Australian Technical Advisory Group on Immunisation (ATAGI) 57th meeting 18 and 19 June 2015

ATAGI BULLETIN

The Australian Technical Advisory Group on Immunisation (ATAGI) 57th face-to-face meeting was held on 18 and 19 June 2015 in Canberra.

Conflict of interest

• ATAGI endorsed the revised conflict of interest policy, agreeing that the same processes will be followed by ATAGI's working parties.

Industry Day

- Members agreed that ATAGI's third annual Industry Day, held on 17 June 2015, was
 highly successful. Industry representatives were invited to present to ATAGI on new and
 emerging vaccines, new technologies for assessing immunity, research updates on
 registered vaccines, improvements in delivery technologies, and timelines for vaccine
 submissions to the Pharmaceutical Benefits Advisory Committee (PBAC).
- As part of Industry Day, ATAGI convened a briefing on the available data to estimate the
 disease burden from pertussis in early infancy in Australia for sponsors who may be
 interested in pursuing a PBAC submission for maternal pertussis vaccination in
 pregnancy.

Meningococcal disease

• ATAGI discussed and endorsed its advice to the PBAC regarding a minor resubmission for meningococcal group B vaccine (Bexsero®, Novartis).

Influenza

- ATAGI noted the recommendations from the PBAC, particularly a recommendation to list a quadrivalent seasonal influenza vaccine (Fluarix Tetra®, GSK) on the National Immunisation Program (NIP) for cohorts currently listed as eligible for trivalent influenza vaccine.
- Members noted that preliminary data on influenza indicate a good match between the vaccine strains and the dominant circulating strains.
- ATAGI acknowledged the need to clarify the advice on the effectiveness of both the quadrivalent and trivalent influenza vaccines for consumers. Updated ATAGI recommendations will be communicated in the annual ATAGI Statements on seasonal influenza vaccines and updates to the Australian Immunisation Handbook.
- Members noted that the recent report on the Department of Health-funded AusVaxSafety
 project, which is monitoring adverse events following influenza immunisation in children
 under 5 years, indicated that influenza vaccines registered for this cohort in 2015 are safe
 and well tolerated.

Funding of a whole-of-life immunisation register and new vaccines

- ATAGI noted and discussed the 2015–16 Federal Budget measures to improve
 immunisation coverage rates, including the expansion of the Australian Childhood
 Immunisation Register, and linking to a new Australian School Vaccination Register, to
 form a whole-of-life register. Members noted that the register expansions will be one of
 the most significant achievements for the NIP and vaccine-preventable disease control in
 Australia in recent history.
- ATAGI welcomed the recent announcement of two new programs to be implemented under the NIP: pertussis-containing vaccine booster at 18 months; and a National Shingles Vaccination Program in 70–79 year olds.

Human papillomavirus (HPV)

- ATAGI provided advice to the Department on clinical considerations for procurement of HPV vaccines for use under the NIP.
- The HPV Working Party recommendations were discussed and considered in ATAGI's presubmission advice to the sponsor for their PBAC submission to request inclusion of Cervarix® in the National Immunisation Program for the prevention of persistent infection, premalignant cervical lesions and cervical cancer caused by human papillomavirus types 16 and 18.

Pneumococcal disease

- The Pneumococcal Working Party continued to review the evidence for the optimum schedule for pneumococcal vaccination in adults at increased risk of pneumococcal disease due to age and other risk factors. ATAGI recognised the high quality of data on invasive pneumococcal disease (IPD) and the need for additional data on the contribution of pneumococcus to non-IPD cases of community-acquired pneumonia, and vaccine coverage in adults, to address current uncertainties relating to the impact of pneumococcal vaccines.
- ATAGI thanked Professor Peter McIntyre for his outstanding work as chair of the Pneumococcal Working Party and noted that Associate Professor Chris Blyth would be taking on this position from June 2015.

Pertussis

ATAGI noted the implementation of funded pertussis vaccination programs by all state
and territory governments for women in the third trimester of pregnancy, and strongly
supported comprehensive and harmonised evaluation of the impact of these programs by
jurisdictions.

Measles

- ATAGI agreed to support the National Measles Verification Committee, as required, to continue to validate Australia's measles elimination status.
- Members noted that a serosurvey is under way, and that New South Wales has developed a plan for measles surveillance that could be refined as a national plan with ATAGI advice.

Rabies

• ATAGI discussed the progress made by the CDNA/ATAGI Working Group on Rabies in developing criteria for assessing human and equine rabies immunoglobulin products for use in Australia in the event of shortages of the currently registered product(s).

Australian Immunisation Handbook

- Members were informed of the draft outcomes of the evaluation of the format of the Australian Immunisation Handbook, 10th edition, commissioned by the Department of Health and conducted by Snapcracker Research + Strategy.
- ATAGI was pleased to note the overwhelmingly positive responses from Handbook users. Members also agreed that it is important to progress work aimed at improving the online version. Once the evaluation has been finalised, ATAGI agreed that a working group would be established to provide advice on prioritising next steps for the Handbook.
- ATAGI was advised that the National Health and Medical Research Council (NHMRC)
 had endorsed the changes to the Australian Immunisation Handbook for the 2015 annual
 update.
- ATAGI discussed and prioritised items for review for the 2016 annual update.

Technical Advisory Group on Immunization meeting

• Members noted the key outcomes of the 24th meeting of the World Health Organization's Technical Advisory Group on Immunization and Vaccine-Preventable Diseases in the Western Pacific Region, held in Manila, Philippines, on 9–12 June 2015. Of particular interest was the proposal that all countries should have a national plan for evidence-based introduction of new vaccines, developed by their national immunisation technical advisory group (NITAG) or technical partners.

ATAGI membership and other business

- Members welcomed new ATAGI member Associate Professor Noel Hayman, and were informed that Professor David Durrheim had resigned from ATAGI but would continue to participate in ATAGI working parties.
- It was also noted that Associate Professor Ann Koehler's term as the CDNA representative on ATAGI expires on 30 June 2015 and that Associate Professor Koehler will be replaced by Dr Sonya Bennett.
- Members thanked Professor Durrheim and Associate Professor Koehler for their contributions to ATAGI.
- Members noted that an expression of interest process would commence in July 2015 to fill six positions due to expire on 31 December 2015 and the position vacated by Professor Durrheim.
- Members agreed to establish an ATAGI working party to consider vaccine coverage for special risk groups.
- Members discussed the request from the National E-Health Transition Authority (NEHTA) for ATAGI's assistance in determining editorial rules for vaccines under the Australian Medicines Terminology.

- Members agreed to include discussion of research priorities and potential development of a statement on priorities for the NHMRC on the agenda for the next ATAGI meeting.
- The 58th meeting of ATAGI will be held in October 2015 in Canberra.

Notes

- ATAGI's membership, terms of reference and conflict of interest information are available on the Immunise Australia website at www.immunise.health.gov.au (see 'Immunisation Advisory Bodies').
- The *Australian Immunisation Handbook* is available on the Immunise Australia website at www.immunise.health.gov.au (see 'Australian Immunisation Handbook 10th Edition 2015').