

Protecting and improving the nation's health

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# Vaccine update

# Resources for the 2018-2019 annual children's flu vaccination programme available to order now!

In 2018/19 children aged four to nine years-old (on 31 August 2018), that is those in reception class and school years 1 to 5, will be offered flu vaccination in schools. Resources to support the schools programme are now available from weblink 8. These include:

### Immunising primary school children against flu: information for headteachers and school staff

This briefing for school staff, which includes Q&As, sets out details about the programme in 2018 to 2019 and can be downloaded from weblink 9. Hard copies can be ordered free of charge with free delivery from the DH health and social care order line at weblink 5 using product code: 2016027B.



#### Flu immunisation consent form

This consent form template can be downloaded and adapted to suit the needs of local healthcare teams. It should be sent to parents of eligible children in schools, along with an information leaflet (shown on page 2), view and download the consent form at weblink 9.

#### Flu vaccination invitation letter

This letter template can be downloaded and adapted to suit the needs of local healthcare teams. It should be sent to parents of eligible children in schools, along with the consent form and an information leaflet (shown on page 2), view and download the consent form at weblink 9 and weblink 10.

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# Leaflets and posters for children's flu vaccination programme – resources for 2018/19

Leaflets and posters for the children's programme, including those in schools and all children aged two and three years old (on 31 August 2018) who will be offered flu vaccine in general practice, are also available to order from weblink 5. These include:



# Protecting your child against flu

This leaflet explains which children are eligible for flu vaccination, as well as describing the disease and vaccine. This can be viewed and downloaded from weblink 10 but we

do not recommend printing this leaflet locally as hard copies can be ordered using product code: 2902552B.



#### Five reasons to vaccinate your child against flu

An information poster aimed at parents outlining the benefits of vaccinating children against flu is

now available to view at weblink 10, and to order hard copies use the product code: 2901251C.

Further resources for general practice that cover all groups eligible for flu vaccination will be available on the GOV UK webpage shortly at weblink 8.

### **Vaccine Supply**

#### Unused Fluenz Tetra® vaccine last flu season

Between September 2017 and March 2018 influenza vaccine was offered to all children in England aged 2-8 years old (school year 4) and all children in clinical risk groups from 6 months up to less than 18 years. The 2017-18 flu vaccination period saw more children than ever in England vaccinated against flu. This winter will see the programme expand further, adding an additional cohort of children (school year 5).

PHE continues to monitor the amount of Fluenz Tetra® that is ordered by NHS England providers (GPs and school teams) for children, but not administered as part of the national programme. This is referred to as 'overage'. In each programme year, PHE estimates that the overage has been in excess of 400,000 doses.

Whilst overage remains at 400,000 doses, as a percentage of the volume distributed across England this has been a reduction of almost a third, from 20% in 2015-16 to 13% in 2017-18. This is a great achievement by everyone but there is still room for improvement.

We ask that providers continue to work with us to minimise the amount of Fluenz Tetra® that is ordered but not used, which will both save the NHS money and ensure that vaccine is available to those who need it. Providers with a high overage in 2017-18 may be contacted by PHE to raise awareness to this issue.

#### Flu vaccine ordering for 2018-19

GPs in England will be subject to similar ordering controls to those that have been in place for the past 2 years. Further details of these controls will be made available in Vaccine Update and on ImmForm news over the summer, to enable informed local planning.

PHE will also be working with NHS England to better understand the requirements and ordering practices of school providers with a view to minimising wastage in this part of the programme.

#### Flu vaccine information and availability for 2018-19

As in previous years, PHE has centrally procured flu vaccine for children included in this year's flu programme, including those aged from six months to less than 18 years old in clinical risk groups. It remains the responsibility of GPs and other providers to order sufficient flu vaccine directly from manufacturers for older eligible patients of the flu programme in 2018-19.

The following vaccines will be available to providers of the children's flu programme in England via the ImmForm website. Further details on the timing of availability of vaccines will be published as information becomes available.

