



VACCINATION IS IMPORTANT FOR THE WHOLE FAMILY

ISLHD Immunisation Newsletter - February

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COVID-19 Vaccinations webpage FAQs

News and information for Australians about the development, approval process and plans for COVID-19 vaccines.

https://www.health.gov.au/initiatives-and-programs/covid-19-vaccines?gclid=EA1alQobChMIie_r0e3O7gIVISlyCh2MPwZeEAAAYASAAEgIEIPD_BwE

Pfizer Product information

Product information for the Pfizer vaccine provided in the link below.

<https://www.tga.gov.au/sites/default/files/auspar-bnt162b2-mrna-210125-pi.pdf>

COVID-19 Vaccine Training

COVID-19 vaccine training program for clinical and non-clinical staff involved in the administration of COVID-19 vaccines

In preparation for Australia's vaccine rollout, authorised immunisation providers must complete COVID-19 vaccination training to ensure competency standards are met to administer COVID-19 vaccines. The Australian Government has partnered with the Australian College of Nursing to develop and deliver free and accredited training modules for individuals involved in the administration of COVID-19 vaccines. Training will also be available for non-clinical and administration staff, who will be able to access the non-clinical modules of the training such as handling, storage and administrative reporting.

Core COVID-19 training modules will cover:

- handling and storage
- multi-dose vial (MDV) training
- delivery mechanisms of the vaccine
- administrative reporting including eligibility checking
- safety and surveillance monitoring and reporting for adverse events following immunisation communication

Additional COVID-19 training modules include specific training for:

- BioNTech/Pfizer
- Oxford University/AstraZeneca
- Novavax
- future vaccines (i.e as possible new vaccines emerge)

Enrolling in the training

To enrol in the course immunisation providers will be required to have already undertaken routine immunisation training specific to their profession and hold a current practising registration. Immunisation providers will be required to enrol through their Australian Health Practitioner Regulation Agency (AHPRA) number. Administrative or non-clinical staff can enrol without an AHPRA number to access non-clinical modules.

This information is available on the [COVID-19 vaccines webpages](#) of the Department of Health website.

Once the training is available, a link to the training will be available on the [Department of Health website](#).

Changes to the Online Ordering System

All immunisation providers will now be required to confirm receipt of a vaccine delivery prior to being able to place a new order. To do this, log into the NSW Vaccine Centre webpage:

<file:///C:/Users/56013038/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/25O1VHPP/FINAL%20Fax%20to%20immunisation%20providers%20-%20CHANGES%20TO%20NSW%20VACCINE%20CENTRE%20WEBPAGE%20-%20Confirming%20deliveries.pdf>

User Guide for Immunisation Providers

file:///C:/Users/56013038/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/25O1VHPP/SVC_User%20Guide_Providers%20DEC%202020.pdf

COVID-19 Vaccine Communication Handbook

New resource:

A link to the COVID-19 vaccine communication handbook - a practical guide for improving vaccine communication and fighting misinformation

<http://www.bristol.ac.uk/news/2021/january/covid-19-vaccine-communication-handbook.html>

Contact your Public Health Unit for immunisation enquiries:

Phone:
1300 066 055
Fax:
4221 6759
Email:
islhd-phu-immunisation@health.nsw.gov.au





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MumBub Vax Website

The MumBubVax package aims to support healthcare providers in communicating confidently and effectively with expectant parents about vaccination during pregnancy and for babies after delivery. The Australian Department of Health supports the package which can be used in primary care or maternity services.

The MumBubVax package includes:

For expectant parents - MumBubVax website available at <https://www.mumbubvax.org.au/>

For providers - MumBubVax VaxChat eLearning modules available at <https://www.mumbubvax.org.au/user/register>

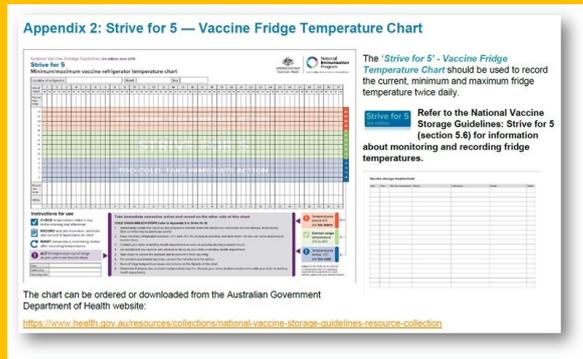
The MumBubVax website for expectant parents provides a suite of resources and information for expectant parents, designed to support conversations about vaccination during pregnancy and for babies after delivery. This includes independently assessed information about influenza, pertussis and Hepatitis B vaccines included on the [National Immunisation Program](#) and answers to common questions in an accessible and easily interpreted format.

