

Australian Technical Advisory Group on Immunisation (ATAGI)

51st meeting

13–14 June 2013

ATAGI BULLETIN

- The Australian Technical Advisory Group on Immunisation (ATAGI) 51st face-to-face meeting was held on 13 and 14 June 2013 in Canberra.
- Professor Nolan, on behalf of members, welcomed Dr Ann Koehler as the new Communicable Diseases Network of Australia (CDNA) representative on ATAGI, and also welcomed the following visitors from Nepal:
 - Dr Nyambat Batmunkh (Supporting National Independent Immunization and Vaccine Advisory Committees, Nepal)
 - Dr Ramesh Kant Adhikari (Nepal National Committee on Immunization Practices)
 - Dr Tara Nath Pokhrel (Nepal National Committee on Immunization Practices)
 - Mr Giri Raj Subedi (Nepal National Committee on Immunization Practices).
- ATAGI was pleased to receive a presentation from Dr Adhikari about Nepal's immunisation program. Nepal currently immunises children against tuberculosis, diphtheria, tetanus, pertussis, hepatitis B, *Haemophilus influenzae* type b, polio and measles, with approximately 87 per cent coverage in 2011. Human papillomavirus vaccination is also offered to girls in 10 districts in a program delivered by the Nepal Australian Cervical Cancer Foundation and Nepal Network for Cancer Treatment and Research.
- ATAGI provided advice to the Minister for Health regarding the requirements for parents to provide a record of their child's vaccination history at the time the child starts school. ATAGI stated its support for strengthening requirements to provide certification of immunisation history at school entry. ATAGI also noted that immunisation is not compulsory and it respects for the rights of parents to choose whether or not to vaccinate their children.
- ATAGI noted the progress being made on revising the Australian Health Management Plan for Pandemic Influenza. Members discussed issues relating to candidate pandemic vaccines, and referred further questions to the influenza working party. The membership of the influenza working party will be expanded to include expertise on pandemic issues.
- ATAGI's advice regarding influenza vaccination in Indigenous children under the age of 5 years is under consideration by the department. The influenza working party continues to evaluate the evidence on the magnitude of risk for people with other at-risk conditions such as Down syndrome, obesity and alcoholism (which are not currently funded under the National Immunisation Program), as well as the epidemiology of influenza B in Australia. ATAGI also considered recent research on fever, febrile convulsions and other adverse events following influenza immunisation in children.
- Members noted the release in April of the National Health Performance Authority report, *Healthy communities: immunisation rates for children in 2011–12*. The report provides the first comprehensive data for immunisation coverage by Medicare Local area, Statistical Area Level 3 and postcode, and has generated positive publicity.
- The hepatitis B working party presented its work to date, including a literature review of hepatitis B in indigenous peoples around the world. This review found that the burden of hepatitis B is consistently higher in Indigenous populations than in non-indigenous

peoples. Data on notifications and hospitalisations among Aboriginal and Torres Strait Islander people also showed higher rate ratios in Indigenous populations, and immunisation coverage data indicate that coverage is lower in Aboriginal and Torres Strait Islander children and adults compared with other Australians. The working party continues to consider issues and formulate recommendations relating to hepatitis B immunisation for Aboriginal and Torres Strait Islander peoples.

- ATAGI noted the significant work done to date to progress and implement the recommendations of the Horvath Review, including the formation of the Advisory Committee on the Safety of Vaccines (ACSOV), and work on surveillance objectives, timely and consistent reporting of adverse events, and vaccine safety monitoring activities between the Commonwealth, states and territories.
- Members were updated on the pilot observational surveillance program for seasonal influenza vaccine safety in children aged < 10 years, which commenced with the 2013 influenza season. The data collected to date are timely, of good quality and confirm the good safety profile of the vaccines currently in use. The pilot will inform consideration of the feasibility of implementing similar programs for future influenza seasons.
- ATAGI noted the publication of the *Australian Immunisation Handbook*, 10th edition, which was launched by The Hon Tanya Plibersek MP, Minister for Health, on 28 March 2013. Members agreed that the Handbook should be subject to annual electronic updates in the future.
- ATAGI received an update on progress towards the elimination of measles in the Western Pacific Region. Between 2008 and 2012, the number of measles cases reported in the region decreased by 93 per cent, from almost 30 000 cases per month in 2008 to approximately 1000 cases per month throughout 2012. Members noted the process for verification of measles elimination, which includes national and regional verification committees that have been selected for their independence from national measles programs, their expertise and their commitment.
- ATAGI noted implementation of the two new programs, measles-mumps-rubella-varicella (MMRV) combination vaccine and haemophilus influenzae type b and meningococcal C (Hib-MenC) combination vaccine. ATAGI also noted that specific surveillance to monitor the safety of MMRV vaccine will be implemented as per recommendations from the varicella zoster working party and the Advisory Committee on the Safety of Vaccines (ACSOV).
- Members discussed the outcomes and issues arising for follow up from Industry Day, held on 11 June 2013.
- The 52nd ATAGI meeting will be held on 10–11 October 2013 in Canberra.

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