Please refer to guidance from your respective health departments for arrangements in Scotland, Wales and Northern Ireland.

Vaccine	Manufacturer	Anticipated ImmForm order opening	
Fluenz Tetra® (LAIV)	AstraZeneca UK Ltd	Early October	
Quadrivalent Influenza Vaccine (split virion, inactivated)	Sanofi Pasteur	September	

# Eligibility and the type of vaccine to offer children from six months to less than 18 is as follows:

Age on 31 August 2018	Is child eligible for LAIV?	Setting
Under 2 years of age	7 TETION OFFICE DATE OF THE PROPERTY OF THE PR	
Aged 2 – 3 years old (Born between 1 September 2014 and 31 August 2016)	Universal programme: All 2 and 3 year olds offered LAIV.  Children who turn two after 31 August 2018 are not eligible.  Children who were three on 31 August 2018 and turn four afterwards, are still eligible.  At risk children: Offer LAIV. If child is contraindicated (or it is otherwise unsuitable), then offer suitable quadrivalent inactivated flu vaccine (QIV).	General practice
Aged 4 – 9 years old:  (Born between 1 September 2008 and 31 August 2014)	Universal programme: All primary school years from reception class to year 5* offered LAIV.  At risk children: Offer LAIV. If child is contraindicated (or it is otherwise unsuitable), then offer suitable quadrivalent inactivated flu vaccine (QIV).  At risk children may be offered vaccination in general practice if the school session is late in the season, parents prefer it, or they missed the school session. Also, some schools may not offer inactivated vaccines to at risk children in whom LAIV is contraindicated.	School
Aged 10 years old to less than 18 years	Universal programme: No. Only at risk children offered vaccination.  At risk children: Offered LAIV. If contraindicated (or it is otherwise unsuitable), then offer suitable quadrivalent inactivated flu vaccine (QIV).	General practice

<sup>\*</sup>Reception class (4 to 5 year olds); Year 1 (5 to 6 year olds); Year 2 (6 to 7 year olds); Year 3 (7 to 8 year olds); Year 4 (8 to 9 year olds); Year 5 (9 to 10 year olds).

## The full list of influenza vaccines that will be available for the 2018/19 season is:

Supplier	Product details	Vaccine type	Age indications	Contact details
AstraZeneca UK Ltd	Fluenz Tetra	Live attenuated, nasal (quadrivalent)	From 24 months to less than 18 years of age	0845 139 0000
GSK	Fluarix Tetra	Split virion inactivated virus (quadrivalent)	From 6 months	0800 221 441
MASTA	Quadrivalent Influenza Vaccine (split virion, inactivated)	Split virion, inactivated virus		0113 238 7552
Mylan (BGP Products)	Quadrivalent Influenza vaccine Tetra MYL Quadrivalent Influvac sub- unit Tetra	Influenza virus surface antigen (inactivated)	From 18 years	0800 358 7468
Sanofi Pasteur vaccines	Quadrivalent Influenza Vaccine (split virion, inactivated)	Split virion, inactivated virus	From 6 months	0800 854 430
Seqirus UK Ltd	Fluad <sup>®</sup>	Surface antigen, inactivated, Adjuvanted with MF59C.1	65 years of age and over	08457 451 500

More detailed information on the characteristics of the available vaccines, including ovalbumin (egg) content will be published on the PHE Immunisation web pages.

None of the influenza vaccines for the 2018/19 season contain thiomersal as an added preservative.

# Purified Protein Derivative PPD 10TU ImmForm ordering now closed

ImmForm ordering has now closed for Purified Protein Derivative (PPD) 10TU/0.1ml for Mantoux testing. Please note that the last of the stock delivered to ImmForm customers has an expiry date of **30 June 2018**.

