Hib/HepB (Infanrix hexa)	✓	DTaP/IPV/Hib/HepB (Infanrix hexa)
1 year	X		✓	Monovalent HepB (Engerix B or HBvaxPRO Paediatric) Test for HBsAg

Vaccine ordering and stock management

The vaccine is expected to be made available to order through ImmForm from 1 September 2017 in readiness for the planned switch over in late September/early October 2017. Up to this changeover date, to avoid potential wastage, ImmForm customers should aim to run down the volume of Pediacel[®] and Infanrix-IPV+Hib[®] vaccines held in stock and only order the minimum volume to complete vaccination of babies born before August. Infanrix hexa[®] should only be given to older babies (i.e. born before 1 August) if there are no locally held vaccine stock and no further Pediacel[®] or Infanrix-IPV+Hib[®] can be ordered through ImmForm.

Further details and any amendments to this date or arrangements will be provided through future issues of Vaccine Update.

Following the introduction of Infanrix hexa[®] for babies born on or after 1 August, in order to avoid any wastage of the existing vaccines used for this programme, any remaining stocks of Pediacel[®] and Infanrix-IPV+Hib[®] (DTaP/IPV+Hib) should be used for babies who have already started courses with Pediacel[®] or Infanrix-IPV+Hib[®] (second or third dose), or if vaccine still remains then as a temporary measure this can be used for pre-school boosting at the age of 3 years and 4 months.

Once these stocks are used up, pre-school boosting should revert back to Repevax[®] (dTaP/IPV).

Shingles immunisation programme 2017/18

Prior to April 2017, shingles vaccine was offered routinely to individuals aged 70 years with a phased catch up programme based on age as of 1 September that year. However from 1 April, in order to simplify the delivery of programme, eligibility has been changed to the date a patient turns 70 years (routine cohort) and 78 years (catch up cohort).

This change is likely to have an impact on shingles vaccine supply and so, for 2017/18 providers are encouraged to maintain their existing approach where the majority of individuals are vaccinated during the influenza season. Patients who attain the age of 70 or 78 in 2017/18 can however be opportunistically immunised at any point in the year.

Patients remain eligible for the shingles vaccine up until their 80th birthday. Those with existing eligibility for the vaccine but who missed it, can be offered immunisation on an opportunistic basis, please see table three below.

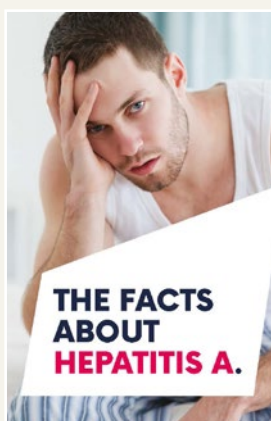
The shingles resources are currently being revised and will be published shortly.

Table three: Individuals with existing eligibility for the national shingles vaccination programme

Eligible since	Dates of birth (routine cohort)	Dates of birth (catch-up cohort)
2013/14	02/09/1942 to 01/09/1943	
2014/15	02/09/1943 to 01/09/1944	
2015/16	02/09/1944 to 01/09/1945	
2016/17	02/09/1945 to 01/09/1946	01/04/1937 to 01/09/1938 (up to their 80 th birthday)
2017/18	Born on or after 02/09/1946 and aged 70 years	Born on or after 02/09/1938 and aged 78 (up to their 80 th birthday)

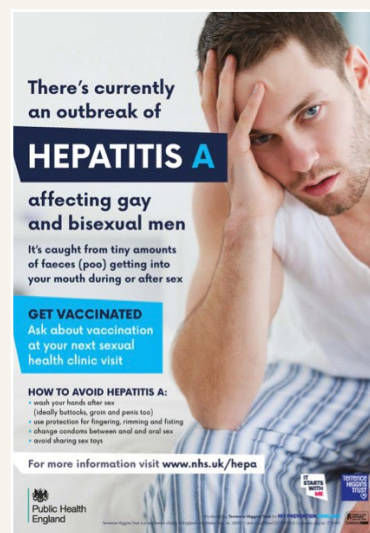
Hepatitis A: preventing infection in men who have sex with men

We have produced a new poster and leaflet in conjunction with the Terence Higgins Trust and it is now available to order from the DH health and social care orderline.



Leaflet

Product code:7263501



Poster

Product code:7263500

Vaccine Supply

MMR vaccines

To remind readers, there are 2 MMR vaccines supplied centrally, Priorix and MMRvaxPro, and they are interchangeable in the MMR vaccination schedule. Orders for Priorix are currently restricted to 6 packs per order per week, in order to balance central stocks. The alternative vaccine, MMRvaxPro, remains available to order without restriction.

These controls apply to customers in England, Scotland and Wales. Should additional MMRvaxPro be required due to local requirements please contact the ImmForm helpdesk.

