



URGENT - PLEASE POST & DISTRIBUTE TO ALL NURSING AND MEDICAL STAFF

Special Hib Vaccine Recommendations

The recommendation for temporary deferral of the booster dose (at 12-15 months) of Hib vaccine for children not at high risk for Hib disease may have resulted in: 1) higher Hib carriage in non-symptomatic children, 2) increased cases, and 3) at least one death in Oklahoma. For these reasons, it is crucial that all infants receive the complete primary series of Hib vaccine. With currently available vaccine products, this means 3 doses of ActHIB® or Pentacel® (manufactured by sanofi) or 2 doses of PedvaxHIB® or Comvax® (manufactured by Merck) or 3 doses if a mixed schedule is given (e.g., 1 or 2 doses of ActHIB or Pentacel and 1 or 2 doses of PedvaxHIB or Comvax).

- The Hib vaccine supply is sufficient to ensure that all children receive the complete primary series of 2 or 3 doses if vaccine providers use the vaccines available.
- If Pentacel (DTaP-Hib-IPV) is the only Hib-containing vaccine available, this combination product should be used to complete the primary series, even if it results in receipt of additional doses of other antigens (e.g., DTaP, IPV).
- Pentacel may not be what you normally use in your practice; however, you may have to use it until the Hib vaccine shortage is resolved.

Based on these circumstances, the Centers for Disease Control and Prevention (CDC) will place a letter in each Vaccines for Children (VFC) vaccine shipment beginning the third week of March 2009 and continuing for the next 4 months. The letter will recommend children complete the primary series of Hib vaccine using the minimum intervals allowed between doses. **Deferral of the booster dose is still recommended for children not at high risk of Hib disease.** Please note that the letter will address the usage of sanofi Hib vaccine products (ActHIB and Pentacel) only. However, the Merck Hib vaccine product, PedvaxHIB is also available in Oklahoma on a limited basis.

To assure the highest attainable coverage of the Hib primary series, the Oklahoma Immunization Service recommends the following steps:

- 1) Review the Hib vaccination status of all children in your practice less than 5 years of age.
- 2) Recall and immunize children who are due/past due with Hib vaccine using the accelerated schedule.

These two steps are described in detail below.

1) Review the records of all children in your practice who are less than 5 years of age for Hib vaccine status. Clinics that use OSIS may obtain a list of children needing Hib vaccine using the *Client Vaccine Series Status Report* in the Oklahoma State Immunization Information System (OSIS).

Access this report through:

- Recall on the main menu,
- Select *Client Vaccine Series Status Report* under *Action/View*
- Select an *Age Range* (start with <13 months),
- Select the vaccine (*Hib*),
- Select *Both* (includes *Due* and *Past Due* children),
- Submit the report
- Repeat these steps for each age group available.

The *Client Vaccine Series Status Report* will list children less than 5 years of age who are *Due* or *Past Due* for any dose of Hib including the booster dose. Review the report and exclude children who are not high risk and who are lacking only the deferred booster dose of Hib vaccine. Contact the remaining children to schedule for vaccination. Children missing only the booster dose should be recalled after the Hib shortage is resolved. If you have any questions concerning Hib vaccine, the Hib vaccines schedules, or use of the *Client Vaccine Series Status Report*, please contact your Immunization Field Consultant or Regional Immunization Coordinator or call the Immunization Service at (405) 271-4073. Hib vaccine schedules are available on the Immunization Service website at: <http://imm.health.ok.gov>.

2) Recall children who have not completed the primary Hib vaccine series and complete the primary series in the shortest time possible with any available Hib-containing vaccine.

Children who are not at high risk for Hib disease should be scheduled to complete the primary series as outlined below:

For infants at least 6 weeks of age but less than 12 months of age:

- If the infant has not had any doses or only one dose of Hib vaccine, schedule the child for the first and/or second doses immediately with a minimum of four weeks between the doses.
- If the infant has received 2 doses of PedvaxHIB or Comvax the primary series is complete.
- If the child has received 2 doses of ActHIB or one dose of ActHIB and one dose of PedvaxHIB, schedule the child for the 3rd dose a minimum of four weeks after the 2nd dose.

These children will need one booster dose when the Hib vaccine shortage is over.

For toddlers between 12 and 14 months of age:

- If the child has not had any doses of Hib vaccine, schedule appointments for two doses, eight weeks apart.
- If the child is between 12 and 14 months of age and has received Hib vaccine but did not complete the primary series before they turned 1 year (i.e., had 1 dose of PedvaxHIB or Comvax OR 1 to 2 doses of ActHIB), schedule an appointment for 1 additional dose, a minimum of eight weeks from the last dose.

For toddlers 15 months of age but less than 5 years

- If the child has not received any Hib vaccine OR has not completed the primary series (i.e., had 1 dose of PedvaxHIB or Comvax OR 1 to 2 doses of ActHIB), schedule an appointment for 1 dose, a minimum of eight weeks from the last dose.

If a child is 5 years of age or older and has not received Hib vaccine, Hib vaccine is not necessary.

Children at increased risk of Hib disease should continue to receive the full series of Hib vaccine (including the booster dose). These children should also receive the primary series in the shortest time possible. Children at increased risk include: children with asplenia, sickle cell disease, human immunodeficiency virus infection and certain other immunodeficiency syndromes and malignant neoplasms, and American Indian/Alaska Natives.

DTaP Supply Issues

- GlaxoSmithKline (GSK) DTaP vaccine (Infanrix®) in prefilled single-dose syringes is temporarily unavailable.
- GSK expects the syringes to be available again in April.
- The Immunization Service will fill orders for pre-filled syringes with vials until the supply improves.

Pediatric Hepatitis B Vaccine Supply Limitations

- In February 2009, both Merck and GlaxoSmithKline (GSK) were unable to fill orders for pediatric Hepatitis B vaccine, resulting in backorders.
- CDC has released doses from its pediatric monovalent Hepatitis B vaccine stockpiles to each manufacturer to support private and public sector vaccine usage through March 2009.
- Merck expects supplies of pediatric Recombivax HB® to be limited during the remainder of 2009 and does not expect to return to a full supply until some time in 2010.
- GSK expects to be able to meet the US market demand for monovalent Hepatitis B vaccine through the end of May 2009 with Pediatric Engerix-B® and is working closely with CDC to determine how much additional monovalent Hepatitis B product can be supplied to the US market during the second half of 2009.
- **There is no change in the recommendations for use of hepatitis B vaccine at this time.**

The Immunization Service will strive to supply all VFC providers with adequate DTaP and pediatric hepatitis B vaccine; however, providers may receive a product different than the one ordered, such as vials or syringes, or a different manufacturer, but this cannot be avoided at this time.

Adult Hepatitis B Vaccine Supply Limitations

In December 2008, Merck informed CDC that it expected to deplete available adult and dialysis formulations of their hepatitis B vaccine, Recombivax HB® in the first quarter of 2009. Once depleted, these formulations will be unavailable for the remainder of 2009. VFC providers who started adolescents 11 through 15 years of age on the 2-dose hepatitis B series using Merck's Adult Recombivax HB may have to switch to pediatric hepatitis B vaccine and complete the series with 3 doses if the current supply is depleted before the 2-dose series is completed. The supply of GSK's Adult hepatitis B vaccine (Adult Engerix-B®) and Adult hepatitis A/hepatitis B combination vaccine (Twinrix®) is sufficient to meet demand for routine adult usage of this vaccine.

For Questions Contact the Immunization Service at:

Telephone: 405.271.4073 E-mail: Immunize@health.ok.gov