



ISSUE 99 – MARCH 2018

## Zostavax® eligibility from 1 April 2018

### What is Zostavax®?

Zostavax® is a live attenuated varicella-zoster vaccine used to reduce the risk of herpes zoster (shingles), acute herpes zoster-related pain and the development of chronic pain from post-herpetic neuralgia. Zostavax® is around ten times stronger than the varicella (chickenpox) vaccine.



### What is herpes zoster (shingles)?

Herpes zoster is caused by the reactivation of latent (sleeping) varicella-zoster virus, usually years after having chickenpox disease or vaccination.

- » The risk of developing herpes zoster increases with advancing age.
- » As many as one in three people will have herpes zoster in their lifetime. Of those aged 85 years, at least half will have had herpes zoster.
- » The risk of post-herpetic neuralgia increases with older age at the time of herpes zoster.

### Who can receive free Zostavax® from 1 April 2018?

#### Adults aged 65 years on/after 1 April 2018

- » No upper age limit to receive funded Zostavax® dose.
- » No time limit to receive funded Zostavax® dose.
- » Available from general practice only.
- » Schedule vaccine, comes from ProPharma.

#### Adults aged 66–80 years inclusively on 1 April 2018

- » Eligible until 31 March 2020 or they turn 81 years of age, whichever comes first.
- » Time-limited catch-up programme.
- » Available from general practice only.
- » Schedule vaccine, comes from ProPharma.

**Please note:** Adults aged 50–64 years or 81 years or older are not eligible to receive funded Zostavax®. Vaccine stock is purchased from Healthcare Logistics. Available from general practices and some pharmacies. In general practice, Zostavax® for non-funded adults must be prescribed.

### Can Zostavax® be given at the same visit as other vaccines?

Yes. Zostavax® can be administered at the same visit as any other vaccine, including influenza (Influvac® Tetra), pneumococcal (Pneumovax® 23), Tdap (Boostrix®) and Td (ADT™ Booster) vaccines. Separate syringes and different injection sites should be used.

### Are there any special Zostavax® preparation and administration instructions?

Yes.

- » Only reconstitute the lyophilised Zostavax® vaccine using the diluent supplied in the prefilled syringe.
- » Take care not to pull the plunger out of the syringe when withdrawing the reconstituted vaccine from the vaccine vial.
- » Administer the vaccine immediately after reconstitution to minimise loss of potency.
- » Discard reconstituted vaccine if not used within 30 minutes.
- » Inject the total volume of reconstituted vaccine (0.65 mL) subcutaneously in the deltoid area.

## Influenza Immunisation Programme 2018

### Two funded quadrivalent influenza vaccines

#### Influvac® Tetra

For adults and children aged 3 years or older. This vaccine is expected to be available early-April.

#### Fluarix® Tetra

For children aged under 3 years, i.e. 6–35 months. Please ensure you reserve the Fluarix® Tetra vaccine for paediatric patients only. This vaccine is expected to be available mid-April.

### New influenza vaccination precaution

Influenza vaccination may be contraindicated or need to be delayed for people receiving the following four new cancer treatments. The immune checkpoint inhibitors atezolizumab (Tecentriq®), ipilimumab (Yervoy®), nivolumab (Opdivo®) and pembrolizumab (Keytruda®) act as immune-stimulants and increase a person's risk of developing autoimmune conditions.

It is not known whether receipt of an influenza vaccine whilst receiving these treatments or for up to six months after treatment increases a theoretical risk of triggering the occurrence of these side effects. Please contact the person's oncologist or 0800 IMMUNE (0800 466 863) for current advice about influenza vaccination for these people BEFORE administering the vaccine.

### Influvac® Tetra and Fluarix® Tetra can be given to people with egg allergy or egg anaphylaxis

Studies have shown that influenza vaccines containing less than one microgram of ovalbumin do not trigger anaphylaxis in sensitive individuals. The residual ovalbumin in one dose of Influvac® Tetra or Fluarix® Tetra is significantly below this limit. These vaccines can be safely administered to people with a history of egg allergy or egg anaphylaxis at general practices, pharmacies or at the workplace.

### Children who receive two influenza vaccines doses in 2018

Children aged under 9 years, who are receiving influenza vaccine for the first time should receive two doses four weeks apart.

Fluarix® Tetra is the age-appropriate vaccine for a child aged under 3 years when they attend for influenza immunisation. If the child is aged 3 years or older when they return for their second influenza immunisation in 2018, Influvac® Tetra is the age-appropriate vaccine to administer.

Different quadrivalent influenza vaccine brands in a single season are considered interchangeable.

### Funded influenza vaccine orders

Influenza vaccine ordering is handled by Healthcare Logistics (HCL). Online ordering at [www.hcl.co.nz](http://www.hcl.co.nz) is preferred (registration required). However, a printed order form is available in the Flu Kit Booklet 2018 and in the Resources section on the website [www.influenza.org.nz](http://www.influenza.org.nz). This form can be faxed to 0508 408 358.

Orders will be dispatched as soon as the funded vaccine is released by the Ministry of Health. **Please do not organise clinics before your vaccine stock has arrived.**

### Influenza Immunisation Programme resources

Printed copies of the Flu Kit Booklet 2018 and samples of printed resources have been posted to providers. Visit the Resources section on the website [www.influenza.org.nz](http://www.influenza.org.nz):

- » To view an electronic version of the Flu Kit Booklet 2018.
- » To order printed influenza resources (online ordering only).