Vaccines for the children's flu programme

All Fluenz Tetra® has now expired

All batches of Fluenz Tetra® supplied for the 2016-17 children's flu vaccination programme **have now expired**. Please ensure that the expiry date is always checked before use and that any expired stock is disposed of in line with local policies.

Please record any stock that is disposed of due to expiry before use through the ImmForm website, on the Stock Incident page.

Inactivated flu vaccines for the children's flu programme nearing expiry

Centrally supplied inactivated flu vaccine Fluarix Tetra® (suitable for children over 3 years of age) has an expiry date of 30 April 2017. **Ordering will close on Wednesday 12 April for this vaccine.** Centrally supplied Inactivated Influenza Vaccine (Split Virion) BP (suitable for children over 6 months) has an expiry date of 31 May 2017, and will remain available to order until around 2 weeks before its expiry date.

Providing a second dose of flu vaccine after all Fluenz Tetra® has expired

In the event that you still need to give a second dose of flu vaccine four weeks after the first dose (for example, for children in clinical risk groups aged two to under nine years who have not received influenza vaccine before), then it is safe and effective to give inactivated flu vaccine as a second dose.

Reporting any remaining unused flu vaccine ordered for the children's flu programme

As the vaccination period for flu draws to a close, it is important to remember that any leftover vaccine which is held locally, but has not been used is recorded on ImmForm, on the Stock Incident page. This is to ensure that all stock is accounted for and supports efforts across the system to reduce the level of vaccine which may go unused at the end of the season. Please ensure that you select the appropriate reason (i.e. 'expired before use' or 'cold chain failure') when recording the disposal of any stock.

Vaccines not procured and supplied centrally

Below is an update on the vaccine supply situation for vaccines not procured and supplied centrally for national immunisation programmes (e.g. purchased direct from manufacturers for travel and risk groups).

Hepatitis A vaccine

Adult vaccine

- Sanofi Pasteur currently have limited supplies of Avaxim available.
- MSD are out of stock of VAQTA Adult and estimate that supplies will resume around mid-June.
- GSK are currently in stock of single packs of Havrix adult pre-filled syringes. Havrix pre-filled syringe 10 packs are unavailable until 2018.

Paediatric vaccine

- MSD are out of stock of VAQTA Paediatric and estimate that supplies will resume around August.
- GSK have paediatric doses of Havrix Monodose available.

Hepatitis B vaccine

Adult vaccine

- MSD currently have the HBVAXPRO 40 micrograms preparation in stock. The HBVAXPRO 10 micrograms preparation is currently out of stock, anticipated to be back in stock around early July.
- GSK have Engerix B pre-filled syringe singles and Engerix B vials in stock. Engerix B pre-filled syringe 10 packs are unavailable until 2018.
- GSK have supplies of Fendrix available.

Paediatric vaccine

- MSD HBVaxPro 5 micrograms is in stock but ordering restrictions are in place until around late-June.
- GSK have paediatric doses of Engerix B in stock.

Combined hepatitis A and hepatitis B vaccine

- Supplies of the adult and paediatric presentation (Twinrix and Ambirix) remain available from GSK.

The supply situation for these vaccines is based on manufacturers' disclosure to the Department of Health and Public Health England. The supply situation is dynamic and shortages from one supplier combined with increased demand due to outbreaks (e.g. hepatitis A clusters among men who have sex with men (MSM)) may put additional pressures on other manufacturers.

During this period of constrained hepatitis A and B vaccine supply, we advise that you:

- prioritise post exposure prophylaxis indications, including but not limited to:
 - paediatric hepatitis B vaccine for infants in the selective neonatal hepatitis B immunisation programme, i.e. infants born to hepatitis B infected mothers
 - close contacts of cases of acute hepatitis A and B
 - percutaneous exposure to blood (potentially contaminated with hepatitis B), e.g. needlestick injuries
- offer combined hepatitis A and B vaccine if monovalent hepatitis A vaccine is not available for pre-exposure prophylaxis for at-risk MSM (those with a new or casual partner in the last 3 months) in hepatitis A outbreak areas; combination hepatitis A and B vaccine is also preferred for those MSM who have no or incomplete hepatitis B vaccination
- consider offering higher dose adult preparations of monovalent hepatitis B vaccine for pre-exposure prophylaxis in adults
- exercise restraint and observe manufacturers' restrictions when ordering vaccines
- consider ordering other presentations if the preferred or usual option is not available, e.g. vials instead of pre-filled syringes

Vaccine administration should never be delayed for infants born to hepatitis B infected mothers, as these infants have been exposed to a substantial volume of infectious blood during the birthing process. Please see Vaccine update: Issue 248, June 2016 ([weblink 1](#)) for further advice on alternative products if paediatric vaccine is not available.

Typhoid vaccine

- GSK Typherix vaccine is currently available in packs of 10. This stock has an expiry date of August 2017 and will be available to purchase until May.
- Sanofi Pasteur are in stock of Typhim Vi.
- PaxVax are in stock of the oral vaccine, Vivotif.

