

To the Point

HNELHD Immunisation Newsletter

May 2022

Special Winter Edition

ATTACHMENTS:

- ATAGI 2022 seasonal Influenza statement
- NIP Pneumococcal vaccination schedule
- NCIRS Zoster Vaccines for Australian Adults
- NCIRS Zoster Vaccines FAQ
- ATAGI expanded guidance on temporary medical exemption
- Annual Immunisation Update Flyer
- Japanese Encephalitis—information for GP's
- JE Education Man versus Mozzie

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COVID-19 Vaccination Resources

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- **Decision aid (5-15yo) Should I get the COVID-19 vaccine for my child**

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World Immunisation Week 2022

Contact your PHU for Immunisation enquiries

Phone: 1300 066 055

Fax: 4924 6490

Email: HNELHD-PHImmunisation@health.nsw.gov.au

Winter Vaccination Visit

As patients book in for influenza vaccination it is a great opportunity to consider if other vaccinations are recommended at the same time. Below are some resources to use when assessing for opportunistic vaccination during a winter vaccination visit. As well as influenza, is your patient due a winter COVID-19 vaccine, Pneumococcal vaccine or Zoster vaccine?



ATAGI advice on seasonal influenza vaccines in 2022

The Australian Technical Advisory Group on Immunisation (ATAGI) has developed advice for immunisation providers regarding the administration of 2022 seasonal influenza vaccines.

It includes information about:

- ▶ the influenza vaccines available for use in Australia in 2022, by age
- ▶ influenza virus strains included in the 2022 seasonal influenza vaccines
- ▶ timing of vaccination, including for travel and co-administration with COVID-19 vaccines
- ▶ vaccination for pregnant women
- ▶ eligibility for influenza vaccines funded under the National Immunisation Program (NIP)
- ▶ medical conditions that are associated with an increased risk of influenza complications

Additional influenza vaccination resources:

- ▶ **UPDATED:** [Influenza vaccination 2022](#) - Updated NCIRS resources for the 2022 influenza season are now available
- ▶ **UPDATED:** [Getting vaccinated against influenza](#) – Australian Government Department of Health resource collection. The Australian Technical Advisory Group on Immunisation (ATAGI) has developed advice for immunisation providers regarding the administration of 2022 seasonal influenza vaccines.

[2022 influenza vaccination resources are now available](#)

A range of clinical and program support materials to support health professionals and vaccination providers relating to the 2022 influenza vaccination



ATAGI statement on recommendations on a winter booster dose of COVID-19 vaccine

Recommendation for an **additional booster dose** of COVID-19 vaccine to increase protection prior to winter for selected population groups.

- ▶ Adults aged 65 years and older
- ▶ Residents of aged care or disability care facilities
- ▶ People aged 16 years and older with severe immunocompromise (as defined in the ATAGI statement on the use of a 3rd primary dose of COVID-19 vaccine in individuals who are severely immunocompromised)
- ▶ Aboriginal and Torres Strait Islander people aged 50 years and older.

[ATAGI statement on recommendations on a winter booster dose of COVID-19 vaccine | Australian Government Department of Health](#)



PneumoSmart

Pneumococcal Vaccination

- ▶ Non-Indigenous Older Adults >70 funded for single dose 13vPCV
- ▶ Aboriginal and Torres Strait Islander People age >50 funded for single dose 13vPCV & follow up with 23vPPV x2 (see attached for intervals)
- ▶ People with medical risk conditions funded for single dose 13vPCV at diagnosis & follow up with 23vPPV x2 (See attached for intervals)

Not sure if or when your patient needs a pneumococcal vaccine? Please see the decision tree attached & the very useful & regularly updated immunisation coalition PneumoSmart tool

[PneumoSmart Vaccination Tool \(immunisationcoalition.org.au\)](https://immunisationcoalition.org.au)



Zoster Vaccination

- ▶ Zostavax is NIP funded at age 70 years (catch up for 71—79 years until 2023)
- ▶ Shingrix is a new adjuvanted non-live zoster vaccine that requires **2 doses**. Can be given to immunocompetent people aged ≥50 years and immunocompromised people aged ≥18 years vaccination to prevent herpes zoster and its complications. Shingrix is **not funded** so available only on a private script .
- ▶ NCIRS provides a fantastic FAQ and Fact Sheet

PLEASE ENSURE PRE-SCREENING COMPLETED PRIOR TO ADMINISTRATION

[Zoster | NCIRS](#)

COVID-19 vaccination resources

[ATAGI clinical guidance on COVID-19 vaccine administration errors | Australian Government Department of Health](#)

Recommendations for immunisation providers managing COVID-19 vaccine **administration errors** which includes advice on replacement doses (if required).

[ATAGI update following weekly COVID-19 meeting – 27 April 2022 | Australian Government Department of Health](#)

Recommendation that the interval between primary doses is increased to 8 weeks for individuals who are not at increased risk of severe outcomes from SARS-CoV-2 infection.

- ▶ The extended dose interval has been shown to improve the immune response to vaccination and may improve effectiveness
- ▶ A longer dose interval may reduce the risk of myocarditis and pericarditis
- ▶ Covid vaccine & Influenza vaccine can be given on same day or at any interval from each other.

Recommendation that all people should wait for 3 months after confirmed SARS-CoV-2 infection before they receive their next COVID-19 vaccine dose. The next scheduled dose should then be given as soon as possible after this period.