In the UK, the standard concentration of Purified Protein Derivative (PPD) 2TU/0.1ml is used for routine Mantoux testing to identify latent TB infection among contacts of active TB cases, migrants and in individuals prior to immunosuppressive therapy. The higher concentration of 10 TU/0.1 ml is only used in rare circumstances, for example where the first Mantoux test (PPD 2TU) is negative (less than 5 mm in diameter) and a retest is considered appropriate for clinical purposes e.g. in immunocompromised patients/ contacts (Green book page 404).

For immunocompromised individuals where the Mantoux test response is considered less than reliable, PHE recommends using Interferon Gamma Release Assay (IGRA) testing together with a Mantoux test using PPD 2TU 1 (see weblink 11).

#### Reminder about MMR vaccine ordering restriction

There are currently two different vaccines available to order for the MMR programme, M-M-RvaxPro® and Priorix®. Orders for Priorix® continue to be capped at 6 packs per order per week for accounts in England and Wales. Controls are also in place for Scottish customers. This is needed to rebalance central supplies.

The alternative MMR vaccine, M-M-RvaxPro®, remains available to order without restriction. If you specifically require additional Priorix® stock, for example because you serve communities that do not accept vaccines that contain porcine gelatine then please contact the ImmForm Helpdesk for assistance at helpdesk@immform.org.uk or 0844 376 0040.

#### Change to presentation of Subgam (Human Normal Immunoglobulin)



# Young adults urged to check they have had their MMR vaccine before summer travel

Young people are encouraged to make sure they have had both doses of the MMR vaccine before going on holiday to Europe where there are large outbreaks of measles.

Cases of measles also continue to rise across England in unvaccinated people of this age.

The vaccine is available free to anyone who has not received both doses as a child. It protects against measles, mumps and rubella – all of which can be very serious diseases and are highly infectious.

While vaccine uptake levels in the UK in young children are currently very high, coverage levels dipped to a low of 80% in 2003. This means that there are significant numbers of unprotected teenagers and young adults who could catch measles both in England, particularly in environments of close mixing such as summer festivals and when they travel abroad for the summer holidays.



Measles is a highly infectious viral illness that can sometimes lead to serious complications and can be fatal in very rare cases so getting protected by taking up the offer of vaccination is crucial.

Between 1 January 2018 and 31 May 2018 there have been 587 laboratory confirmed measles

cases in England. Cases were reported in most areas with London (213), the South East (128), West Midlands (81), South West (62), and Yorkshire and Humberside (53) reporting the most cases (based on provisional figures).

The World Health Organization (WHO) recommends that to prevent outbreaks of disease, 95% of people need to have received the MMR vaccine.

- colleagues are reminded that patients over the age of three years and four months who do not have two recorded doses of MMR vaccine remain eligible
- there is no upper age limit to offering MMR vaccine and practices should maximise opportunities to ensure that patients who are not protected are fully vaccinated
- it should be noted that central MMR vaccine stock can be used to catch-up anyone of any age

In addition, health care employers also have a responsibility to ensure that all their staff are up to date with their MMR vaccines. The Care Quality Commission has recently published a helpful guide on immunisation of healthcare staff for primary care colleagues at weblink 12.

Use every opportunity to check MMR status and catch-up anyone who is not up to date

### Green book chapters revised!

#### Green book chapter 20 Japanese encephalitis

Japanese encephalitis (JE) is a mosquito-borne viral encephalitis caused by a flavivirus. It is the leading cause of childhood encephalitis in Asia. The global incidence of JE is unknown, however, recent estimates are that 67,900 clinical cases occur annually in 24 countries with JE risk (World Health Organization, 2015). It is endemic in rural areas, especially where rice growing and pig farming coexist, and epidemics occur in rural and occasionally in urban areas. Highest transmission rates occur during and just after wet seasons, when mosquitoes are most active. However, seasonal patterns vary both within individual countries and from year to year, and cases of JE are also reported outside of the normal seasonal period of high transmission. This disease is not transmitted from person to person.

For more information about Japanese encephalitis, see weblink 6.

