

Date: 11 June 2019

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To: Primary Care Teams, Health Professionals

From: Dr Niki Stefanogiannis, Deputy Director, Public Health

Subject: **Influenza vaccine supply, Measles, Proposed changes to the National Immunisation Schedule, Addressing vaccine hesitancy, Influenza surveillance, IMAC conference**

Influenza vaccine supply

The distribution of influenza vaccine in New Zealand has reached near record levels. Around 1.3 million doses of influenza vaccine have been distributed already this winter. This number is close to last year's all-time record of 1.326 million doses for the entire season, and exceeds the number of doses distributed each year in 2016 and 2017. We appreciate the hard work that providers have undertaken to deliver influenza vaccine to this extent.

Due to continued high demand for the influenza vaccine, there is no more Inluvac Tetra available to order from HCL and your existing orders for Inluvac Tetra have had to be cancelled. Strictly limited stocks of Fluarix Tetra can still be ordered, with a maximum order of 5 doses. **Limited stock of Afluria Quad will however also be available for eligible patients.** The Ministry of Health is asking General Practices and Pharmacists to prioritise vaccinating those at greatest risk of influenza:

- Pregnant women
- Children aged 4 and under with serious respiratory illnesses
- People with severe asthma, heart disease, diabetes and other serious health conditions that make them more susceptible to influenza
- Those aged 65 and over.

If you have very limited stock of Fluarix Tetra at your practice, the highest priority groups are pregnant women and young children with structural lung disease, for example ex premature children with bronchopulmonary dysplasia. The Ministry will be working with PHOs to assist with sharing vaccines between practices if required, and will provide further information as this process is established.

PHARMAC have amended the funding criteria for Fluarix Tetra and have funded Afluria Quad to ensure that influenza vaccine is available for the above eligible groups:

- Fluarix Tetra is now funded for pregnant women as well as children aged between 6 and 35 months.
- Following agreement with Seqirus, Afluria Quad is now funded for eligible patients and can be claimed as for other funded vaccines. Please note that this is indicated only for those aged 5 years and older.

Practices and pharmacies will be able to claim for administration and vaccine cost when they administer these vaccines to their eligible patients. Note that while one box of Inluvac Tetra or Fluarix Tetra may be returned at the end of the year for refund, Afluria Quad cannot be returned.

For more detailed information on eligibility criteria, see www.influenza.org.nz. Please do **not** call 0800 IMMUNE with questions about influenza vaccine availability - call your local Immunisation Co-ordinator.

Measles

Auckland

Auckland Regional Public Health Service and the Ministry of Health are advising practices in the three Auckland DHB regions to move the 15 month vaccinations, including MMR, to 12 months. A shipment of MMR II brand vaccine (rather than the usual Priorix) has been set aside for delivery to Auckland practices. For detailed information see www.arphs.health.nz/public-health-topics/disease-and-illness/measles/

Rest of New Zealand

The risk of catching measles is lower for the rest of New Zealand so the normal immunisation schedule should be maintained with MMR given at 15 months and 4 years. However, children travelling to countries where there are measles outbreaks can be vaccinated with MMR as young as 6 months. Authorised vaccinators can administer MMR vaccination for children in these circumstances under the current eligibility criteria. Because the vaccine's effectiveness is lower at this age, babies vaccinated before 12 months of age will still need two further doses of the vaccine at 15 months and 4 years for long term protection.

In Auckland and everywhere else, older children and adults aged up to 50 years who have no documented evidence of vaccination against measles are recommended to get vaccinated. Those needing a second dose should be asked to wait and be put on their practice's recall. One dose protects about 95 percent of people. MMR vaccination is free for eligible people. Those over 50 years of age are considered immune as the disease was widespread in their childhood.

Updates to this information will be published on the Ministry of Health website at www.health.govt.nz/our-work/diseases-and-conditions/measles-information-health-professionals

Addressing vaccine hesitancy

There has been a small increase in vaccine hesitancy across the country in the last year. We recommend using the *Let's Talk About Immunisation* tool to support your conversations with parents. The Ministry's video "Immunisation: Common Questions Answered" (<https://youtu.be/Ww6raV3Ra8I>) is also designed to address questions by more hesitant parents. There are also other great resources available on the Immunisation Advisory Centre's (IMAC's) website to help you answer any questions (www.immune.org.nz/resources/written-resources).

You may wish to provide the parent with appropriate resources around their decision, such as IMAC's factsheet "What if I delay or decline immunisation". The Ministry supports an "open door" policy to encourage parents/caregivers who have declined or deferred immunisations to re-engage and catch up on immunisations at any time. Please keep conversations open and take every opportunity to re-engage with parents and catch up on immunisations at any time.

Recording declines on the NIR

- You can record a child as a decline on the NIR when you have talked with the parent/caregiver and they wish to decline.
- When parents say they would like to delay vaccines, please do not record this as a decline.
- Please only record that particular vaccine event as a decline – do not decline future events.
- Do not invite parents to sign a "decline form" – this may increase decline rates as it closes the conversation.
- We recommend that providers record the reasons for decline so that strategies to address the needs of local populations can be developed. It will also enable your care team to follow up questions or concerns in future visits.

Proposed changes to the National Immunisation Schedule

PHARMAC has proposed changes to the vaccines procured to support the National Immunisation Schedule, which will mostly take effect on 1 July 2020 – see here for further details: www.pharmac.govt.nz/news/consultation-2019-05-08-immunisation/

Invitation for practices to take part in influenza surveillance

ESR is seeking more practices to contribute to Influenza-Like Illness (ILI) surveillance this winter. In New Zealand, ILI surveillance is the primary way that we monitor for influenza and other respiratory virus circulation in the community. This general practice based surveillance system provides rates of influenza associated ILI visits at the national and District Health Board level, but only if enough practices participate. This year's surveillance began at the end of April, but ESR are still seeking to enrol more practices. If you are interested, please contact Liza Lopez (liza.lopez@esr.cri.nz) at ESR.

2019 New Zealand Immunisation Conference: abstracts, awards and registration

IMAC are seeking abstracts for the upcoming Immunisation Conference being held on Friday 6 and Saturday 7 September in Auckland. A pre-conference workshop will also be held on Thursday 5 September on improving coverage, cold chain, communications and vaccine administration issues.

The Conference is a great opportunity to share your research or service delivery experiences, and the deadline for abstracts has now been extended to 21 June. They are also seeking nominations for the inaugural Immunisation Awards. Go to www.nzimmsconference.co.nz for more information on the draft programme, registration details and how to submit abstracts.

If you have any queries about anything in this update, please email immunisation@health.govt.nz (please note that personal Ministry of Health email addresses have changed from `firstname_lastname@moh.govt.nz` to `firstname.lastname@health.govt.nz`)