



New regular feature: Meet the team

Our recent conference brought to our attention that it would be very helpful to see the teams based in London (in Colindale and Waterloo) and around England and to explain how their work supports the national programmes. In upcoming editions we will be inviting screening and immunisation teams to contribute so if you are interested please get in touch and email publications@phe.gov.uk.



Vaccine coverage team, Colindale

Meet the vaccine coverage team

Being able to measure vaccine coverage accurately is essential for evaluating the delivery of any immunisation programme. Vaccine coverage data are used to assess the overall level of population protection, to estimate vaccine effectiveness and impact, and to inform policy decisions. At the local level, coverage data are used for performance management, risk assessment, identifying under-immunised groups and timely response to local outbreaks of vaccine-preventable disease.

At Public Health England we have a small vaccine coverage team dedicated to producing timely vaccine coverage data for vaccines offered in the national immunisation programmes.

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SAVE THE DATES



National Immunisation
Conference

24-25 April 2018

The team is composed of a doctor, scientists, and vaccine tracking officers and is based at Public Health England Colindale, North London. The vaccine coverage team works closely with partners across the healthcare system to produce official vaccine coverage reports. They also contribute to research and implementation projects aimed at improving the performance of the national programme, and to the continuous process of improving vaccine data flows across the healthcare system.

All reports are available on the PHE website with associated local tabulations on our dedicated coverage webpage at [weblink 1](#).

Administering four vaccines in one year olds at one visit

To provide timely protection, Hib/MenC, MMR, PCV13 and MenB vaccines should routinely be offered at one appointment soon after the child turns one year of age. Parents should not routinely be offered split appointments for their baby to receive these vaccines at 12 months of age.

It is good practice to warn parents at the last set of primary immunisations that four injections are routinely offered at the one year age and to emphasise the benefits of this approach. Appointment times for the one year immunisation should be of sufficient length to prepare, administer and record all four vaccines.

If parents request that their baby's vaccines are split over more than one appointment, efforts should be made to ascertain parental concerns and reassure them about the benefits of administering all four at one appointment. These include providing adequate protection at the right time and saving parents the inconvenience of booking additional appointments.

Splitting the scheduled 12 month vaccines over more than one appointment should be seen as exceptional rather than routine and only offered where all attempts to provide all four vaccines have been unsuccessful. If more than one appointment is required, efforts should be made to use as few additional appointments as possible to avoid delaying the provision of adequate protection.

Summer is here – PHE vaccination advice for teenagers and young adults

Many teenagers and young adults will be travelling abroad or attending music and arts festivals round the UK over the summer months.

There are currently several large measles outbreaks across Europe with Romania and Italy being the worst affected countries¹. Despite significant progress made towards measles elimination globally, measles remains endemic in many countries around the world. In response, NaTHNaC² has issued a reminder to travellers to ensure they are up to date with their MMR vaccination.

Measles can be more severe in teenagers and adults and some may need hospital treatment. Measles is extremely infectious and summer events like music festivals and fairs where people mix closely with each other provide the ideal place for the infection to spread. In fact last year PHE reported³ 52 confirmed measles cases between mid-June and mid-October that were known to be linked to music and arts festivals in England and Wales. Nearly half of these cases were in young people aged 15 to 19 years and several individuals who acquired measles at one festival subsequently attended another festival while infectious, resulting in multiple interlinked outbreaks.

PHE has developed Think measles posters and leaflets and MMR leaflets directly targeting teenagers and adults that can be ordered free. We encourage local colleagues to use these resources to get measles and MMR messages out to young people. A reminder about MMR check and offer has also been included in the MenACWY programme letters for GPs and students, and the new MenACWY flyer targeting school leavers this summer. Finally the national communications team is coordinating measles and MMR message dissemination through organisers of music and arts festivals and social media.



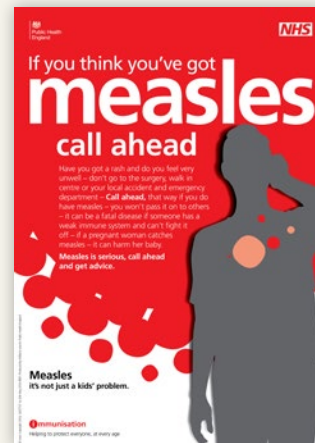
Suggested tweet to use as a guide or to copy and paste:

Don't forget to get your #MenACWY and #MMR jabs this summer! It could save your life. @PHE_uk

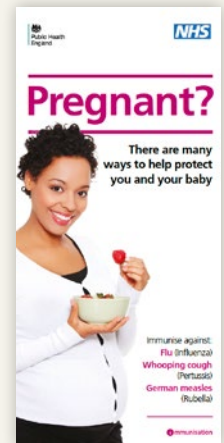
1. WHO Regional Office for Europe. Press release: Measles outbreaks across Europe threaten progress towards elimination. Copenhagen, 28 March 2017. See [weblink 2](#).