#### **Green book chapter 35 Yellow fever**

#### The facts about Yellow fever

- Yellow fever (YF) is a viral disease transmitted by mosquitoes causing a spectrum of disease from mild to severe symptoms
- Mosquito bite avoidance and yellow fever vaccination is recommended for travellers visiting countries where there is a risk of YF virus transmission
- There is no treatment for YF disease. Care of an infected person is based on managing the symptoms
- YF certificate requirements are not necessarily connected to the risk of disease for a traveller

- Under the International Health Regulations (2005), an International Certificate of Vaccination or Prophylaxis for YF may be an entry requirement for some countries
- The YF vaccine can only be administered at designated UK Yellow Fever Vaccination Centres (YFVCs)

For information about Yellow Fever, see the Green book chapter 35 at weblink 1, or visit weblink 2.

#### **Hepatitis A vaccine**

#### What is the current recommendation?

Following the recent outbreak of hepatitis A, mainly affecting Men who have Sex with Men (MSM) PHE and British Association for Sexual Health and HIV (BASHH) recommend that all MSM attending GUM and HIV clinics should be opportunistically offered a single dose of hepatitis A vaccine, unless they have documented evidence of two doses of hepatitis A vaccine or of previous hepatitis A illness. This recommendation is not limited to outbreak periods.

#### How to obtain hepatitis A vaccine?

The vaccine is available to order free of charge to GUM clinics through ImmForm at weblink 3. Clinics should order sufficient vaccine to ensure all MSM attending clinic can be offered vaccination. If your ImmForm account currently has an order restriction, please email helpdesk@immform.org.uk and state your vaccine requirements.

#### What vaccines are available?

Both adult and paediatric vaccines are available. There are three adult monovalent vaccines available in England: VAQTA (MSD), Avaxim (Sanofi Pasteur) and Havrix (GSK).

All three products are equivalent, can be offered from age 16 (18 for VAQTA) and will be offered interchangeably depending on stock availability.

For patients under the age of 18, VAQTA paediatric (MSD) and Havrix Junior (GSK) are available and equivalent. They will be offered interchangeably depending on stock availability.

This supply will be time limited and is intended to build sufficient immunity in the MSM population to prevent another outbreak from re-occurring in the near future. Long term responsibility for the programme of vaccinating MSM against hepatitis A, remains with local sexual health commissioners on behalf of local authorities

For more detail on hepatitis A vaccines and schedules please see the Green Book: Immunisation against Infectious Disease at weblink 4.



### #BeRabiesAware

#### Rabies – there's change afoot!

Did you know that JCVI recently reviewed the UK's rabies pre-exposure and post-exposure treatment schedules, and that from July 2018 there will be major changes?

Do you know what to do if a patient comes into the surgery and says they have just been bitten by a bat or a dog whilst abroad? Or where to find the latest guidance on preventing rabies in returning travellers? Next month, look out for the special issue of Vaccine Update with information on the new rabies guidelines, where to find the information and who to contact.

Look out in the next edition of Vaccine Update and find out more about rabies vaccination and pre/post exposure treatment.

#### Vaccine supply for the non routine programme

#### **HEPATITIS A VACCINE**

#### **Adult**

- GSK: Supplies of Havrix PFS singles, PFS packs of 10 are available.
   Please note, there may not be sufficient stock in each presentation to accommodate demand, therefore you may not be able to access supply of some presentations
- **Sanofi Pasteur:** Limited supplies of Avaxim are available. It is likely that there will be order restrictions in place
- **MSD:** VAQTA Adult is currently available

#### **Paediatric**

- GSK: Havrix Paediatric singles and packs of 10 are currently available
- MSD: VAQTA Paediatric is currently available

#### **HEPATITIS B VACCINE**

Hepatitis B monovalent vaccines are currently under supply management. While priority groups 1-3 (in the PHE temporary recommendations) will continue to have access to Hepatitis B monovalent vaccines, availability for priority group 4 patients has commenced in a phased approach.

