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CDC Publishes Revised Pneumococcal Vaccine Interval Recommendations in the Elderly

Karen Lewis, MD, AIPO Medical Director

In the <u>September 19, 2014</u> issue of *Morbidity and Mortality Weekly Report* (MMWR), the Centers for Disease Control and Prevention (CDC) recommended that everyone 65 years and over needed not only a dose of Pneumovax®23 (PPSV23) given at or after age 65 years, but they should also receive a dose of Prevnar®13 (PCV13). This is because approximately 20%–25% of invasive pneumococcal disease cases and 10% of community-acquired pneumonia cases in adults aged ≥65 years are caused by PCV13 serotypes and are potentially preventable with the use of PCV13. When possible, PCV13 should be given before PPSV23 because it results in better antibody levels.

The CDC subsequently modified its recommendations for minimum intervals between PCV13 and PPSV23 in patients 65 years and older in the September 4, 2015 MMWR issue. Immune *competent* patients should have at least 1 year between PCV13 and PPSV23, which ever one is given first.

Immune compromised patients and those without a functioning spleen should have a minimum interval of at least 8 weeks between PCV13 and PPSV23 when PCV13 is given first. On the other hand, there should be a minimum interval of at least 1 year between PPSV23 and PCV13 when PPSV23 is given before PCV13.

A patient who is 65 years or older does not need a dose of PCV13 <u>if PCV13</u> had previously been given before 65 years of age. The <u>September 4, 2015</u> MMWR also has an updated table for minimal intervals between PCV13 and PPSV23 based on age and high-risk conditions for *all* ages.

In This Issue:

- CDC Publishes Revised Pneumococcal Vaccine Interval Recommendations in the Elderly
- Current Circulating Influenza Viruses Are Similar to 2015-2016 Influenza Vaccine
- Arizona is Awarded Adult Grant
- National Immunization Survey Results
- Vaccine Center Update
- ASIIS Tip
- Training and Education

"Somewhere, something incredible is waiting to be known" - Carl Sagan

Current Circulating Influenza Viruses Are Similar to 2015-2016 Influenza Vaccine

Karen Lewis, MD, AIPO Medical Director



During May 24–September 5, 2015, a total of 199 influenza viruses collected from the United States and worldwide were antigenically and/or genetically characterized by the Centers for Disease Control and Prevention (CDC).

The influenza A (H1N1)pdm09 viruses, the influenza A (H3N2) viruses, the B/Yamagata lineage and the B/Victoria lineage influenza B viruses were all antigenically similar to the viral components of the 2015-2016 influenza vaccines.

The similarity of circulating influenza viruses to the seasonal vaccine antigens can give an indication of how well the seasonal influenza vaccines will protect against the upcoming season's influenza viruses. Therefore, this similarity suggests that the 2015-2016 influenza vaccine may have a higher level of effectiveness than the 2014-2015 seasonal influenza vaccine. However, each seasonal vaccine's effectiveness will not be known until actual community protection can measured.





SUMMARY OF REPORTABLE VACCINE-PREVENTABLE DISEASES

January - September, 2015 1,2

Susan Goodykoontz, Vaccine Preventable Disease Epidemiologist

	Jan - August, 2015	Jan- August, 2014	Jan- August 5- Year Medi- an
Measles	7	0	1
Mumps	2	9	3
Rubella (Congenital Rubella Syndrome)	0 (0)	0 (0)	0 (0)
Pertussis (Confirmed)	475 (301)	379 (215)	641 (215)
Haemophilus influenzae, serotype b invasive disease (<5 years of age)	4(2)	0(0)	3(1)
Meningococcal Infection, invasive	4	9	10
Streptococcus pneumoniae, invasive	491	596	624
Hepatitis A	48	23	58
Hepatitis B, acute	25	29	98
Hepatitis B, chronic	798	727	654

¹ Data are provisional and reflect case reports during this period.

² These counts reflect the year reported or tested and not the date infected.

Arizona is Awarded Adult Grant

Alexandra Bhatti, MPH, Immunization Assessment Manager



In September the Arizona Department of Health Services Immunization Program Office in collaboration with The Arizona Partnership for Immunization (TAPI) was awarded a two (2) year grant aimed specifically at raising immunization coverage rates for adults in Arizona.

Adult vaccination rates in Arizona are notably below the national Healthy People 2020 goal. America's Health Rankings Senior Report identified Arizona as having the 33rd lowest influenza coverage in the country for seniors 65 and older. There are numerous barriers for improving adult immunization rates in Arizona, which include limited patient awareness, lack of referrals, and the need for education of recommended adult vaccinations. A solution to overcome these barriers is to consistently implement the CDC Standards for Adult Immunization Practice.

