

Australian Technical Advisory Group on Immunisation (ATAGI)

50th Meeting

21 – 22 February 2013

ATAGI BULLETIN

- The Australian Technical Advisory Group on Immunisation (ATAGI) 50th face-to-face meeting was held on 21 and 22 February 2013 in Canberra.
- ATAGI reviewed the data on vaccination coverage from the Australian Childhood Immunisation Register (ACIR) for 12 months to December 2012. The proportion of children ‘fully immunised’ remained high for each 12 month (91.69%), 24 month (92.59%) and 5 year (90.82%) cohort. Members noted that from 1 July 2013, three new antigens (pneumococcal, meningococcal C and varicella) would be added to the definition of ‘fully immunised’. Coverage reports for the 12-15 month cohort will reflect the addition of pneumococcal vaccine from December 2013 and all three antigens will be included in coverage reports for the 24-27 month cohort from December 2014.
- ATAGI looked forward to the release of immunisation rates by the National Health Performance Authority. This would be the first publically available report providing immunisation coverage data sourced from the Australian Childhood Immunisation Register (ACIR) at Medicare Local and Statistical Area 3 (SA3) geographical areas.
- ATAGI provided comments on the draft National Immunisation Strategy which includes actions within eight strategic priorities that relate to immunisation coverage, governance of the National Immunisation Program (NIP), vaccine supply, vaccine safety, community confidence, surveillance, the immunisation workforce and Australia’s contribution to the region.
- ATAGI noted that its newly established hepatitis B working party held its first teleconference on 14 February 2013. The working party reviewed its draft terms of reference ATAGI agreed that its first priority was to focus on recommendations relating to the recommendations for hepatitis B-containing vaccines in Aboriginal and Torres Strait Islander people. This would involve a review on the:
 - current data on the epidemiology and disease burden of hepatitis B in this population group; and
 - efficacy, immunogenicity and safety of hepatitis B vaccines.

The working party would then consider recommendations for people from culturally and linguistically diverse backgrounds and unvaccinated adults at higher risk of hepatitis B infection.

- ATAGI welcomed the expansion of the human papillomavirus (HPV) vaccination program to males which was launched on 15 February 2013, by the Minister for Health, the Hon Tanya Plibesek MP. ATAGI noted that implementation of the program is being supported by a range of communication materials for parents and schools.
- Members noted that following ATAGI’s endorsement of the HPV Implementation Working Group’s Report on monitoring of adverse events following immunisation associated with the National HPV Vaccination Program, weekly teleconferences involving the Therapeutic Goods Administration (TGA) and each state and territory jurisdiction were being held to review adverse events associated with administration of the HPV vaccine. Adverse events of particular interest included: anaphylaxis, loss of consciousness, allergic reactions or the need to call an ambulance for another reason. ATAGI noted that to date no unexpected adverse events had been reported.

- ATAGI finalised its advice regarding the risk and severity of influenza in Aboriginal and Torres Strait Islander children under the age of 5 years. Members agreed that although the data were limited, the magnitude of increased risk and severity of influenza in Aboriginal and Torres Strait Islander children compared with non-Indigenous children was similar to that in children with underlying medical conditions, using various measures of severity. ATAGI therefore recommended universal influenza vaccination for this population group.
- ATAGI's clinical advice for immunisation providers for the administration of the 2013 trivalent seasonal influenza vaccines was endorsed out of session. ATAGI noted that its advice would be published, along with the TGA's advice, in early March 2013 on the Immunise Australia website at www.immunise.health.gov.au
- ATAGI endorsed its meningococcal working party's interim report on the epidemiology of meningococcal disease in Australia.
- An update was provided on a case control study in NSW to assess the impact of the pertussis 'cocoon' strategy which provided pertussis-containing vaccine to parents and grandparents to protect as yet unvaccinated infants. Members also noted that similar studies in Queensland, Victoria and Western Australia were ongoing. The results of these studies will contribute to a pooled or comparative analysis when they become available.
- ATAGI noted that the pertussis working party will continue reviewing the evidence base for routine maternal immunisation, and the cocoon strategy. The working party will also consider issues relating to the reintroduction of an 18-month booster dose, an evaluation of the adolescent booster, and investigation of the need for further boosting into adulthood.
- ATAGI considered an updated analysis of the effectiveness and impact of 23-valent pneumococcal polysaccharide vaccine (23v PPV) on invasive pneumococcal disease (IPD) in elderly people. The data showed a significant (30 per cent) decrease in IPD since 23vPPV and 7vPCV were introduced, although the contribution of 23vPPV to this decrease is modest. In 2009, an estimated 56 per cent of people aged 65 and over had been vaccinated in the last 5 years.
- ATAGI noted the progress of the varicella and zoster working party and expanded its terms of reference to provide advice on the specific requirements of adverse events monitoring for implementation of MMRV vaccine in addition to routine surveillance mechanisms in the terms of reference.
- ATAGI noted progress towards completion of the 10th edition of the Australian Immunisation Handbook.
- The next meeting of ATAGI will be held on 13–14 June 2013 in Canberra.
- The ATAGI's annual industry day meeting will also be held in Canberra on 12 June 2013

Notes:

- ATAGI's membership and terms of reference are available on the Immunise Australia website at www.immunise.health.gov.au (see 'Immunisation Advisory Bodies').
- *Healthy communities: immunisation rates for children in 2011–12* is available on the National Health Performance Authority website at www.nhpa.gov.au
- The *Australian Immunisation Handbook*, 10th edition, has been distributed to immunisation providers, including general practitioners. Copies of the Handbook can be ordered from the Immunise Australia website at www.immunise.health.gov.au