- ▶ Intended to optimise protection for the person, a longer gap between infection and vaccination is likely to lead to a better immune response and result in longer protection.
- ▶ Flu vaccines should continue to be administered as usual. After recovery from SARS-CoV-2 infection a person may receive an Influenza vaccine at any interval.

[COVID-19 vaccination – Guidance on Myocarditis and Pericarditis after mRNA COVID-19 vaccines | Australian Government Department of Health](#)

Updated ATAGI guidance on **myocarditis and pericarditis** after mRNA COVID-19 vaccines.

- ▶ Recommendations for 2nd and subsequent doses for people who experienced symptoms suggestive of myocarditis or pericarditis.

[ATAGI Expanded Guidance on temporary medical exemptions for COVID-19 vaccines | Australian Government Department of Health](#)

Updated ATAGI guidance for whom an exemption to COVID-19 vaccination can be provided

- ▶ A temporary exemption can be issued for up to 4 months following confirmed SARS-CoV-2 infection. [im011-2204en-f\(1\).pdf](#)
- ▶ A rapid antigen test are now considered acceptable proof of infection when registered with service NSW

[Decision aid \(5–15 years\): Should I get the COVID-19 vaccine for my child? | NCIRS](#)

- ▶ This decision aid is to help parents decide whether COVID-19 vaccination is right for their child

Education

If you missed the update in March and would prefer to tune in live...

Upcoming—Livestream Annual Immunisation & COVID-19 Vaccination Update Wednesday 8th June 1-3.30pm

Influenza season is almost here, COVID-19 is ongoing, new health care students are starting university and we need to keep our childhood immunisation rates high to protect our communities! Welcome to all new nurse immunisers and those who have been protecting their communities for years. Join us for a comprehensive 2022 Immunisation Update session from the HNELHD Public Health Unit Team, livestreamed direct to you.

See attached flyer to register. Or search

[Immunisation & COVID 19 - Update: Repeated Session Tickets, Wed 08/06/2022 at 1:00 pm | Eventbrite](#)

Feedback from previous session - There were 1203 registrants with 1077 attending live on the night. We had up to 612 respondents to the survey.

Survey result highlights

- ▶ Please rate how relevant you found this session to your role - Average rating was 4.8 out of 5
- ▶ Please rate how effectively the presenters delivered the education session - Average 4.8 out of 5
- ▶ What were your catering arrangements during the session? 3.8 out of 5 had dinner during the Update with 2.8 out of 5 home cooking, 1 out of 5 take away and 1 from the 612 respondents partner cooked for them .

Some positive feedback received

- ▶ "Very engaging & informative. Thankyou",
- ▶ "Very good immunisation update! Thanks to everyone who made this happen"
- ▶ "Better than the footy on the other channel"
- ▶ "Learnt a lot and finished my cross stitch"

JAPANESE ENCEPHALITIS

Key points for GPs:

1. Japanese encephalitis, a mosquito-borne viral illness, has been detected in NSW.
2. Vaccination is recommended for "priority vaccination groups"*. Limited doses of vaccine can be ordered through the State Vaccine Centre for patients in these targeted groups.
3. Consider the diagnosis of Japanese Encephalitis in patients presenting with fever, headache and signs of encephalitis.
4. Encourage all your patients to protect themselves from mosquito bites.

Recommended priority vaccination groups include: (see attached alert for more detailed information)

- People who work at, reside at, or have a planned non-deferrable visit to piggery, pork abattoir or pork rendering plant
- Personnel who work directly with mosquitoes through their surveillance
- All diagnostic and research laboratory workers who may be exposed to the virus

At this time, it is not recommended that the NSW GP's consider JE vaccination for other groups. **Mosquito bite avoidance should be encouraged.**

Patient investigation Symptoms of JE include fever and headache, variably accompanied by neck stiffness, disorientation, tremors, coma, convulsions & paralysis. If patients present with symptoms of encephalitis, include JE in your differential diagnosis if they live or have visited rural areas, especially if they were near pig farms or report being bitten by mosquitos. Refer patients with suspected JE to hospital for management and further investigation

How to order vaccines—only order vaccines via the NSW vaccine centre for patients who meet one of the above priority groups. Practices that require more than 10 doses of JEspect (for immunocompromised people, breastfeeding women or very young children) need to arrange a special order (supply dependent) by contacting the local public health unit on 1300 066 055.

7th June 2022 see attached [Man versus Mozzie](#) education webinar



[History of Vaccines → Read more](#)

World Immunisation Week 2022

Long Life for all

The work we do as immunisers was celebrated last month by the World Health Organisation. This year's theme was 'Long life for all ' expressing that the ultimate goal of immunisation is for more people and their communities to be protected from vaccine preventable diseases.

Vaccines have been indiscriminately saving lives since 1796. Click on the link below to access a range of inspiring resources detailing the difference that vaccines have made through recent history.

[World Immunization Week 2022 \(who.int\)](https://www.who.int/campaigns/world-immunisation-week-2022)

Amazing Nurses, Doctors and Pharmacists all picked up the tools in 2021 to provide COVID-19 vaccines to the community. What a fanatic achievement! However, the job isn't done. Routine immunisation is essential and now is the time to get routine immunisation back on track.

You can help get routine immunisation rates back on track by reaching out to families letting them know that your facility is safe to visit and coming in for the recommended routine immunisation is a long and healthy future for all.

One tool that can be used to identify patients who have missed out on recommended vaccines is by running a Due/Overdue report in AIR.

[How to view identified reports using the AIR site through HPOS - Australian Immunisation Register for health professionals - Services Australia](#)

