## Australian Technical Advisory Group on Immunisation (ATAGI)

## 45th Meeting

## 9<sup>th</sup> and 10<sup>th</sup> June 2011

## **ATAGI BULLETIN**

- The Australian Technical Advisory Group on Immunisation (ATAGI) 45<sup>th</sup> face-to-face meeting was held on 9 and 10 June 2011 in Canberra.
- ATAGI welcomed delegates from the Supporting Independent Immunisation and Vaccine Advisory Committee (SIVAC) who observed the meeting to gain an understanding of the model that Australia uses to develop its immunisation policies and programs. The delegates came from Korea, Vietnam, and Indonesia.
- ATAGI also welcomed the following 2011-12 budget announcements:
  - the replacement of 7vPCV (Prevenar®) with 13vPCV (Prevenar 13®) from 1 July 2011 and the provision of \$40.7 million to enable children aged between 12 and 35 months who have completed their primary pneumococcal vaccination course with 7vPCV to receive a free supplementary dose 13vPCV. The supplementary dose will be available for a period of 12 months from 1 October 2011 until 30 Sept 2012).
    Further information about the introduction of 13vPCV is available on the Immunise Australia
    - website at: <a href="http://immunise.health.gov.au/">http://immunise.health.gov.au/</a> the provision of \$15.0 million over four years (2012-13 to 2013-14) to maintain the
  - the provision of \$15.0 million over four years (2012-13 to 2013-14) to maintain the Human Papillomavirus (HPV) Program Register.
- ATAGI also noted that following an announcement by Government of funding for the inclusion of a vaccine on the NIP, its subsequent supply to immunisation providers was contingent on a number of steps which could take between 6 and 12 months. This included:
  - negotiations with the states and territories on issues relation to program implementation;
  - development of a communication strategy and materials;
  - changes to legislation (the *National Health (Immunisation Program Designated Vaccines)*Determination, under the National Health Act 1953);
  - vaccine procurement and supply/distribution; and
  - changes to the Australian Childhood Immunisation Register to ensure that data about vaccines administered are recorded.

As this information was also of interest to vaccine suppliers it was agreed that the arrangements for the implementation of vaccines on the NIP should be included in ATAGI's pre-submission advice and the Immunise Australia website.

■ ATAGI noted that *The Horvath Review* – a review of the management of adverse events associated with Panvax and Fluvax was released on 25 May 2011. The review conducted by the former Chief Medical Officer, Professor John Horvath AO, was undertaken to investigate the national response to the reported adverse events following immunisation which resulted in suspension of the seasonal influenza vaccine program for children throughout Australia. Members noted that the Review found that the Australian system has a number of strengths. It is similar to passive adverse event surveillance systems in comparable countries and was able to detect the safety signal associated with the use of the 2010 seasonal influenza vaccine, take appropriate action and undertake a rigorous investigation. The Review has found that the reporting of adverse events following immunisation could be more timely. A copy of the review can be downloaded from the Immunise Australia website.

- ATAGI re-affirmed that it would like to recommend that children aged less than 5 years receive seasonal influenza vaccine under the NIP. However, members were cognizant of issues relating to achieving high immunisation coverage rates in this age group, particularly in light of the increased occurrence of febrile convulsions related to the use of the CSL trivalent (seasonal) influenza vaccine, Fluvax<sup>®</sup> which led to the suspension of use of all seasonal influenza vaccines in young children.
- ATAGI requested that the National Immunisation Committee consider issues relating to implementation of an annual influenza immunisation program for children aged ≥6 months to 59 months, and for Aboriginal and Torres Strait Islander children aged ≥6 months to 59 months who have a very high risk of complications from influenza.
- ATAGI also considered the reports of fever / febrile convulsions from the Vaccine Safety Data Link in the USA which were associated with the co-administration of trivalent influenza vaccination (TIV) and 13vPCV in children aged from 12-35 months. ATAGI's advice is that these vaccines may be given together and that providers discuss the risk with parents prior to administration of 13vPCV. If there are strong parental concerns, these vaccines may be administered separately using an interval of at least three days between vaccines.
- ATAGI is currently reviewing its recommendations in relation to revaccination with 23vPPV.
- ATAGI continued to develop the 10<sup>th</sup> Edition of the 'Australian Immunisation Handbook'.
- ATAGI will be holding the next Industry Day with pharmaceutical companies on Wednesday,
   12 October 2011 in Canberra.
- The next ATAGI meeting is scheduled for 13 & 14 October 2011 in Canberra.