



VACCSline NEWSLETTER

SPRING 2012 - ISSUE 23



Welcome to the Spring edition of the VACCSline newsletter

Non UK and incomplete vaccine schedules

The most common enquiries to VACCSline remain how to deal with Non UK and incomplete vaccine schedules. All new migrants to the UK should be asked about their vaccine history and immunised accordingly. Within this newsletter we aim to inform you of resources available to you to establish an individual's vaccine history and plan a catch up schedule for them.

Establishing vaccine history

Patient/parent held records may be in a different language or use vaccine names that are not used in the UK. Electronic resources available to assist in translating vaccines records and establishing non UK vaccine schedules include:

Translation aids:

Typing an unknown vaccine term into a internet search engine can provide a good starting point.

A US immunisation website for health professionals provides lists of vaccine preventable disease terms in multiple European languages accessed at: <http://www.immunize.org/izpractices/p5121.pdf>

The HPA Migrant Health Guide online allows patient information leaflets produced from the Department of Health to be translated into many different languages, accessed at:

<http://www.hpa.org.uk/web/HPAweb&Page&MigrantHealthAutoList/Page/1281954637835>

International schedules:

WHO website. The current vaccine schedule for most countries can be accessed at: <http://www.who.int/vaccines/globalsummary/immunization/countryprofileselect.cfm>

European Centre for Disease Prevention and Control. This provides the current vaccine schedule for countries which are part of Europe:

<http://ecdc.europa.eu/en/activities/surveillance/euvac/schedules/pages/schedules.aspx>

It is the current vaccine schedule that is listed on these websites. They do not flag up when changes to the countries schedules have occurred and should only be used as a guide to what an individual should have received; generally they fit well with vaccines received in recent years but less well with older vaccination histories.

Planning the individual's vaccine schedule

Once the vaccine history has been established, a course of vaccination can be planned. If there is no clear or reliable history of a vaccine being given then the individual should be assumed to be unimmunised. For healthy individuals there is no harm in revaccinating but there are potentially life threatening consequences of omitting a vaccine. Other key points to consider when planning an individual's catch up schedule are listed within the HPA Migrant Health Guide. For example if a course of immunisations has been started but not completed continue from where it was interrupted, there is no need to repeat doses or to restart the course.

To bring an individual up to date with the UK schedule, refer to the specific vaccine chapters of the Green Book and the algorithm produced by the Health Protection Agency, *Vaccination of Individuals with Uncertain or Incomplete Immunisation Status*, which provides age related flow charts.

The Green Book: <http://immunisation.dh.gov.uk/>

HPA algorithm: http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1194947406156

Once planned, the schedule must be clearly documented and all immunisation records sent for recording on the child health system. Establishing histories and planning schedules are time consuming activities and resources must be allocated to complete these. For migrants to the UK, their immunisation status should ideally be established at the point of registration with a GP surgery allowing a pro-active delivery of vaccines.



UNIVERSITY OF
OXFORD

Vaccine Advice for Clinicians Service

Call: 0845 279 9878 or email vaccsline@ovg.ox.ac.uk (new email)

Webpage: <http://www.ovg.ox.ac.uk/Vaccsline.htm>

Frequently asked questions

Incomplete immunisations: Question. A 13 month old has received DTaP/IPV/Hib and PCV at 2 months of age and DTaP/IPV/Hib and MenC at 3 months of age. What vaccines are they due now?

Answer. The outstanding vaccines that are due are: DTaP/IPV/Hib, MenC, MMR and PCV. The infant requires one dose of each of these. Over the age one year it is currently recommended that individuals receive one dose of MenC, PCV and Hib; this is regardless of the number of doses that an individual has received below the age of one year. Ideally these vaccines would be given together to ensure prompt protection.

Antenatal Rubella status: Question. Antenatal screening has identified that a pregnant lady is not immune to rubella. How many doses of MMR should she receive after her baby has been born?

Answer. Two doses of MMR should be given to any individual that is not protected against measles, mumps or rubella. The JCVI confirmed this is the same for women identified as rubella susceptible through antenatal screening. Minutes of the meeting (17th June 2009) where this was discussed can be accessed at: http://www.dh.gov.uk/ab/JCVI/DH_113328

Oxford Vaccine Group Update: Vaccine to add protection against Hepatitis B

Inclusion of the Hepatitis B vaccine in the UK immunisation schedule is being considered as part of a multivalent vaccine (6COM). In April, recruitment will commence to an infant study to assess the immune response to two Men C vaccines currently used in the UK when given with 6 COM. This study will provide important information regarding immune responses to routine vaccinations when 6 COM is administered, and hence will inform future decisions for its inclusion in the immunisation programme. Further information will be available on the OVG Website www.ovg.ox.ac.uk

Immunisation Competency Assessment Tool

A competency assessment tool for use by all staff involved in giving vaccines, assessing vaccination needs or advising patients and parents on immunisation is available from the VACCsline web page: <http://www.ovg.ox.ac.uk/vaccsline>

This tool can be used by those new to immunising and by experienced practitioners to self assess their competence and facilitate update training and reassessment of practice.

Upcoming Introduction to Immunisation Training

Berkshire (E & W)	Introduction to Immunisation Study Day Wednesday 25th April Tuesday 16th October	<i>Contacts:</i> East Iris Mitchell 01753 635117 iris.mitchell@berkshire.nhs.uk West Sarah Manning 0118 949 5179 BWLDcourses@berkshire.nhs.uk
Buckinghamshire	Introduction to Immunisation Study Day To be confirmed	<i>Contact:</i> 01494 734681 training.department@buckshealthcare.nhs.uk
Milton Keynes	Introduction to Immunisation Study Day Thursday 1st November	<i>Contact:</i> Fiona Anaman 01908 254203 Fiona.anaman@miltonkeynes.nhs.uk
Oxford	Introduction to Immunisation Study Day Wednesday 19th September	<i>Contact:</i> Kaye Hewer 01865 421466 kaye.hewer@oxfordhealth.nhs.uk

To receive future VACCsline newsletters by direct email, send your request to Richard.Galuszka@hpa.org.uk

VACCsline provides advice on childhood and adult immunisations to health professionals in Buckinghamshire, Milton Keynes, Oxfordshire and West Berkshire. In East Berkshire immunisation enquiries should continue to be directed to the PCT Immunisation Coordinator, Dr. Marilyn Lansley; either on her office number 01344 458109 or mobile 0771 247 1375. Her office number may be given to patients. For advice about adult travel immunisations, practitioners are directed to www.nathnac.org.

VACCsline hours

Monday	10.30am to 4pm
Tuesday	9am to 4pm
Wednesday	9am to 4pm
Thursday	9am to 4pm
Friday	9am to 1pm

Vaccine Advice for Clinicians Service

Part of Oxford Vaccine Group, CCVTM, Churchill Hospital, Old Road, Headington, Oxford OX3 7LE, and Thames Valley Health Protection Unit, Centre for Radiation, Chemical & Environmental Hazards, HPA, Chilton, OX11 0RQ.