2. NaTHNaC. News: Measles in Europe. A reminder for travellers to be up to date with measles vaccine. 26 Apr 2017. See [weblink 3](#).

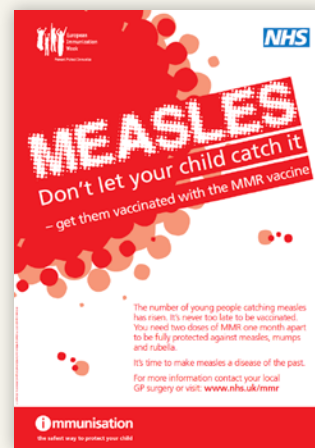
3. le Polain de Waroux O, Saliba V, Cottrell S, Young N, Perry M, Bukasa A, Ramsay M, Brown K, Amirthalingam G. Summer music and arts festivals as hot spots for measles transmission: experience from England and Wales, June to October 2016. Euro Surveill. 2016;21(44):pii=30390. DOI: [weblink 4](#).



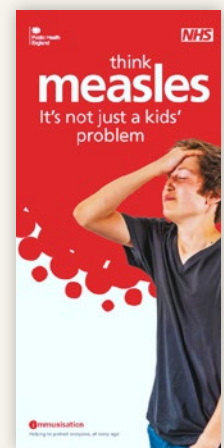
Call ahead measles poster
product code: 3207737



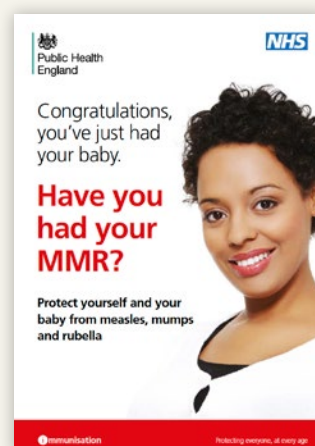
Pregnancy leaflet
product code: 2903655



Measles EIW poster
product code: 2900430



Measles Vaccine
Product code: 3205760



Have you had your MMR flyer (for mums who have just given birth)
Product code:3325595



MMR leaflet
product code: 3219250

For MenACWY resources visit [weblink 8](#)

Calling 2017 school leavers for MenACWY vaccination

Teenagers born between 01/09/1998-31/08/1999 (2017 school leaver cohort) are now eligible for urgent catch-up with MenACWY vaccination. All these young people, not only school leavers and those going on to higher education, should be invited by their GP practice for vaccination as set out in the 2017/18 GMS contract changes.

The meningococcal ACWY (MenACWY) vaccine was introduced in response to an increase in cases of invasive meningococcal disease capsular group W (MenW). The vaccine protects against meningitis and septicaemia caused by meningococcal groups A, C, W and Y. MenW disease continues to increase overall. Around a third of MenW cases in unvaccinated 15-19 year olds have been fatal. There have, however, been no cases in teenagers vaccinated under the current programme.

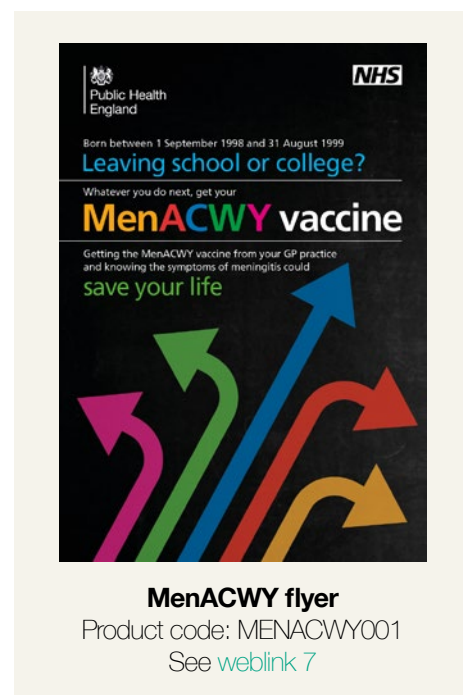
A template letter to inform general practice and for general practice to use to invite this cohort for MenACWY vaccination is available at [weblink 5](#). There are no restrictions on ordering MenACWY vaccine (Nimenrix®) and this should be done through ImmForm in the usual way.

