Australian Technical Advisory Group on Immunisation (ATAGI)

47th Meeting

23-24 February 2012

ATAGI BULLETIN

- The Australian Technical Advisory Group on Immunisation (ATAGI) 47th face-to-face meeting was held on 23 and 24 February 2012 in Canberra. Professor Nolan welcomed the Commonwealth's Chief Medical Officer, Professor Chris Baggoley, who participated in discussions regarding Australia's seasonal influenza vaccination program and ATAGI's advisory role in relation to informing Australia's preparedness and response to a possible future influenza pandemic.
- Members welcomed the agreement from the Minister for Health, the Hon Tanya Plibersek MP, to expand ATAGI's terms of reference; to appoint a new member that can provide additional expertise in vaccine and immunisation research; and to extend current ATAGI membership until 30 June 2012 to enable work on the Australian Immunisation Handbook to continue.
- ATAGI's revised terms of reference have been expanded to include the provision of advice (through the Department of Health and Ageing) to research funding bodies about the current status of immunisation research and where additional research is required. ATAGI's complete terms of reference are available on the Immunise Australia website at: www.immunise.health.gov.au (see 'Immunisation Advisory Bodies').
- Professor Nolan welcomed Associate Professor Jodie McVernon, as a new member, to her first meeting of ATAGI. Associate Professor McVernon has significant skills in mathematical modelling in relation to infectious disease and immunisation research. These skills will strengthen ATAGI's capacity to advise the Pharmaceutical Benefits Advisory Committee (PBAC) on the strength of evidence on effectiveness of existing, new and emerging vaccines and their use in Australian populations.
- ATAGI considered the implications of Australian Government's reforms to link immunisation to eligibility for the Family Tax Benefit (FTB) Part A supplement. Of particular interest was the expansion of the definition of 'fully immunised' which would, from July 2013, include three additional vaccines: meningococcal C, pneumococcal and varicella.
- ATAGI also noted the Government's decision to fund the availability of a new combination vaccine for measles, mumps, rubella and varicella to be introduced (at 18 months) on the National Immunisation Program (NIP) to replace the existing vaccine for measles, mumps and rubella (MMR) (given at 4 years) and varicella (given at 18 months). Implementation of the combined MMRV vaccine will assist in improving uptake of varicella vaccine, which currently has the lowest estimated uptake.
- ATAGI noted that a reliable history of varicella infection correlates highly with serological evidence of immunity. Therefore, serological testing prior to varicella vaccination of children or adults with a reliable history of varicella

infection, either by confident clinical diagnosis or with laboratory confirmation, is not warranted. ATAGI agreed that prior varicella infection is *not* a contraindication for varicella vaccination of unvaccinated children.

- ATAGI reviewed its advice for the 2012 seasonal influenza program which commences on 15 March annually. ATAGI recommended annual seasonal influenza vaccination even if a person has been vaccinated in the previous year/s with an influenza vaccine that contains the same strains. This is because immunity to influenza acquired by vaccination wanes rapidly over time. Influenza vaccination was strongly recommended for pregnant women with no preference for any brand of influenza vaccine; all are considered acceptable for use in pregnant women. ATAGI's 2012 seasonal influenza advice is available on the Immunise Australia website at www.immunise.health.gov.au
- In line with the discussion with Professor Baggoley, ATAGI's Influenza Working Party is being re-established with expanded terms of reference to among other things, review novel influenza vaccine formulations, including live adjuvanted seasonal and pandemic influenza vaccines; and pandemic response recommendations to the use of vaccine/s.
- Recent ATAGI advice published on the Immunise Australia website includes:
 - Clinical advice for immunisation providers regarding the administration of 2012 trivalent seasonal influenza vaccines (March 2012).
 - The Review of data on the safety of seasonal influenza vaccines, particularly Fluvax (CSL Biotherapies) in adults and children >10 years (February 2012).
 - Updated recommendations for revaccination of adults with 23-valent pneumococcal polysaccharide vaccine (23vPPV), Pneumovax 23[®] (December 2011).
- ATAGI continues its review of a number of chapters for inclusion in the 10th Edition of the Australian Immunisation Handbook. It is anticipated that the draft handbook will be available for public consultation in mid July 2012.
- The Department and Health and Ageing will write to key stakeholders inviting submissions on the Handbook. Advertisements will also be placed in national and major state/territory newspapers. It is anticipated that the Handbook will be presented to the National Health and Medical Research Council (NHMRC) for endorsement at its 192nd session meeting later this year. Pending endorsement by the NHMRC it is expected that the Handbook will be published and distributed to immunisation providers in early 2013.
- The next ATAGI meeting will be held on 7-8 June 2012 in Canberra. ATAGI's annual Industry day, will be held in Darwin on 22 June 2012, immediately following the Public Health Association of Australia's 13th Immunisation Conference which will be held from 19-21 June 2012. Industry Day provides an opportunity for vaccine manufacturers to meet with the ATAGI and share information relating to new and emerging vaccines; new technologies for assessing immunity, research updates on vaccines already in use and improvements in delivery technologies.