New Australian immunisation guidelines

The Minister for Health and Family Services, Dr Michael Wooldridge launched the new version of the National Health and Medical Research Council (NHMRC) publication *The Australian Immunisation Handbook* (6th edition) on 28 February 1997. The purpose of the immunisation Handbook is to give practitioners clear guidance about immunisation and to provide an accessible summary of the relevant data on vaccine-preventable diseases in Australia. A major aim is to encourage practitioners to maintain the highest standard in the provision of age-appropriate immunisation services.

The sixth edition of the Handbook introduces a new Australian Standard Immunisation Schedule (see page 79) and a number of important changes to immunisation recommendations.

Changes to the standard vaccination schedule

Acellular pertussis vaccine

It is recommended that acellular pertussis vaccine (in the form of DTPa) be used for the fourth dose of pertussis at 18 months and the fifth dose at 4-5 years.

Hepatitis B vaccination

The NHMRC has recommended the introduction of universal hepatitis B vaccination for infants and pre-adolescents into the Standard Schedule. This universal program, combined with more vigorous implementation of previous recommendations for selective hepatitis B vaccination of high risk individuals, is designed to eliminate acute hepatitis B and to reduce the number of hepatitis B carriers in the community. For practical reasons, the recommendations for universal vaccination in infants will not be incorporated into the standard vaccination schedule until appropriate combination vaccines are licensed for use in infants. In the interim, parents who wish to have their infants vaccinated should be informed that the vaccine is effective and safe, and encouraged to proceed with vaccination. The program of universal pre-adolescent vaccination should be commenced in 1997.

Adult vaccination

Recommendations for adult vaccination are now included in the Standard Schedule. These include recommendations for routine influenza and pneumococcal vaccination for Aboriginal and Torres Strait Islander people over 50 years of age and other individuals over 65 years of age.

Milestones in the childhood vaccination schedule

The revised Schedule also highlights three major milestones for childhood vaccination.

- The six month milestone which makes the completion of the primary infant schedules for diphtheria, tetanus, pertussis, Hib and oral polio vaccines.
- The 12 month milestone which marks the completion of infant vaccination against measles, mumps and rubella.
- The 18 month milestone which marks the completion of the important boosters for diphtheria, tetanus, pertussis and Hib.

New recommendations on vaccination procedures

The guidelines and tables of information for the general public have been extensively revised and extended. Notable additions and changes include:

- revised recommendations on obtaining valid consent, supported by a new table comparing the effects of disease and vaccines;
- extended guidelines on techniques for injection of vaccine;
- a table of guidelines on catch-up vaccination for infants and children;
- changes to the recommendations on absolute and relative contraindications for childhood vaccination;
- modified guidelines for management of adverse events following vaccination;

- a detailed table of recommended paracetamol doses to be given routinely prior to vaccination;
- guidelines for the management and further vaccination of individuals who have experienced a severe reaction to a previous vaccination;
- a new policy that allows use of open multidose oral polio vaccine vials in later sessions;
- the criterion for deferring vaccination in children with a febrile illness has been raised from 38°C to 38.5°C;
- modified guidelines for administration of BCG vaccine;
- clarification of guidelines for administration of poliomyelitis vaccines;
- a summary of national standards for childhood immunisation.

Handbook availability

The immunisation Handbook is being distributed by direct mail to immunisation providers. The distribution list includes general practitioners, nursing organisations, private and public sector health professionals, medical teaching institutions, health professionals working with groups with special needs and those in rural and remote areas, and Aboriginal and Torres Strait Islander communities. This list has been developed with the assistance of the Health Insurance Commission and the State and Territory health authorities. Health professionals who have not received a Handbook by this method by the end of April 1997 should ring 1800 671 811 to order a copy, or send a fax to the Publications Officer, Public Health Education Unit, fax no. (06) 289 6838.

The NHMRC Australian Standard Vaccination Schedule

(November 1996)

Age	Disease	Vaccine	Milestones
2 months	Diphtheria, tetanus, pertussis Poliomyelitis Hib	DTPw* OPV - Sabin vaccine Hib vaccine (HbOC or PRP-OMP)**	
4 months	Diphtheria, tetanus, pertussis Poliomyelitis Hib	DTPw* OPV - Sabin vaccine Hib vaccine (HbOC or PRP-OMP)**	
6 months	Diphtheria, tetanus, pertussis Poliomyelitis Hib (HbOC schedule only)	DTPw* OPV - Sabin vaccine Hib vaccine (HbOC)	first six months
12 months	Measles, mumps, rubella Hib (PRP-OMP schedule only)	MMR Hib vaccine (PRP-OMP)	second 12 months
18 months	Diphtheria, tetanus, pertussis Hib (HbOC schedule only)	DTPa or DTPw Hib vaccine (HbOC)	third 18 months
Prior to school entry: 4-5 years	Diphtheria, tetanus, pertussis Poliomyelitis	DTPa or DTPw OPV - Sabin vaccine	
10-16 years	Measles, mumps, rubella Hepatitis B (1st dose)	MMR HBV	-
1 month later	Hepatitis B (2nd dose)	HBV	
6 months later	Hepatitis B (3rd dose)	HBV	
Prior to leaving school: 15-19 years	Diphtheria, tetanus Poliomyelitis	Td (ADT)*** OPV- Sabin vaccine	
Every 10 years	Diphtheria, tetanus	Td (ADT)***	
Post-partum for non-immune women	Rubella	Rubella vaccine or MMR	
Over 50 years (Aboriginal and Torres Strait Islander people)	Pneumococcal infections Influenza	Pneumococcal vaccine (every 5 years) Influenza vaccine (annual)	
Over 65 years	Pneumococcal infections Influenza	Pneumococcal vaccine (every 5 years) Influenza vaccine (annual)	

* DTP is the abbreviation for Diphtheria-Tetanus-Pertussis vaccine.

** Abbreviation for Hib vaccines - HbOC is 'HibTITER'; PRP-OMP is 'PedvaxHIB'. HbOC (HibTITER) is given at 2, 4, 6 and 18 months. PRP-OMP (PedvaxHIB) is given at 2, 4 and 12 months.

*** Td is combined Diphtheria-Tetanus vaccine. The DT formulation for children is often referred to by the trade name 'CDT'. The Td formulation for adults is often referred to by the trade name 'ADT'.

Hepatitis B schedule for adolescents - give the 1st dose at the same time as MMR (10-16 yrs), the 2nd dose about 1 month later, and the 3rd dose 6 months after the 1st dose.

All of the vaccines in the Standard Schedule, except OPV, are given by intramuscular injection. MMR can also be given by deep subcutaneous injection. OPV is given orally. OPV must never be injected.

Interim hepatitis B schedule for infants

The NHMRC has endorsed the use of hepatitis B vaccine (HBV) for all infants. HBV should be administered at birth, 1 month, and 6-12 months of age. Hepatitis B vaccine has not yet been included in the standard infant schedule because it is only available as an additional injection. Parents who express an interest in infant HBV should be encouraged to have their children vaccinated, as long as compliance with schedule vaccines is not jeopardised.

The NHMRC strongly recommends that HBV be offered to all infants born to HbsAg+ mothers and to all infants and young children from groups with a hepatitis B carrier rate of over 2%.