- New leaflets for this cohort are available to order free of charge using product code MENACWY001. Use the Health and Social Care Orderline and register, which is a quick process seen at [weblink 6](#), or alternatively, call 0300 123 1003.

In addition the following individuals should be immunised opportunistically with MenACWY conjugate vaccine if they present before their 25th birthday:

- Anyone born on or after 01/09/1996 who has missed routine school (administered in school years 9/10 at 13-15 years) or catch-up MenACWY vaccination in older age groups;
- New entrants to higher education (university freshers) who have not yet been immunised with MenACWY vaccine.

MenACWY vaccine should be given to all eligible individuals who have not received this vaccine regardless of their MenC vaccination history. This is also a good opportunity to check MMR status and vaccinate where needed. See Meningococcal ACWY (MenACWY) vaccination programme for more information and resources at [weblink 8](#).



Flu vaccination winter 2017 to 2018: Who should have it and why?

This leaflet for patients gives information on all groups eligible for flu vaccination, including children and pregnant women.

It can be downloaded or ordered for free from [weblink 9](#).

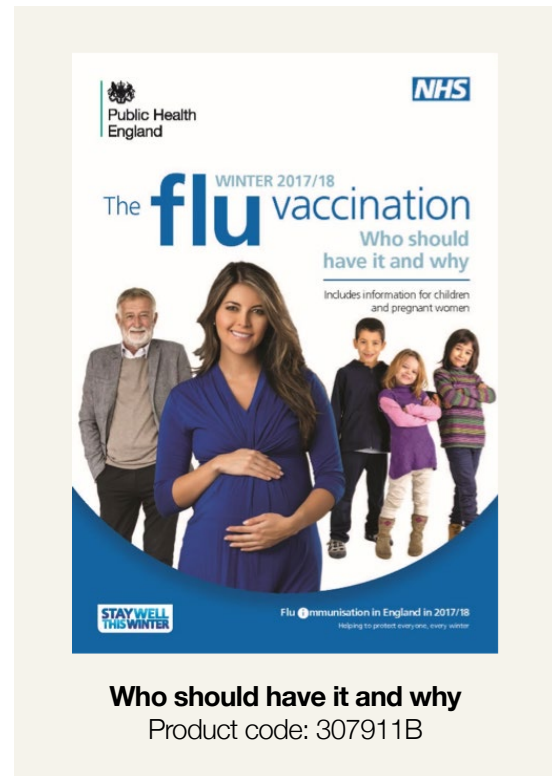
Survey on Young People and Parents' attitudes to Immunisation

Public Health England has commissioned BMG Research to undertake a survey of young people's and parents' views and experiences of immunisation. The survey focuses on immunisations offered during adolescence to inform the planning of the programme. This survey will build on those previously looking at the parental attitudes to vaccines offered to young children, which have been undertaken over a 25 year period.

BMG Research will interview around 1,000 parents of young people aged 13-16 years of age and also young people from the same household, on an England-wide basis, using face to face computer-assisted interviewing. No young person will be approached without the parent's consent and interviews will only be conducted if the parent is present in the home. BMG Research will be interviewing in selected locations from the week commencing 3 July 2017 until the end of August and will be recruiting door-to-door.

BMG Research interviewers are fully trained and will always show parents identification and a letter of authority that has been written by PHE and includes BMG and PHE contact points. BMG also informs the local police that the survey is being conducted in that area and the letter of authority includes police reference numbers for each local authority that generates these and parents (and others) can contact the police to check the authenticity of this survey if they wish to do so. The findings from this survey will be invaluable in informing our national programme and we would very much welcome your support.

For more information please visit [weblink 10](#).



Hepatitis A: update on MSM outbreak and pre-exposure vaccine recommendations

An outbreak of hepatitis A is ongoing in England since July 2016. A total of 586 hepatitis A cases have been reported since 1st July 2016 up to 30th April 2017. Of these cases, almost 350 are outbreak related. The majority (63%) of outbreak-related cases have been diagnosed in London and around three-quarters of cases are in men who have sex with men (MSM). The outbreak strains have also been identified in clusters in the general population. Hepatitis A outbreaks with the same strains have been reported among MSM in other European countries. There is also an ongoing global shortage of hepatitis A vaccines which is impacting on continuity of supply in the UK.

In April 2017, PHE escalated this incident to a national enhanced response because of increasing incidence, potential outbreak amplification as a result of upcoming Gay Pride events in the UK and abroad, in particular World Pride in Madrid (June 24th-July 2nd), clear evidence of spread to the wider community and a global shortage of hepatitis A vaccine.

