



Immunisation Handbook 2014 3rd edition



The third edition of the online Immunisation Handbook 2014 is available on the Ministry of Health website www.health.govt.nz/publication/immunisation-handbook-2014-3rd-edn. This update includes the 2017 HPV vaccine Schedule changes, with a fully revised human papillomavirus chapter and HPV vaccine catch-up tables, and changes to

Appendix 4. There are no hard copies of the updated Handbook available. All immunisation providers are advised to refer to the current online Handbook. Providers can download the current online Handbook in an e-book or PDF format.

HPV immunisation from 1 January 2017

Gardasil® and Gardasil® 9 are fully interchangeable

- » Gardasil® 9 (HPV9) will be distributed to general practice after the national stock of Gardasil® (HPV4) has been used up.
- » Eligible individuals can receive either Gardasil® (HPV4) or Gardasil® 9 (HPV9).
 - » Individuals who begin with Gardasil® (HPV4) can complete their vaccine course with Gardasil® 9 (HPV9).
 - » There are no safety concerns with changing vaccine brands during a course of vaccines.
 - » The number and timing of doses is the same for both vaccines.

Eligibility for funded HPV vaccine

- » All eligible males and females aged from 9 years to under 27 years.
 - » HPV immunisation course is funded from 9 years in primary healthcare.
 - » The School-based Immunisation Programme deliver the vaccine to school students in year 8.
 - » Non-residents must be aged under 18 years to start a funded HPV vaccine course.
- » Catch-up
 - » NZ residents: if at least one dose was given before 27 years of age, there is no upper age limit to receive funded catch-up doses.
 - » Non-residents: if at least one dose was given before 18 years of age, there is no upper age limit to receive funded catch-up doses.

HPV vaccine administration

- » Males and females aged from 9 years to under 15 years
 - » Two HPV vaccine doses at 0 and 6–12 months.
 - » If doses one and two are given at least 5 months apart, no further doses are required.
 - » If doses one and two are given less than 5 months apart, a third HPV vaccine dose is required.
 - » If dose two is not given until the child is aged 15 years or older, a third HPV vaccine dose is required.
- » **Note:** The two dose Gardasil schedule can be applied to girls who received Gardasil doses prior to 2017
 - » If two doses were given at least 5 months apart when the girl was aged under 15 years – no further doses are required. The historical 'outstanding' third dose showing in the PMS can now be closed.
 - » If two doses were given less than 5 months apart when the girl was aged under 15 years – a third dose is required.
- » Males and females aged from 15 years to under 27 years
 - » Three HPV vaccine doses at 0, 2, and 6 months.
 - » An alternate schedule can be followed, 0, 1, 4 months
- » Males and females aged from 9 years to under 27 years who are HIV-positive, post-solid organ or post-stem cell transplantation
 - » Three HPV vaccine doses for all ages at 0, 2, and 6 months.

COLD CHAIN MATTERS ...



Vaccine refrigerator temperature monitoring

Vaccines are delicate biological substances. Storing vaccines at temperatures between +2°C to +8°C from the time of manufacture to the point of administration is essential to maintain vaccine potency so they provide the expected level of protection against the disease/s for which they were designed.

The people involved and the practice and processes they undertake are just as important as the equipment that is used in maintaining the cold chain.

The Ministry of Health have recently released the *National Standards for Vaccine Storage and Transportation for Immunisation Providers 2017* (www.health.govt.nz/coldchain). All immunisation providers are still required to check and record the daily minimum and maximum temperatures, however the frequency of data logger downloads has been increased to weekly.

The data logger provides invaluable information on the duration of any temperature variations as it samples the refrigerator temperature at set interval and for this reason must also be download and the data reviewed whenever the daily minimum or maximum temperatures are outside the +2°C to +8°C range.

Data loggers should be set to record the refrigerator temperature at least every 10 minutes, 5 minutes is recommended if the logger has capacity.

Your Immunisation/Cold Chain Coordinator should be your first contact if you have any concerns about your cold chain. You can find their details on the [Health Professionals/Regional Advisors and Local Coordinators](#) page on our website.



10th New Zealand Immunisation Conference and Pre-Conference Workshop

Save the date

The Conference and Workshop will be held on 7–9 September 2017 in Wellington, New Zealand. Details will be placed on our website as they become available.

Answers to frequent HPV related questions (updated January 2017)

UPDATED

The [updated fact sheet](#) is available on our website and explains:

- » Gardasil® and Gardasil® 9 are fully interchangeable
- » Gardasil® 9 availability in 2017
- » HPV vaccine eligibility
- » Catch-up planning for primary care
- » Vaccine administration schedules
- » Answers to frequently asked HPV vaccine administration questions
- » HPV vaccine efficacy and safety

Visit the [Hot Topics](#) box or [Written Resources](#) page on our website to download the fact sheet.



●●● from the phones

Addressing some of the questions we receive on the 0800 IMMUNE phone line

Influenza website for health professionals

A key resource for the 2017 Influenza Immunisation Programme is the *Health Professionals* website, www.influenza.org.nz.

Influenza Immunisation Programme resources can only be ordered online through the website. Programme updates are posted on the website as well as information about claiming funded vaccine, recording influenza immunisation on the NIR, use of antivirals for influenza treatment and/or prevention, and related diseases (pneumococcal, meningococcal, and pertussis). You can also access the Influvac[®] data sheet, funded vaccine order form, and the Influenza Kit references.

