Quick answers to frequent MMR for infants aged 6–11 months questions (18 October 2019)

In the Auckland region
From Monday 21 October, the Auckland region will begin a targeted MMR vaccination programme for infants aged 6–11 months. Expanded recommendations for MMR vaccination priorities in older children and adults will also take effect (these are available on our Measles and MMR vaccination information webpage). The targeted vaccination programme continues to be designed to protect the most vulnerable people during the current measles outbreak.

Practices are asked to actively precall infants to receive an MMR vaccination when aged 6–11 months. This dose can also be given opportunistically if they are at the practice, not acutely unwell and have no contraindications to receiving a live vaccine.

What is MMR0?
» MMR administered when an infant is aged 6–11 months is called MMR zero (MMR0).
» Infant's receiving MMR0 still require MMR vaccinations at 12-months (MMR1) and 4-years (MMR2) as per the Schedule.

Is the pre-vaccination check the same for infants aged 6–11 months receiving MMR?
Yes. Vaccinators are advised to follow the pre-vaccination screening process used prior to administration of live vaccines for children and adults. Vaccinators may need to consider receipt of a BCG vaccination when planning administration of MMR0. Receipt of oral rotavirus vaccine does not affect the timing of MMR0.

Check if the infant has received a BCG vaccination
» A minimum interval of 4 weeks is required between administration of BCG vaccination and a subsequent MMR vaccination when they have not been administered on the same day.
» DO NOT administer vaccines in an infant’s left arm for 3 months after BCG vaccination to reduce the risk of local lymphadenitis.

For infants aged under 8 months — Check if the mother was taking immunosuppressive medication during pregnancy
Some immunosuppressive medications taken by the mother during pregnancy cross the placenta and cause immunosuppression in their infant for up to 8 months after birth. If the infant’s mother received immunosuppressive treatment during pregnancy, please discuss with mother and her specialist, or call 0800 IMMUNE for advice.

Which MMR vaccine do we administer?
Priorix® and M-M-R® II are fully interchangeable to complete a course of MMR vaccination. There are no safety concerns associated with the use of either vaccine in this age group. However, the vaccine brand used determines whether an authorised vaccinator requires a doctor’s prescription to administer the vaccine or not.

Priorix
» Every dose of Priorix administered to an infant aged 6–11 months needs to have been individually prescribed.
» Priorix cannot be administered to infants aged 6–11 months under a standing order.

M-M-R II
» Authorised vaccinators in primary care will be able to administer the M-M-R II vaccine to infants aged 6–11 months without an individual prescription when stock has been distributed to primary care.
» M-M-R II can be administered to infants aged 6–11 months under a standing order in any community based targeted immunisation programmes.

What injection site do we use?
The MMR vaccine can be administered subcutaneously (SC) in the infant’s upper arm overlying the deltoid muscle. Routine use of the right arm reduces the possibility that the MMR vaccine will be administered into the left arm less than 3 months after a BCG vaccination.

Infants aged 11 months who receive MMR0
» There must be a minimum interval of 4 weeks between MMR0 and administration of the live varicella and MMR vaccines due from 12 months of age.
» Vaccinators need to ensure they adjust the recall for Schedule vaccines to ensure there is a minimum interval of 4 weeks.
» Parents may wish to defer the administration of MMR0 to an infant aged 11 months so they can receive their varicella vaccination at 12 months old. Chickenpox is still circulating. Typically, there is a rise in chickenpox leading up to the summer holidays and Christmas.

Are infants aged 6–11 months more likely to have adverse responses following MMR vaccination?
No. The vaccine response and safety profile is the same for all recipients of MMR vaccine irrespective of their age.

How well does MMR0 protect infants aged 6–11 months from measles?
There is no efficacy answer. Any immunity from MMR administered when they are under 12 months old is determined by the presence of maternal measles antibody. If there is enough maternal antibody to inactivate the vaccine the infant will not develop any immunity. If there is no maternal antibody then they probably will develop immunity. We cannot determine the likelihood of maternal measles antibody in individual babies.

How do we enter MMR0 into the PMS and claim?
» Enter the dose on the NIR using your PMS ‘MMR at-risk’, ‘MMR misc’ or ‘MMR primary’ vaccine option.
» Leave the Schedule 15-months and 4-years MMR vaccinations as to be given in the future.
» Ensure ‘AutoBill’ is selected as an Immunisation Subsidy can be claimed.
» If the MMR ‘at-risk’, ‘misc’ or ‘primary’ vaccine option has not been activated in your PMS, contact the PMS provider for advice.

Can we give the vaccines due at 15 months of age before an infant is aged 12 months?
No. A child must be aged 12 months or older to receive the 15-months Schedule vaccines. If the child has previously received a MMR0 dose, ensure there has been a minimum interval of 4 weeks before administering the Schedule vaccines.

Outside the Auckland region
Advice for infants aged 6–11 months
There has been no change to this advice.
» Infants aged 6–11 months can receive MMR vaccination:
  » If they are travelling overseas to a country with a measles outbreak or Auckland, ideally at least 2 weeks before travel.
  » If they are a contact of a confirmed case within 72 hours of first exposure to measles.
  » On parental request if there are concerns about a high-risk of exposure to measles and their GP advises administration of MMR.