Vaccine recommendations

Hepatitis A vaccine is highly effective in preventing infection if given prior to exposure.

The National Travel Health Network and Centre (NaTHNaC) advises hepatitis A immunisation for susceptible MSM travellers attending Gay Pride in Madrid (June 23-July 2). See [weblink 11](#).

National recommendation

PHE recommends that all MSM attending GUM and HIV clinics should be offered a single dose of hepatitis A containing vaccine.

NaTHNaC, in collaboration with PHE, is updating its country-specific travel guidance. As a consequence, hepatitis A immunisation will no longer be recommended for most travellers visiting a number of countries.

Please visit the NaTHNaC website (at [weblink 12](#)) for a full list of countries for which hepatitis A vaccine is recommended for some or most travellers prior to travel.

Alternative vaccine options to mitigate supply constraints

Monovalent adult hepatitis A vaccine is preferred for pre exposure immunisation. In view of imminent stock-outs of adult vaccine and anticipated increased demand during peak travel season combined with the upcoming Gay Pride events, PHE is working closely with partners across the health system to secure supplies of hepatitis A vaccine.

- In the interim, after a review of immunogenicity data, the following temporary “dose-sparing” options have been proposed by PHE and agreed by the Joint Committee for Vaccination and Immunisation (JCVI) at the June 2017 meeting, to avoid delayed immunisation during periods of vaccine shortage. Unvaccinated HIV positive persons should preferentially receive standard adult antigen content monovalent hepatitis A vaccine as a priming dose because of the poorer response rates to vaccine in this group.

Where adult monovalent hepatitis A vaccine stock is not available

- A single dose of paediatric monovalent HAV¹ can be given to adults (off-label²) as pre-exposure immunisation.
- Where this is not available or where hepatitis B immunisation is also indicated a single dose of adult combination hepatitis A/B³ vaccine can be given to adults (off-label²) as pre-exposure immunisation.

For adults already primed with adult HAV vaccine

- a booster dose of either paediatric monovalent HAV¹ or adult combination hepatitis A/B vaccine² can be given (off-label²)
- a booster dose can be delayed to five years
- Remaining hepatitis A and B doses can be given using either monovalent or combination vaccine. Post exposure immunisation should follow schedules outlined in the Green Book⁴.

1 Paediatric monovalent hepatitis A vaccine (e.g. Havrix Junior ® or VAQTA Paediatric) is recommended for healthy individuals from 12 months of age to 15 years (Havrix®) or 17 years of age (VAQTA®).

2 More information on the use of off-label medicines is available here:
<https://www.gov.uk/drug-safety-update/off-label-or-unlicensed-use-of-medicines-prescribers-responsibilities>

3 Combined hepatitis A/B vaccine (Twinrix® adult vaccine) is indicated for use in non-immune adults and adolescents 16 years of age and above who are at risk of both hepatitis A and hepatitis B infection

4 Immunisation against Infections Disease (the Green Book) Department of Health (2006). Hepatitis A Chapter 17
<https://www.gov.uk/government/publications/hepatitis-a-the-green-book-chapter-17>

Routine vaccine supply

InterVax BCG vaccine

PHE has had some queries about whether animal products are present in InterVax BCG vaccine. The manufacturer has confirmed that InterVax BCG vaccine does not contain animal products and the medium they use for the production of BCG vaccine also does not contain animal products.

Ordering restrictions for Infanrix IPV Hib

In order to balance central stocks, orders for Infanrix IPV Hib are restricted to 3 doses per order, per week in England and Wales. Restrictions are also in place for Scotland and Northern Ireland. Pediacel is available with no restriction on volume. 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.

Non routine vaccine supply

Hepatitis A

Adult

- GSK: Havrix PFS singles are currently unavailable until the end of July. From the end of July to mid-August, there will be supply constraints. All presentations of Havrix adult will then be unavailable from mid-August to early 2018
- GSK: Havrix PFS x 10 packs are unavailable until 2018
- Sanofi Pasteur: limited supplies of Avaxim are available. It is likely there will be order restrictions in place. Contact Sanofi Pasteur for more information
- MSD: A limited supply of VAQTA will become available towards the end of June through their wholesaler. There will be restricted supplies of VAQTA during 2017

Paediatric

- GSK: Paediatric doses of Havrix Monodose are available
- MSD: VAQTA Paediatric is unavailable until late August

Hepatitis B

Adult

- GSK: Engerix B PFS singles will have supply constraints from end of June to mid-July. From late August Engerix B Adult PFS will be OOS until early 2018
- GSK: Engerix B vials are available, although supply will be limited
- MSD: HBVAXPRO 10µg is unavailable until late July
- MSD: HBVAXPRO 40µg is unavailable until late July

