



# VACCSline NEWSLETTER

## SUMMER 2010 - ISSUE 16



Welcome to the summer edition of the VACCSline newsletter

### Influenza Immunisation Programme

An amended CMO letter dated 23 June 2010 clarifies information given on 28 May 2010. All staff involved in the delivery and organisation of the programme should refer to the letter available at: [http://www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/documents/digitalasset/dh\\_116943.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_116943.pdf)

#### Key points to note:

- ◆ National policy for the seasonal influenza programme remains the same except for the inclusion of **ALL** pregnant women (unless previously vaccinated with the monovalent H1N1 vaccine).
- ◆ Some groups are advised to have both the monovalent H1N1 swine influenza vaccine and the trivalent seasonal influenza vaccine, page 6 of the CMO letter has a chart for reference.
- ◆ Uptake of seasonal vaccine for those in clinical risk groups aged under 65 years rose to 51.6% in 2009/10. It is hoped that this figure will continue to rise as these groups are targeted to be protected. The Department of Health expect coverage for this group to reach 60% by 2011/12.

### A frequently asked question

#### Vaccine administration

**Question:** Whilst administering a vaccine, a child moved, and about half of the vaccine was injected. What should I do?

**Answer:** Regardless of how much of the vaccine has been successfully administered, the dose of vaccine should be repeated immediately. For live vaccines, this must be within 24 hours or 4 weeks later.

**Rationale:** It is not possible to estimate the amount of vaccine that has either been administered or wasted, so re-vaccinating ensures the correct dose has been administered. There is a minimal increased risk of side effects. For live vaccines the release of interferon after administration of the first dose may inhibit the response of any subsequent doses given after 24 hours and within 4 weeks of the first dose.

### Measles and healthcare workers

Measles cases continue to occur in the community. Healthcare workers are at risk of being exposed to measles and passing on infection to vulnerable patients. Healthcare workers should be immunised with two doses of MMR vaccines unless they have evidence of a positive antibody test to both measles and rubella.

### Mumps in the student population

Outbreaks of mumps continue to occur in students and young adults in institutions across the Thames Valley. These are largely occurring in those who have not received two MMR vaccines. Practices should remain vigilant in checking the vaccine status of new registrants or current patients, particularly those entering higher education. For those with an incomplete MMR history one or two doses should be given as appropriate. The timeline below details the introduction of MMR vaccine, including Measles/Rubella vaccine used in 1994 which some students confuse with MMR vaccine.

MMR vaccine timeline	
October 1988	MMR introduced as a routine vaccine at 13 months of age.
November 1994	Measles and Rubella vaccine catch up for 5-16 year olds
October 1996	MMR 2nd dose introduced at preschool age. Catch up undertaken for children born from 01.01.1990 who had previously received their pre school booster.



**Vaccine Advice for Clinicians Service**  
Call on 0845 279 9878 or email [vaccs.line@paediatrics.ox.ac.uk](mailto:vaccs.line@paediatrics.ox.ac.uk)  
Webpage: <http://www.paediatrics.ox.ac.uk/ovg/Vaccsline.htm>

VACCsline is a service for healthcare professionals. We have recently received a number of calls from parents, some of whom have been referred to us by a healthcare professional. We do not routinely take parents' enquiries, the rationale being that it de-skills frontline staff in dealing with immunisation issues. We aim to provide a comprehensive advice service for healthcare professionals and while occasionally offering to call parents we firmly believe this should be the exception.

### Returns to Child Health Information Systems

Many vaccinators are now administering Hib/MenC, PCV and MMR vaccines at one visit. Some child health information systems have identified the need for prompt returns of this data to avoid scheduling unnecessary MMR/PCV vaccines. PCTs across the Thames Valley have different ways of calling patients for these vaccines but are working towards a uniform approach.

### Department of Health immunisation information

Immunisation information for health professionals is now accessed at the following link:

<http://www.dh.gov.uk/en/PublicHealth/Immunisation/index.htm>

Information for patients and parents has migrated to NHS choices:

<http://www.nhs.uk/planners/vaccinations/pages/landing.aspx>

### Oxford Vaccine Group Update - Study planned to start shortly

#### Can we reduce the number of vaccine injections for children?

This study will compare the current schedule of MenC vaccines given at 3 and 4 months of age, with a reduced priming schedule of only one dose to be given at 3 months of age, or a control group that will not receive any priming MenC doses.

All children in the study will receive a Hib/MenC vaccine at 12 months of age and all other routine immunisations. A reduced dose priming schedule may give better long term protection. Additionally, this study will compare the effect of giving all doses of the same vaccine in a consistent limb.

### Upcoming Immunisation Training

Oxford	<b>Adult immunisation update</b> 15th September, Littlemore 17th September, Bodicote <b>Introduction to Immunisation Study Day</b> 12th October, Unipart Centre Oxford	<i>Contact:</i> Kay Hewer 01865 421466 or <a href="mailto:kaye.hewer@oxfordshirepct.nhs.uk">kaye.hewer@oxfordshirepct.nhs.uk</a>
Buckinghamshire	<b>Flu update</b> 13th September 9 –12.30, High Wycombe <b>New Skills</b> , High Wycombe, 21 October 9 –5pm	<i>Contact:</i> Education, learning & development 01296 310117
Milton Keynes	<b>Introduction to Immunisation Study Day</b> 10th October 2011	<i>Contact:</i> Fiona Anaman <a href="mailto:Fiona.anaman@miltonkeynes.nhs.uk">Fiona.anaman@miltonkeynes.nhs.uk</a> phone 01908 278777
Berkshire (E & W)	<b>Introduction to Immunisation Study Day</b> January 2011 details to follow	<i>Contacts:</i> <b>East</b> Iris Mitchell <a href="mailto:iris.mitchell@berkshire.nhs.uk">iris.mitchell@berkshire.nhs.uk</a> 01753 635117  <b>West</b> Sarah Manning 0118 949 5179 <a href="mailto:BWLDcourses@berkshire.nhs.uk">BWLDcourses@berkshire.nhs.uk</a>

To receive future VACCsline newsletters by direct email, please email your request to [elly.kilsby@hpa.org.uk](mailto:elly.kilsby@hpa.org.uk)

**VACCsline** provides advice on childhood & 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 Co-ordinator, 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](http://www.nathnac.org)

#### VACCsline hours

Monday	10.30am to 4.15pm
Tuesday	9am to 4 pm
Wednesday	9am to 4.15pm
Thursday	9am to 4 pm
Friday	9.30 am to 1.30 pm

### Vaccine Advice for Clinicians Service

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