Cold Chain Tool Kit for Immunisation Providers

The NSW Health 'Cold Chain Tool Kit for Immunisation Providers' (August 2020) requires Immunisation Providers to use the 'Strive for 5 - Vaccine Fridge Temperature Chart' for recording the twice daily minimum, maximum and current temperatures.

To access these for free please go to the following link - chart can be found under the 'Posters' heading:

<https://www.health.gov.au/resources/collections/national-vaccine-storage-guidelines-resource-collection>



Vaccine Expiry

Please note the following:

If a vaccine has an exact date of expiry i.e. 27/3/2021, you can use it up to this date.

If a vaccine has just a month and a year for the expiry, i.e. 03/2021, you can use the vaccine up to and including the last day of that month i.e. 31/3/2021.

Please ensure you report vaccines to the NSW Vaccine Centre when the vaccines expire and you have discarded them.

Vaccine Storage Space

The Public Health Unit would like to remind all practices to re-evaluate the storage capacity of their vaccine fridges **NOW**.

In just over a month you will need to have extra capacity for the 2021 influenza vaccine as well as the new Covid-19 vaccine.

Ask yourself: "can my vaccine fridge cope with the extra vaccines as well as the current stock for children, adolescents and adults?"

Overstocking your fridge places all vaccines at risk. It impedes cold air circulation and reduces the likelihood of achieving consistent, stable temperatures throughout the fridge.

What can you do?

- order less more frequently (aim for 1 order per month)
- influenza vaccines can be ordered more frequently than once per month
- purchase a larger fridge or an extra back up fridge

2021 NSW School Vaccination Program

The 2021 School Vaccination Program is now underway.

What we are offering:

Year 7 students - A single dose of dTpa & 2 doses of HPV (6 months apart)

Year 8 students - Catch up vaccination for those who signed a consent form in Yr7 - 2020

Year 10 students - A single dose of Men ACWY

Year 11 students - Catch up vaccination for those who signed a consent form in Yr10 - 2020

If a child presents to your practice for school vaccines, please check the Australian Immunisation Register for doses administered at school. Please also contact the Public Health Unit as consent may need to be withdrawn from the school program if you administer any of the vaccines.

DTPa vs dTpa

As per the Australian Immunisation Handbook: "The acronym *DTPa*, using capital letters, signifies a child formulation of diphtheria, tetanus and acellular pertussis-containing vaccine.

The acronym *dTpa* signifies a formulation that contains substantially less diphtheria toxoid and pertussis antigens than the child formulation. Adolescents and adults are recommended to receive *dTpa* vaccine."

Example of DTPa child formulation vaccine brands:

- Infanrix
- Tripacel
- Infanrix Hexa
- Quadracel
- Infanrix-IPV

Example of dTpa adolescent/adult formulation vaccine brands:

- Boostrix
- Adacel
- Adacel Polio
- Boostrix-IPV

Please ensure you know the difference before giving your patient a diphtheria/tetanus/pertussis-containing vaccine.



**SAFETY ALERT: ZOSTAVAX VACCINE
NOT TO BE USED IN PEOPLE WITH COMPROMISED IMMUNE FUNCTION**

Essential information:

Deaths have occurred since 2017 due to disseminated vaccine-related varicella-zoster virus infection following Zostavax administration. It is important that health professionals are aware of the potential for this very rare adverse event when considering the appropriateness of Zostavax for their patients.

Zostavax is a live, attenuated varicella-zoster virus vaccine that **must not** be given to people with current or recent severe immunocompromising conditions from either a primary or acquired medical condition or medical treatment. This includes:

- people who are immunocompromised
- people who have medical conditions that place them at risk of immunocompromise
- people receiving low doses of immunosuppressive medication.