Paediatric

- GSK: Engerix B Paediatric is available
- MSD: HBVAXPRO 5µg is available

Combined hepatitis A and hepatitis B vaccine

- GSK: Supplies of the adult presentation (Twinrix) and paediatric presentation (Twinrix Paediatric) remain available
- Ambirix is also available

Combined Hepatitis A and Typhoid

- GSK: Hepatyrix is unavailable until at least 2019
- Sanofi Pasteur: ViATim is currently unavailable. There will be intermittent supply from now until late October

Typhoid

- GSK: Typherix is unavailable until at least 2019
- Sanofi Pasteur: Typhim in 10 packs are available. There are supply constraints with the single presentation and there may be order restrictions. Supply of the single packs will be more stable from July 2017 onwards
- PaxVax currently have stock of Vivotif

Rabies

- GSK: Rabipur is available
- Sanofi Pasteur: licensed Rabies Vaccine BP is out of stock. For more information contact Sanofi Pasteur

MSD

- Pneumococcal Polysaccharide Vaccine (formally known as Pneumovax II) is available. Further supplies to be made available from late June. In order to avoid confusion when ordering, remember to ask for Pneumococcal Polysaccharide Vaccine, please do not use this product's former name of Pneumovax II

Varicella Zoster vaccine

- GSK: Varilrix is currently unavailable until mid-July. However, this is an estimated date and may be subject to change
- MSD: VARIVAX is currently available

Diphtheria, tetanus and poliomyelitis (inactivated) vaccine

- Sanofi Pasteur: there are limited supplies of Revaxis available. Supply should be more stable from July 2017.

Bank Holiday deliveries

Due to the Summer Bank Holiday there will be no deliveries or order processing by Movianto UK on Monday 28 August 2017. Please see the table below for revised order and delivery dates.

For customers with a delivery day of Monday, please be aware that after the 21 August, your next available delivery day will be the Monday 4 September.

For customers requiring a scheduled delivery on the Tuesday 29 or Wednesday 30 August, orders will need to be placed before the Summer Bank Holiday by 11:55AM on Thursday 24 and Friday 25 August 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.

Spring Bank Holiday orders and deliveries

Delivery date	Order cut-off date	Order cut-off time
Monday 21 August 2017	Thursday 17 August 2017	11:55 AM
Tuesday 22 August 2017	Friday 18 August 2017	11:55 AM
Wednesday 23 August 2017	Monday 21 August 2017	11:55 AM
Thursday 24 August 2017	Tuesday 22 August 2017	11:55 AM
Friday 25 August 2017	Wednesday 23 August 2017	11:55 AM
Monday 28 August 2017	Closed – No deliveries	
Tuesday, 29 August 2017	Thursday 24 August 2017	11:55 AM
Wednesday 30 August 2017	Friday 25 August 2017	11:55 AM
Thursday 31 August 2017	Tuesday 29 August 2017	11:55 AM
Friday 01 September 2017	Wednesday 30 August 2017	11:55 AM

Change to Rotarix presentation

As a reminder, Rotarix supplied by GSK will change from an oral syringe to a tube later this year. It is likely that this new tube presentation will start being issued by PHE in November and further guidance on the use of the Rotarix tube will be published by PHE prior to this. Images for the new pack are shown below.



Web links

- web link 1 <https://www.gov.uk/government/collections/vaccine-uptake>
- web link 2 <http://www.euro.who.int/en/media-centre/sections/press-releases/2017/measles-outbreaks-across-europe-threaten-progress-towards-elimination>
- web link 3 <https://travelhealthpro.org.uk/news/203/measles-in-europe>
- web link 4 <http://dx.doi.org/10.2807/1560-7917.ES.2016.21.44.30390>
- web link 5 <https://www.gov.uk/government/publications/menacwy-gp-invitation-letter-template>
- web link 6 https://www.orderline.dh.gov.uk/ecom_dh/public/home.jsf
- web link 7 <https://www.gov.uk/government/publications/menacwy-school-leaver-flyer>
- web link 8 <https://www.gov.uk/government/collections/meningococcal-acwy-menacwy-vaccination-programme>
- web link 9 <https://www.gov.uk/government/publications/flu-vaccination-who-should-have-it-this-winter-and-why>
- web link 10 <https://www.gov.uk/government/publications/immunisation-survey-attitudes-of-young-people-and-parents>
- web link 11 <https://travelhealthpro.org.uk/news/221/world-pride-in-spain>
- web link 12 <https://travelhealthpro.org.uk/countries>