



## COLD CHAIN

### MATTERS ... No break for the cold chain over summer

Take a moment to check your cold chain management process is clear and understood by all the staff who will be working through this time. This is particularly important if you have locum staff in to cover.

The minimum cold chain requirements are:

- » Your Cold Chain Management Policy is up to date and your back up refrigerator facilities are available over this period.
- » Daily minimum/maximum temperatures are checked and recorded every day your workplace is open.
- » Once a week your data logger is downloaded and the temperature information reviewed alongside the daily minimum/maximum temperatures. Appropriate action is taken if there is a significant variation between the min/max and data logger temperatures.
- » All staff know how to download the data logger and review the information if there is a variation in the minimum/maximum temperature readings or a cold chain breach has been identified. Don't assume that everyone knows how to use the logger.
- » All staff know what actions are required and who to contact if there is a cold chain problem. Each DHB has an Immunisation and/or Cold Chain Coordinator. Generally, they will only be available on business days. If your clinic is open on statutory days, ensure a plan is in place should a cold chain problem occur.
- » If your refrigerator is not turned off but does not contain vaccine (or other refrigerated medicines) and you only have on-call staff, e.g. public health units, ensuring the refrigerator continues to function correctly can be done with a minimum/maximum temperature check. Downloaded the data logger and start routine monitoring before ordering vaccines.
- » If your refrigerator is turned off due to not holding stock, turn it back on and start routine monitoring before ordering vaccines.

Remember, if there is a cold chain problem and you have any concern about the stability of vaccines, quarantine them at +2°C to +8°C until you can get more advice from your Immunisation/Cold Chain Coordinator.

### **NZIS** 2018 New Zealand Influenza Symposium

8th February 2018

Rutherford House, Victoria University, Wellington

The Symposium is a one-day meeting for those interested in the application of scientific knowledge to influenza and influenza immunisation delivery in New Zealand.

With highly regarded international and local speakers, it is an excellent opportunity to get an update on all things influenza-related. We will also review our programme approaches, learnings in the field from the 2017 New Zealand influenza season and developments for the 2018 programme.

The day will conclude with a diverse range of speakers covering ethics relating to healthcare worker influenza vaccination, pandemic preparedness and a historian's presentation of the 1918 New Zealand influenza pandemic.

Rutherford House is located close to Wellington train station. Visit our website to view the draft programme and register.

### Pandemic influenza summer school

7th February 2018

University of Otago, Wellington

2018 marks 100 years since the 1918 influenza pandemic that claimed the lives of 50 to 100 million people (three to five percent of the world's population). In New Zealand, more than 8,600 died.

The Otago Medical School are holding a one day 1918 Influenza Pandemic Summer School on the day before the Influenza Symposium. More information and registration can be accessed via the University of Otago/Public health/Summer school webpage.

### Protecting your pharmaceutical refrigerator

Surge protection devices are required for some pharmaceutical refrigerators to protect them from power surges/spikes, check with your supplier regarding this.

Residual current devices (RCDs) protect against electrocution if there is an electrical fault. They do not protect against power surges/spikes. These devices may be portable, i.e. plug into a power point, or fixed, i.e. wired into the power point or main switchboard.

A plug-in RCD is **not recommended** for a pharmaceutical refrigerator. These devices are tripped by a power cut and need to be manually reset. If a power cut occurred when your workplace is closed, power would not be restored to the refrigerator until someone reset the RCD.

A fixed RCD is the preferred option for pharmaceutical refrigerators. They do not trip in the event of a power cut.



*The  
Immunisation Advisory Centre team  
would like to thank you  
for your support and  
efforts to protect our community  
from vaccine preventable diseases throughout 2017.*



*We wish you and your whānau  
a joyous Christmas and  
healthy New Year.*



## 2018 education courses

Dates for the 2018 education courses are available on our [Education & training](#) webpage. Courses include:

### Vaccinator training course - Flexible learning

- » 12 hours of self-directed online learning followed by a 4-hour tutorial for new vaccinators

### Vaccinator training course - Two day

- » 16-hour (2 day) course for new vaccinators

### Online vaccinator update courses

- » Separate updates for specific groups and specialties
  - » Infants to adults
  - » Adolescents to adults
  - » Public health nurses
  - » Pharmacists
  - » Midwives (accredited for education hours by the Midwifery Council of New Zealand)
- » Equivalent to the 4-hour vaccinator update course
- » Completed online at your convenience

### Vaccinator update course

- » 4-hour vaccinator update course

### Midwives immunisation course

- » 8-hour course for midwives (can be purchased by DHBs)
- » Accredited for education hours by the Midwifery Council of New Zealand

## 0800 IMMUNE

### Christmas/New Year hours

The 0800 IMMUNE phone line and email service will close at 4.30pm on Friday 22 December and re-open at 9am on Wednesday 3 January 2018.