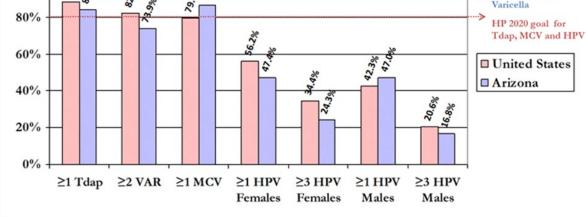
The Arizona Immunization Program Office (AIPO) has designed activities targeted to improve adult immunization practices using those standards. The ultimate goals are to improve adult immunization coverage and increase adult immunization reporting to the Arizona State Immunization Information System (ASIIS). Stay tuned for more information regarding the adult grant in future Immunications.

National Immunization Survey Results

Alexandra Bhatti, MPH, Immunization Assessment Manager

The 2014 National Immunization Survey (NIS) results for teens and toddlers were released in July and August 2015. Please visit the AIPO website for more information on the NIS including <u>national and Arizona data</u>. Additionally, Arizona- specific 2014 NIS data is available in the <u>2014 National Immunization Survey</u> Update.

Arizona Exceeds National Coverage For ≥1 HPV Doses for Males and ≥1 MenACWY HP 2020 goal for Varicella HP 2020 goal for Tdap, MCV and HP



2014 ESTIMATED VACCINATION COVERAGE AMONG ADOLESCENTS AGED 13-15 YEARS

COMPARING UNITED STATES AND ARIZONA

Vaccine Center Update

Lisa Underhill, MPA, Vaccine Center Manager

2015 - 2016 VFC INFLUENZA VACCINES ARE NOW AVAILABLE TO ORDER IN ASIIS.

As of 10/09/15, 66% of the total requested Arizona VFC influenza doses have been released from the CDC and allocated to Arizona VFC. The following seven (7) quadrivalent vaccine presentations for VFC-eligible children are available to order through ASIIS:

Brandname	Age Range	Manufacturer	Packaging	NDC#
Fluarix®	3 years through 18 years	GSK	10 pack - 1 dose 0.5mL syringes	58160-0903-52
FluLaval	3 years through 18 years	GSK	5mL - 10 dose Vial	19515-0898-11
FluMist®	2 years through 18 years	Medlmmune	10 pack - 1 dose sprayer (Intranasal)	66019-0302-10
Fluzone®	6 months through 35 months	Sanofi	10 pack - 1 dose 0.25mL syringes	49281-0515-25
Fluzone®	3 years through 18 years	Sanofi	10 pack - 0.5 mL single dose vials	49281-0415-10
Fluzone®	3 years through 18 years	Sanofi	10 pack - 1 dose 0.5mL syringes	49281-0415-50
Fluzone®	6 months through 18 years	Sanofi	5.0mL 10 dose vials	49281-0623-15

- Although our vaccine distributor has received some of each of the types of vaccines AZ VFC has ordered
 we still do not have all of the requested doses from CDC for those presentations. For this reason
 providers' orders are likely to be reduced. You will be notified in the comments section of ASIIS if we
 reduce the number of doses requested by your office. You may order again in one month.
- Sanofi Pasteur is experiencing a slower start with VFC Fluzone ® single-dose syringe shipments than
 typically seen in recent seasons. While some of the syringes have been allocated to the AZ VFC
 program, our full allocation of the syringes is not expected to be received in its entirety until
 November. We have, however, received our full allocation of single and multi-dose Fluzone ® vials.
- The AZ VFC program has been advised by the CDC of continued shipping delays with FluMist doses. As of 10/07/15 the AZ VFC program has received 30% of the total FluMist doses we requested from the CDC. Portions of our requested doses will continue to be shipped to our vaccine distributor for the next few months, but we do not expect to have our full amount of requested FluMist doses until January.
- Current VFC vaccine inventory must be reconciled in ASIIS before you will see your order screen.
- Remember to select the appropriate order set from the "Order Set" drop down menu which is located below the comments section on your ASIIS order screen.. None of your vaccines will appear on the order screen until you have selected one of the order sets.
- Temperature logs must be submitted to the Vaccine Center up to the day before the order is placed. For example, if you place your order on October 4th temperature logs should be completed and submitted up to October 3rd.
- It is very important to frequently check the comments section in ASIIS. This is how the Arizona Vaccine Center will communicate with you about your vaccine orders.
- The <u>VFC Influenza Order Training Module</u>, <u>VFC 2015-2016 Influenza Vaccine Center Update (8/25/15)</u>, and the <u>Arizona VFC Vaccine Choice Policy</u> are available for your review.

Please contact the Vaccine Center at 602-364-3642 if you have any questions.

Vaccine Center Update (continued)

VFC Re-Enrollment

2016 VFC re-enrollment will begin very soon and will be completed using fillable, electronic forms that you can email to AIPO. Previous communication indicated that re-enrollment would be completed through ASIIS, but this is no longer the case. Please watch your email for soon-to-be announced VFC reenrollment dates and information.