#### **Adult**

- GSK: Supplies of Engerix B PFS singles and packs of 10 are available.
   Please note there may not be sufficient stock in each presentation to accommodate demand, therefore you may not be able to access supply of some presentations
- GSK: Supplies of Engerix B vials singles and packs of 10 are available.
   Please note there may not be sufficient stock in each presentation to accommodate demand, therefore you may not be able to access supply of some presentations
- GSK: Fendrix is available
- MSD: Limited supplies of HBVAXPRO 10µg are available. Supplies are expected to be restricted until further notice
- MSD: Limited supplies of HBVAXPRO 40µg are available. Supplies are expected to be restricted until further notice

#### **Paediatric**

- **GSK:** Engerix B Paediatric singles are available
- MSD: Limited supplies of HBVAXPRO 5µg are available. Supplies are expected to be restricted until further notice

#### **COMBINED HEPATITIS A & B VACCINE**

- GSK: Twinrix Adult and Paediatric presentations are available
- GSK: Ambirix is available

#### **COMBINED HEPATITIS A & TYPHOID VACCINE**

Sanofi Pasteur: Limited supplies of Viatim are available. It is likely that there
will be order restrictions in place

#### TYPHOID VACCINE

- Sanofi Pasteur: Typhim is available to order without restrictions.
- PaxVax: Vivotif is available

#### **RABIES VACCINE**

- GSK: Limited supplies of Rabipur are currently available, next replenishment is expected in July
- Sanofi Pasteur: Rabies BP is out of stock. For more information, please call Sanofi Pasteur Customer services

#### **PPV (Pneumococcal Polysaccharide Vaccine)**

 MSD: Limited supply is currently available. Next replenishment is due in July, please see statement for further information at weblink 7

#### **VARICELLA ZOSTER VACCINE**

- GSK: Varilrix is currently available
- MSD: VARIVAX is currently available
- MSD: ZOSTAVAX stocks are currently available for the private market and for the National Immunisation Programme

#### **DIPHTHERIA, TETANUS AND POLIOMYELITIS (inactivated) VACCINE**

Sanofi Pasteur: Revaxis is available to order without restrictions

#### **MMR**

 MSD: MMR stocks are currently available for the private market and for the National Immunisation Programme

#### **HUMAN PAPILLOMAVIRUS VACCINE**

- MSD: Stocks of GARDASIL are available for private market sales and for the National Immunisation Programme
- **MSD:** Limited supplies of Gardasil 9 are available. Supplies are expected to be replenished Late July/ early August

#### **MENINGITIS ACWY VACCINE**

- GSK: Menveo is currently unavailable until late 2018
- Pfizer: Nimenrix is currently available for private sales. There is no impact on the National Immunisation Programme

#### **Weblinks**

Weblink 1	https://www.gov.uk/government/publications/yellow-fever-the-green-book-chapter-35
Weblink 2	https://travelhealthpro.org.uk/factsheet/18/yellow-fever
Weblink 3	https://portal.immform.dh.gov.uk
Weblink 4	https://www.gov.uk/government/publications/hepatitis-a-the-green-book-chapter-17
Weblink 5	https://www.orderline.dh.gov.uk/ecom_dh/public/saleproducts.jsf
Weblink 6	https://www.gov.uk/government/publications/japanese-encephalitis-the-green-book-chapter-20
Weblink 7	http://www.msd-uk.com/products/vaccines.xhtml
Weblink 8	http://www.gov.uk/government/collections/annual-flu-programme
Weblink 9	https://www.gov.uk/government/publications/flu-vaccination-in-schools
Weblink 10	https://www.gov.uk/government/publications/flu-vaccination-leaflets-and-posters
Weblink 11	https://www.gov.uk/government/publications/tuberculosis-tb-interferon-gamma-release-assay-tests
Weblink 12	http://www.cqc.org.uk/guidance-providers/gps/nigels-surgery-37-immunisation-healthcare-staff