Combined hepatitis A and typhoid vaccine

- Sanofi Pasteur are experiencing supply constraints with ViaTIM until around October 2017.
- GSK is out of stock of Hepatyrix until at least 2019.

Rabies vaccine

- Sanofi Pasteur have intermittent supply constraints with the licensed preparation (Rabies Vaccine BP) until June and customers may wish to discuss obtaining supplies with Sanofi Pasteur directly.
- GSK currently have a new presentation of pre-filled syringes and vials of Rabipur in stock.

Pneumococcal Polysaccharide Vaccine (PPV)

- MSD are out of stock until late-April.

Bank Holiday deliveries

Due to the Easter Bank Holiday, and the Early May Bank Holiday there will be **no deliveries or order processing** by Movianto UK on Friday 14 April, Monday 17 April 2017 and Monday 1 May 2017. Please see the table below for revised order and delivery dates.

For customers with delivery dates of Friday or Monday, please be aware that after the 7 and 10 of April, your next available delivery day will be the 21 and 24 April respectively. There will also be no deliveries on 1st May and the next available delivery day following this will be the 8 May.

For customers requiring a scheduled delivery on the 18 and 19 April, orders will need to be placed before the Easter Bank Holiday by 11:55AM on Wednesday 12 and Thursday 13 April respectively.

For customers requiring a scheduled delivery on the 2 or 3 May, orders will need to be placed before the Early May Bank Holiday by 11:55AM on Thursday 27 and Friday 28 April respectively.

You are reminded to be prepared for the break in deliveries and to order accordingly. Please make sure you have sufficient room in your fridge for any additional vaccine you wish to stock over this holiday period, bearing in mind the recommendation that only two to four weeks of vaccine stock be held at any one time.

Easter and early May Bank Holiday orders and deliveries – Revised Table

Delivery date	Order cut-off date	Order cut-off time
Wednesday 12 April 2017	Monday 10th April 2017	11:55 AM
Thursday 13 April 2017	Tuesday 11th April 2017	11:55 AM
Friday 14 April 2017	Closed – No deliveries	
Monday 17 April 2017	Closed – No deliveries	
Tuesday 18 April 2017	Wednesday 12th April 2017	11:55 AM
Wednesday 19 April 2017	Thursday 13th April 2017	11:55 AM
Thursday 20 April 2017	Tuesday 18th April 2017	11:55 AM
Friday 21 April 2017	Wednesday 19th April 2017	11:55 AM
Monday 24 April 2017	Thursday 20th April 2017	11:55 AM

Delivery date	Order cut-off date	Order cut-off time
Tuesday 25 April 2017	Friday 21th April 2017	11:55 AM
Wednesday 26 April 2017	Monday 24th April 2017	11:55 AM
Thursday 27 April 2017	Tuesday 25th April 2017	11:55 AM
Friday 28 April 2017	Wednesday 26th April 2017	11:55 AM
Monday 1 May 2017	Closed – No deliveries	
Tuesday 2 May 2017	Thursday 27th April 2017	11:55 AM
Wednesday 3 May 2017	Friday 28th April 2017	11:55 AM
Thursday 4 May 2017	Tuesday 2nd May 2017	11:55 AM
Friday 5 May 2017	Wednesday 3rd May 2017	11:55 AM

InterVax BCG vaccine and leaflets

The manufacturer's information leaflet that comes packaged within each box of InterVax BCG vaccine should be discarded and the PHE leaflets for patients and professionals supplied with each delivery should be referred to instead. It is important that the additional PHE leaflets delivered with each pack are provided to the healthcare workers administering the vaccine. This ensures that both patients and healthcare workers are informed about the vaccine and its use. Electronic versions of these documents are also available on the PHE webpages available at [weblink 2](#).

The BCG vaccine continues to be made available in line with prioritisation advice to ensure this stock is directed to those at greatest risk. The central stock levels are closely monitored and restrictions on volumes ordered may be re-applied in future depending on demand and the security of future incoming supplies.

Providers are encouraged to continue to organise the administration of BCG vaccinations in ways that optimise the use of the multi-dose ampoules, for example by scheduling patients requiring BCG vaccine into the same clinic. For detailed information about the InterVax BCG vaccine please see the special edition of Vaccine Update available at [weblink 3](#).

Change to Rabipur presentation

A reminder that from mid-2017, the presentation of Rabipur supplied by PHE will change from a powder in a vial with a separate ampoule of solvent solution, to a vial of powder with a disposable pre-filled syringe containing solvent. Images for the new pack are shown below.



« Old pack



« New pack

Web links

- web link 1 https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/535573/vaccine-update-248-June-2016.pdf
- web link 2 <https://www.gov.uk/government/collections/immunisation#tuberculosis>
- web link 3 <https://www.gov.uk/government/publications/vaccine-update-issue-248-june-2016>