ASIIS Tip:

Step 1

Step 2

Step 3

Accounting for Flu Vaccine in ASIIS is Easy as 1 - 2 - 3!

'Receive' all VFC Flu Orders in ASIIS once the vaccine shipment arrives.

Do not manually add VFC flu doses in your ASIIS Inventory. Use the Receive Order screen to populate your ASIIS inventory. Always review the quantity, manufacturer, lot number and expiration date listed on the Receive Order screen to ensure it matches the Packing Slip.

Report all administered Flu vaccine doses to ASIIS.

Use the 'Add Administered' function on the Vaccinations View/Add screen and select the correct vaccine on the Vaccination Detail Add screen. Make sure the VFC Flu lot number is attached to every administered dose. This will ensure accurate linkage between the patient and the VFC Flu vaccine that was administered.

Report all Expired, Wasted or Spoiled VFC Flu vaccine to ASIIS.

Use the Reconciliation screen to subtract the doses that were expired/wasted/spoiled. To help decrease the amount of expired vaccine, please place smaller, more frequent VFC Flu vaccine orders. If you have VFC Flu vaccine that will expire in 120 days and you will not be able to use it, please contact the Arizona Vaccine Center. You may be able to transfer the VFC Flu vaccine to a provider who could use it before it expires.

Ask the Experts

Experts from the CDC answer questions about vaccines – visit www.immunize.org/ askexperts/ for more questions and answers.

Q: We have a child who received the second dose of hepatitis A vaccine 3 months after the first dose. A repeat dose (dose #3) was given 4 months after the (invalid) second dose. Both dose #2 and dose #3 appear to be invalid because the intervals were less than 6 months. Should this child receive a fourth dose of hepatitis A vaccine?

A: It is true that the recommended minimum interval between doses of hepatitis A vaccine is 6 calendar months. If the second dose is given too early, the repeat dose should be given 6 months after the invalid dose. However, in this situation CDC has recommended that dose #3 can be counted as valid if it was separated by at least 6 months from the first dose. So a fourth dose would not be recommended for this child.

Upcoming Trainings/ Education

CDC: Pink Book Updates/Corrections: Several errors have been identified in the Pink Book 13th edition, as well as several places where updates or clarifications were needed. These have been listed on a new "Errata, Updates, and Clarifications" link, which can be found at http://www.cdc.gov/vaccines/pubs/pinkbook/pink-errata.html. When noted, changes have been incorporated into the online html and pdf versions of the Pink Book. The listing of changes can also be printed out to be placed with the hard copy of the Pink Book.

"You Call the Shots" Updated Modules – The Flu and DTaP modules have been updated on the CDC webbased "You Call The Shots" training course. Please visit http://www.cdc.gov/vaccines/ed/youcalltheshots.htm to view the new modules and the entire training course. This is required training for VFC providers and staff, and is broken into individual modules which make a perfect addition to any monthly staff meeting.

Standing Orders for Adult Vaccinations Workshops - The Immunization Action Coalition (IAC) has launched *Take A Stand*, a new program developed to promote the use of standing orders for adult immunizations. The goal of the project is to reach key leaders (clinicians, nurses, and clinic managers) in private practices and integrated delivery networks to help them implement or enhance the use of standing orders for adult immunizations in their medical settings. The program will consist of workshops held around the country from October 2015 through June 2016. Each workshop is being led by nationally recognized speakers, such as Dr. Bill Atkinson and L.J Tan. Attendees will participate in a 4-hour interactive session, and they also will be able to receive one year of support with any problems they encounter while implementing standing orders. The two workshops in Arizona will be held in Phoenix on March 17 and in Tucson on March 18. A listing of workshop dates and locations, as well as other materials, is available at www.standingorders.org.

New Employees



Ashley Lankins, ASIIS Customer Service Hotline Specialist Valentin Shoshtarikj, ASIIS Program Manager

Helpful Links

Arizona Immunization Program Office
Arizona Vaccine News
CDC Vaccines and Immunizations
CDC Vaccine Safety
Immunization Action Coalition
The Arizona Partnership for Immunization
Updated Vaccine Information Statements:

- Influenza

 Live, Intranasal
- Influenza— Inactivated
- Serogroup B Meningococcal (MenB)

Managing Editor: Wendy O'Donnell

Editors:
Dana Goodloe, Brenda Jones

Contributors: Dr. Karen Lewis, Alexandra Bhatti, Susan Goodykoontz, Lisa Underhill



AIPO (602) 364-3630 ASIIS Help Desk: (602) 364- 3285 ASIISHelpDesk@azdhs.gov VFC Help Desk: (602)364-3642 ArizonaVFC@azdhs.gov