## ...from the phones

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

### Gardasil®9 (HPV9) supply constraint

PHARMAC has advised that supply of Gardasil® 9 will be limited until September 2018 due to global supply issues. Distribution of the remaining New Zealand stock will be limited to school-based immunisation programmes and practices with patients who meet the "special groups" eligibility criteria:

- » Individuals aged 9–26 years inclusively post-solid organ transplantation; post-haematopoietic stem cell transplantation; post-chemotherapy or who are HIV-positive.

Practices with patients who need to complete their final (second or third) vaccination in accordance with the recommended vaccination administration period should delay these doses until September where possible.

Vaccinators should not start new patients on Gardasil® 9 until the new supply is confirmed in September 2018, unless they are high-risk as noted above. Vaccinators who have patients currently aged 26 years can delay their first dose of the vaccine due to the shortage and submit a manual claim for the administration of their vaccine. The final date for such manual claims will be advised once normal vaccine supply has resumed.

If you have any questions regarding Gardasil® 9 vaccine supply please contact PHARMAC, phone 0800 660 050 or email [enquiry@pharmac.govt.nz](mailto:enquiry@pharmac.govt.nz).

### HBvaxPRO® 5 mcg and 10 mcg are out of stock until 2019

Enerix®-B 20 mcg/1 mL replaces HBvaxPRO® 5 mcg and 10 mcg until HBvaxPRO® is available again. Funded Enerix®-B vaccine is distributed by ProPharma.

Enerix®-B is used in the same manner as HBvaxPRO® 5 mcg and 10 mcg.

- » The full dose of 20 mcg/mL is administered to eligible neonates, infants, children and adults.
- » Do not attempt to administer less than the full dose provided in the pre-filled Enerix-B syringe.

HBvaxPRO® 40 mcg continues to be available for adults aged 18 years or older who are on renal dialysis or who are liver or kidney transplant patients.

GET THE FACTS ON IMMUNISATION



## Immunisation week

30 April to 6 May 2018

The focus of the Week will be promoting immunisations to older people, i.e. influenza, shingles, diphtheria and tetanus, and encouraging immunisation across the lifespan. Contact your Immunisation Coordinator for more information and resources.



## Immunisation Handbook 2017 2nd Edition

The second edition of the *Immunisation Handbook 2017* is available on the Ministry of Health website in mid-March [www.health.govt.nz/publication/immunisation-handbook-2017](http://www.health.govt.nz/publication/immunisation-handbook-2017).

This update includes important new information in the Influenza and Zoster chapters.

The *Immunisation Handbook 2nd Edition* is not being printed. All immunisation providers are advised to refer to the online Handbook. Providers can also download the complete Handbook in PDF and e-book formats.

## COLD CHAIN

## MATTERS ...



### Unpacking vaccine orders

When unpacking vaccines, it is essential to check the vaccines received against the packing slip that is in a plastic bag on top of the vaccines. A significant number of vaccines have been returned to ProPharma for destruction or simply thrown out because packing material covered the vaccines and they were left in the transport container. This type of vaccine loss is easily preventable. The vaccines still have to be paid for by your District Health Board.

### When unpacking a vaccine delivery:

- » Check the vaccines received against the packing slip.
- » Ensure you have transferred all delivered vaccines to your pharmaceutical refrigerator promptly.

**Remember:** Cold chain breaches<sup>#</sup> need to be discussed with your Immunisation/Cold Chain Co-ordinator before any vaccines are returned to ProPharma or used.

<sup>#</sup> Note: When one-off temperature variations of up to +12°C for less than 30 minutes occur for known reasons, e.g. when putting vaccines away, a provider does not need to notify their Coordinator. However, the temperature variation and reason for it must be documented in the cold chain records.

### Influenza vaccine orders

- » Please base Fluarix® Tetra stock on your known population of children aged under 3 years, i.e. aged 6–35 months, who are eligible for funded influenza vaccination. Please ensure you reserve the Fluarix® Tetra vaccine for paediatric patients only.
- » Please consider your refrigerator capacity and the addition of Zostavax® to the National Immunisation Schedule on 1 April 2018.

The total influenza vaccine order, i.e. any combination of funded influenza vaccine brands, must meet minimum quantities as follows:

MARCH	Minimum 60 doses	JUNE	Minimum 30 doses
APRIL	Minimum 60 doses	JULY	Minimum 20 doses
MAY	Minimum 60 doses	AUGUST	Minimum 10 doses

### Temporary storage or transportation of influenza vaccines

Influenza vaccines **must** be stored between +2°C and +8°C at all times. They must not be frozen.

Temperature-monitored chilly bins **must** be used if vaccines are temporarily stored outside the vaccine refrigerator or being transported. Refer to the *National Standards for Vaccine Storage and Transportation for Immunisation Providers 2017* (available at [www.health.govt.nz/coldchain](http://www.health.govt.nz/coldchain)).

If vaccines have been stored outside the required temperature range, quarantine the vaccines and contact your Immunisation/Cold Chain Coordinator.

### Protecting your pharmaceutical refrigerator

We have been asked to clarify the use of surge protectors and residual current devices (RCDs) with pharmaceutical refrigerators by Rollex Medical following publication of the December 2017 ImmNuZ.

Every fridge plugged directly into a wall socket must be plugged in to an appliance rated surge protector. A residual current device (RCD) does not protect the appliance from power surges. Plug in RCD's are not allowed to be used on a vaccine refrigerator under the *National Standards for Vaccine Storage and Transportation for Immunisation Providers 2017*.

Contact the editorial team:  
Fax: 09 373 7030  
Email: [immnuz@imac.org.nz](mailto:immnuz@imac.org.nz)