Dear Colleague,

I am writing to provide an important update regarding the Zostavax vaccine, which is registered for use in people aged ≥ 50 years, and available under the National Immunisation Program for those aged 70-79.

Three deaths have occurred since 2017 due to disseminated vaccine-related varicella-zoster virus infection following Zostavax administration. It is important that health professionals are aware of the potential for this very rare adverse event when considering the appropriateness of Zostavax for their patients, including in patients on low dose immunosuppressive medication¹.

When considering the use of Zostavax

Zostavax must not be given to individuals who have current or recent immunocompromising conditions, from either a primary, or acquired medical condition, or medical treatment. Providers should:

- Assess patients for potentially immunocompromising conditions. If uncertain about a person's level of immunocompromise and whether vaccination is safe, do not vaccinate and seek further specialist advice. Use the **checklist** provided in the Australian Immunisation Handbook².
- Warn patients about potential adverse events, including the possibility of disseminated varicella infection.

¹ See Zostavax vaccine. TGA, 6 July 2020. Safety advisory - not to be used in people with compromised immune function: <https://www.tga.gov.au/alert/zostavax-vaccine-0>

² See Australian Immunisation Handbook – Recommendations for use of zoster vaccine in people on immunosuppressive therapy: <https://immunisationhandbook.health.gov.au/resources/handbook-tables/table-recommendations-for-use-of-zoster-vaccine-in-people-on>

Post-administration of Zostavax

Providers and patients must be aware that disseminated varicella-zoster virus infection may present up to 2-4 weeks post-vaccination in immunocompromised patients. Patients should be advised to seek medical attention if they become unwell after receiving Zostavax, and to ensure that they mention their vaccination history.

Disseminated infection typically presents as a vesicular (chickenpox-like) rash involving multiple non-contiguous dermatomes, potentially with central nervous and pulmonary system involvement¹.

Antiviral treatment should be initiated promptly if disseminated zoster is suspected. Current treatment guidelines for disseminated varicella-zoster infection recommend antiviral therapy with famciclovir, valaciclovir or aciclovir within 72 hours of the rash appearing on the basis of clinical signs and symptoms^{2,3}. Immunocompromised patients should be admitted to hospital for intravenous aciclovir^{2,3}. Diagnosis should be based on clinical assessment with diagnostic testing as supportive so as not to delay treatment (flagged as potential vaccine-associated varicella).

Guidance on administration of Zostavax

The Australian Immunisation Handbook contains specific guidance about Zostavax administration in patients who are immunocompromised or have medical conditions that place them at risk of immunocompromise. This guidance includes a checklist on contraindications for specific immunosuppressive medications, including prednisolone, hydroxychloroquine, methotrexate and biologic agents.

The Department of Health has undertaken a range of actions to further support the safe administration of Zostavax in Australia, including:

- Updates to the Australian Immunisation Handbook to capture further safety information supporting appropriate use of the vaccine.
- working with the sponsor of Zostavax (Merck Sharp and Dohme) to include additional warning information in the vaccine Product Information.

Immunisation against herpes zoster is a key objective for the health and wellbeing of older patients in Australia. Please ensure you remain aware of the advice contained in this letter when considering the appropriateness of the Zostavax vaccine for your patients.

The Department will continue to provide updates on this issue through the Therapeutic Goods Administration website (tga.gov.au) and the Australian Immunisation Handbook (immunisationhandbook.health.gov.au).

Yours sincerely



Professor Paul Kelly
Acting Chief Medical Officer

22 December 2020

¹ See Varicella zoster laboratory case definition: <https://www1.health.gov.au/internet/main/publishing.nsf/Content/cda-phlncd-varicella>

² MC Wehrhahn & DE Dwyer. *Herpes zoster: epidemiology, clinical features, treatment and prevention*. Australian Prescriber, VOLUME 35: NUMBER 5: OCTOBER 2012: <https://www.nps.org.au/australian-prescriber/articles/herpes-zoster-epidemiology-clinical-features-treatment-and-prevention>

³ Shingles. Therapeutic Guidelines Ltd (eTG August 2020 edition): <https://tgldcdp.tg.org.au/viewTopic?topicfile=shingles>