



H1N1 (Swine Flu) Protection Phase Influenza Pandemic

- Commonwealth Government has contracted CSL to supply 20 million doses of H1N1 vaccine for 10 million Australians. Vaccine not yet available
- No recommendations yet as to who should receive the first vaccine doses **Watch this space!**
- Antiviral access is available via general practice for a specific criteria (see below)
- Tamiflu does **not** need to be refrigerated
- Public Health authorisation is **not** required; keep to criteria
- **Need information on the Protection Phase?** Visit: <http://www.emergency.health.nsw.gov.au/swineflu>

Key elements of Protection Phase

- Those with respiratory symptoms should stay at home until symptoms resolve
- If need medical assistance or advice individuals should contact their GP by phone
- **Criteria for Antivirals** - those individuals with moderate or severe disease and those who suffer from other underlying conditions that make them more vulnerable to more serious illness. eg: **pregnant women**, those with chronic respiratory or renal disease, heart disease, diabetes, immunosuppression, morbidly obese
- Testing will focus on individuals with moderate to severe disease, those individuals most vulnerable to severe disease complications and outbreak settings determined by Public Health authorities
- Control of outbreaks will focus on institutional settings such as schools and aged care facilities

Not yet received general 'flu vaccine? Still worth having!

Influenza viruses contained in this year's influenza vaccine are circulating in our community. Clients should be strongly advised to be vaccinated. Annual influenza vaccine is recommended specifically for:

- Aboriginals aged >15 years
- Individuals aged >6 months with chronic conditions or impaired immunity (aged <10 years need 2 doses in the 1st year of receiving influenza vaccine)
- Those in contact with or visiting aged care facilities, hospitals, childcare facilities
- **Pregnant mums**; partners/parents/children of pregnant mums or those planning a pregnancy
- Healthcare workers, childcare staff, teachers, anyone caring for child aged <12 months
- Individuals providing essential services or involved in the poultry industry
- **ANYONE** who wants to beat the 'flu! You could be in bed for a week or more!

Pertussis (Whooping cough) outbreak still raging (HNE: 860 cases YTD; 2008: 116)

An increase in pertussis activity continues throughout HNE and NSW. The protection of infants remains the key public health objective. Children and babies have been hospitalised with some babies requiring intensive care admission. One infant death this year (north coast) - further deaths are preventable!

1. Babies who are too young to be fully vaccinated are most at risk (not received x3 doses DTPa vacc); give first dose at age 6 weeks & 8/52 between next two doses DTPa-hexa (INFANRIX[®] hexa) **free**
2. 4yos should be vaccinated immediately they turn 4 years - DTPa-IPV + MMR **free**
3. Adolescents not yet had 15yo booster dTpa vaccine – free via GP or school program (Y10) **free**
4. Free dTpa vaccine available to public hospitals (maternity units) via hospital pharmacy
5. For a limited time, **FREE dTpa vaccine** (adult pertussis-containing vaccine) from GP for:
 - **Parents planning a pregnancy**
 - **All new parents and grandparents**
 - **Adolescents or adults who are household contacts of an infant or has regular contact with an infant**

- Protection post-disease or post-vaccination only lasts 5-8 years, so even those with a history of past pertussis infection need to be vaccinated if not vaccinated since 2004
- Keep young babies away from coughing people!
- Everyone in a household where there is a baby should be up-to-date with their pertussis vaccination
- New mums should be vaccinated prior to hospital discharge if not vaccinated in the past 5 years
- Fathers and grandparents should be vaccinated at the earliest opportunity; it is best for individuals to be vaccinated at least 2 weeks before a new baby arrives, but if not, anytime is better than never

- **Hospital Emergency Departments should store dTpa in lieu of dT in their vaccine fridge.** Both vaccines have identical components of diphtheria and tetanus; dTpa vaccine should be given for the treatment of a tetanus prone injury

Public Hospital pharmacies can order adult pertussis vaccine, dTpa, directly from NSW State Vaccine Centre using their vaccine account numbers used to obtain free childhood vaccines. If a pharmacy has not previously ordered from State Vaccine Centre please contact them on phone **1300 656 132**

It is prudent to avoid vaccination during pregnancy (**exception flu vaccine**), however, dTpa vaccine is inactivated and generally causes minimal fever, therefore where the risk is high (suspected or confirmed pertussis in a family member or close friend) the risk/benefit ratio should dictate vaccination.

ACIR (Australian Childhood Immunisation Register) Coverage Rates

For children aged 12-15 months residing in HNE area - Current childhood coverage rates as at 31 March 2009 (for 4 previous quarters) is:

Non-Aboriginal children:	93.5% (range throughout HNE: 95.1% - 90.1%)
Aboriginal children:	85.9% (range throughout HNE: 91.3% - 80.5%)
NSW average Non-Aboriginal children:	91.9% (range throughout NSW: 86.4% - 93.9%)
NSW average Aboriginal children:	85.4% (range throughout NSW: 91.6% - 83.6%)

Aboriginal Vaccination Strategy

As you are aware, HNE has implemented an Aboriginal Vaccination Strategy to improve the timeliness of vaccination in Aboriginal children residing in HNE. An Aboriginal Data & Liaison Officer position has been advertised and the successful candidate will commence duties as soon as possible. I would like to thank Aboriginal Health Coordinators for their collaboration and advice. I would also like to thank maternity unit managers, for their cooperation in identifying Aboriginal infants born throughout HNE and in providing monthly data to Population Health, this being the cornerstone of this strategy. I am especially grateful to Sue Owens, CMS, who has supported maternity managers by sharing her expertise in providing secured spreadsheets for this purpose.

HPV (human papillomavirus) vaccine

Any female client aged 12-26 years who has not yet commenced the HPV course is to be offered a GP script. It is no longer free for this group. Remember that boys can also benefit from this vaccine.

GP Access to free HPV vaccine from State Vaccine Centre will continue until 01 January 2010 for doses 2 and 3 for those who commenced prior to 30 June 2009.

Year 7 female students will continue to be offered HPV vaccination via the school program. Those wishing to have vaccination via their GP will require a script. Further clarification of 2010 school year program should be available prior to the 2010 school year.

Chris Carr thanks you & bids you farewell!

On Thursday 23rd July 2009 I will be retiring from Hunter New England (HNE) Health after more than three decades. It has been an honour and a privilege to collaborate with, advise and support HNE clinicians – nurse immunisers, GPs and surgery staff, Divisions of GP, paediatricians, obstetricians and obstetric staff, pharmacists and other health professionals - in their crucial role of protecting HNE residents against vaccine-preventable diseases, through best practice and client education.

I extend my sincere appreciation and admiration to frontline clinicians who have dedicated themselves to keeping pace with the continual changes to immunisation recommendations and who are committed to providing immunisation services. You, together with committed clinical managers, have affected sustainably high vaccination coverage rates in HNE which in turn protects our community. Through your dedication HNE has achieved, over many years, the highest childhood vaccination rates in the country!

HNE Population Health immunisation team, under the leadership of Dr David Durrheim, will provide exceptional leadership and assistance to you – Patrick Cashman (acting Area Immunisation Coordinator), Christine Staples (schools & general) and Peter Massey (Tamworth office). A new Immunisation Coordinator will be appointed in due course. Phone contact for advice Ph: (02) 4924 6477 or 6767 8630 and you will be directed to the immunisation officer available that day.