### Auckland Anniversary Day hours

A limited 0800 IMMUNE phone line service will be available on Monday 29 January 2018, Auckland Anniversary Day.

### When the phone line is closed –

 Health professionals should contact their [Immunisation/Cold Chain Coordinator](#) for cold chain and immunisation inquiries.

## ●●● from the phones

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

### Priorix® is given subcutaneously (SC)

The data sheet for Priorix indicates the vaccine can be given by either subcutaneous or intramuscular injection. In New Zealand, subcutaneous injection is the preferred administration method for Priorix under the New Zealand Immunisation Schedule.

### Vaccines due at 15 months can be given early

The Hib, varicella, pneumococcal and MMR vaccines can be given from 12 months of age on parental request.

A child aged 12–15 months who is a contact of a chickenpox case can be given their funded varicella vaccine dose for post-exposure prophylaxis along with the other scheduled 15 months vaccines.

When a dose of varicella vaccine is given within 3–5 days of exposure to varicella virus, vaccination may prevent the development of wild disease or reduce disease severity. If the child does get chickenpox, the vaccination does not make the disease more severe.

With outbreaks of measles and mumps overseas, administration of the MMR vaccine from 12 months of age before travel, along with the other scheduled 15 months vaccines, could prevent measles or mumps in the travelling child and also reduce the risk of measles or mumps being brought back to New Zealand after their holiday.

GET THE FACTS ON IMMUNISATION

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## Pertussis outbreak

There has been a significant increase in the number of pertussis cases reported in the last four weeks, compared to the same period in 2016. Pertussis epidemics occur regularly every three to five years, so this increase is expected to be the early stages of an epidemic and rates are likely to continue to increase. Young babies are at highest risk of severe disease and the main focus is on protecting them.

From 1 January–10 November 2017, a total of 1315 cases of whooping cough were notified around the country. Of these cases, 82 were babies aged under one year old. Half of these babies were hospitalised. Babies aged under one year are particularly vulnerable to whooping cough, but are at greatest risk of severe disease during the first few months of life.

From 2010 to 2013 there were four deaths from whooping cough, three were babies too young to have started their immunisations. We are hoping that if we can get a high uptake of maternal Tdap immunisation we would not see any infant deaths this time.

Immunisation of pregnant women with one funded Tdap (Boostrix®) between 28–38 weeks of every pregnancy provides the best protection for new-born babies. When pregnant women are immunised, they pass their immunity on to their baby, protecting them for their first few months of life, until baby can be fully immunised. The protection the baby gets from their mother is temporary so it is very important to start baby's immunisations on time at 6 weeks.

- » **Receipt of the free whooping cough booster vaccine during pregnancy** is the best way to reduce the risk of a new-born being hospitalised from whooping cough.
- » **On-time immunisation of babies at 6 weeks, 3 months and 5 months of age** is the next important way of reducing the risk to our young children.

It is important for health professionals to raise awareness of timely immunisation as a crucial way for parents, whānau and pregnant women to protect their babies and children against whooping cough. Please continue to promote vaccination amongst your clients/patients.

Health professionals could also encourage colleagues, especially those working with babies, children and pregnant women, to be immunised against whooping cough if it is 10 or more years since their previous pertussis booster immunisation.

### Resources

**HealthEd resources to order** ([www.healthed.govt.nz](http://www.healthed.govt.nz))

- » Immunise against whooping cough (HE2503)
- » Protecting baby starts in pregnancy (HE2504)
- » Childhood immunisation (HE1323)
- » Immunise your child on time - English version (HE1327)
- » Immunise your child on time - te reo Māori version (HE1531)

**IMAC resources to print or view** ([www.immune.org.nz](http://www.immune.org.nz))

- » Pertussis (whooping cough)
- » Recommended and funded vaccines during pregnancy
- » Whooping cough video

### ProPharma vaccine orders

ProPharma will be closed on the statutory days 25th & 26th December, and 1st & 2nd January. Normal hours resume on Wednesday 3rd January 2018.

The last day for routine vaccine orders is Wednesday 20th December for out of town providers and Thursday 21st December for providers who receive local deliveries.

Urgent vaccine orders can be placed in the usual way 27–29 December inclusively BUT you also need to telephone the Funded Vaccine toll free number 0508 482 224 and advise that you have placed an urgent vaccine order. ProPharma will process the order accordingly.

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