2017 Influenza Kit

When will I receive my 2017 Influenza Kit?

Influenza Kits will be posted to general practices, DHB/healthcare workers, private vaccinators, pharmacists, and midwives/LMCs towards the end of February.

If you have not received an Influenza Kit by 8 March, please contact Erin by email influenza@auckland.ac.nz or telephone 09 923 2075.

The 2017 Influenza Kit is also available online at www.influenza.org.nz.

Where can I order Influenza Immunisation Programme resources?

Influenza Immunisation Programme resources can only be ordered online through the *Health Professionals* website, www.influenza.org.nz.

2017 influenza vaccine

What influenza vaccine brand is funded for eligible patients?

Influvac[®] is the only vaccine funded for individuals who are eligible to receive free influenza vaccine. Claims submitted for any other influenza vaccine brand will not be accepted.

How do I order the funded influenza vaccine?

Influvac[®] can be ordered online at www.hcl.co.nz or by fax.

The online order process is less susceptible to error, has an audit trail and is faster. However, a fax order form can be photocopied from the Influenza Kit or downloaded from www.influenza.org.nz.

How often can I order the funded influenza vaccine?

Depending on your fridge capacity, please try to order every two weeks (the same weeks as you order funded Schedule vaccines).

Due to demand, please allow up to 48 hours for dispatch of your order. Please do not book clinics before you receive your vaccines.

When will the funded influenza vaccine be available?

Distribution of influenza vaccines is expected to begin in March. Please do not book clinics before you receive your vaccines.

When can we start giving the funded influenza vaccine?

Administration and claiming of funded influenza vaccines can begin as soon as your clinic receive the vaccines.

Are influenza vaccinations being recorded on the NIR?

Yes. All influenza vaccinations given at general practices will be recorded on the NIR unless the person does not want their vaccination recorded on the Register. Information about recording influenza vaccinations on the NIR is available in the 2017 Influenza Kit.

Pharmacists will use a new NIR web browser called *Immunise Now* to record influenza vaccinations on the NIR. Pharmacists are still required to notify the person's GP and/or lead maternity carer when they have administered an influenza vaccine.

GET THE FACTS ON IMMUNISATION



Influenza Immunisation Programme update

Influenza.
Don't get it.
Don't give it.

Influenza vaccine administration

When can influenza vaccine be given during pregnancy?

Influenza vaccines can be given at any time during pregnancy.

- » Pregnant women have a higher risk of influenza disease and serious complications for herself and her baby than non-pregnant women.
- » Influenza immunisation during pregnancy helps to protect the newborn baby from influenza for up to 6 months after birth.
- » The influenza vaccine has an excellent safety profile.

Do we expel the air bubble in the Influvac[®] syringe?

No. It is not necessary to expel the air bubble from pre-filled vaccine syringes.

The only exception to leaving the air bubble in a pre-filled vaccine syringe is when it is necessary to expel half of the influenza vaccine to provide a paediatric dose of Influvac[®].

Is Influvac[®] a single dose vaccine?

Yes. When a half-dose (0.25mL) of vaccine is required for a child aged 6–35 months, the unused portion of vaccine must be discarded.

Can Influvac[®] be given with other vaccines?

Yes. Influvac[®] can be administered with other vaccines such as Tdap, pneumococcal vaccines or the childhood National Immunisation Schedule vaccines. However, the vaccines must be given at different injection sites.

Children receiving influenza and Prevenar[®] 13 (PCV13) vaccines concurrently have an increased risk of post-vaccination fever. Adults have an increased risk of fatigue, headache and body aches and pains when these vaccines are administered concurrently. Separating administration of these vaccines by two days can be offered, but is not essential.

Influenza vaccine precautions

Can Influvac[®] be given to people with egg allergies?

In most cases the vaccine can be safely administered to people with a history of allergy to egg.

If a patient has a high-risk of complications from influenza and has a history of egg anaphylaxis, it is important to seek specialist advice. The risk of anaphylaxis needs to be considered against the benefits of being protected from influenza or its complications. As the vaccine virus is grown in hens' eggs, it may contain minute amounts of egg protein. Other allergies to eggs that are non-anaphylactic are not a contraindication.

Can Influvac[®] be given to people with antibiotic allergies?

Influvac[®] contains traces of gentamicin due to the use of this substance during production.

- » Anaphylaxis to gentamicin is a contraindication for immunisation with Influvac[®].
- » Allergy or hypersensitivity to gentamicin that is not anaphylaxis is NOT a contraindication for immunisation with Influvac[®].

People with anaphylaxis or allergy to any other type of antibiotic is NOT a contraindication for immunisation with Influvac[®].

Is Influvac[®] latex free?

Influvac[®] syringes do not contain any latex components. However, the manufacturer (Mylan) is unable to confirm that the product did not come in contact with any latex materials during the manufacturing and packaging process.

People with a history of a severe hypersensitivity reaction to latex are advised to discuss receiving an Influvac[®] influenza immunisation with their doctor.

Contact the editorial team:
Fax: 09 373 7030
Email: immnuz@imac.org.nz