

### **BLASTFAX**

#### **Advisory Committee on Immunization Practices (ACIP) Meeting - June 25-26, 2008**

*Below is a brief description of decisions made at the most recent ACIP meeting:*

##### **Combination Vaccines**

- The committee voted to include Pentacel and Kinrix to the VFC program. There will be separate “Notices to Readers” published for each combination vaccine explaining the use, indications and other issues.
- Pentacel<sup>®</sup> is a combination DTaP – IPV – Hib vaccine manufactured by sanofi pasteur. It is licensed for children aged 6 weeks through 4 years. It is indicated for ages 2, 4, 6 and 15-18 months. Routine polio immunization is recommended at 2, 4, 6-18 months and 4-6 years. Pentacel<sup>®</sup> at 2, 4, 6 and 15-18 months would provide 4 valid doses of IPV. However, many state school immunization requirements specifically require the 4<sup>th</sup> dose of IPV between 4-6 years.
- Kinrix<sup>™</sup> is a combination DTaP – IPV vaccine manufactured by GlaxoSmithKline (GSK). It is indicated as the fifth dose booster at age 4 to 6 years following a primary series using Pediarix<sup>®</sup> (DTaP – IPV – Hep B).

##### **Rotavirus Vaccine**

- The committee voted to recommend a new rotavirus vaccine, Rotarix<sup>®</sup>, manufactured by GSK and licensed in April, 2008. The existing rotavirus recommendation for RotaTeq<sup>®</sup>, manufactured by Merck, was updated. The committee voted to include Rotarix<sup>®</sup> in the VFC program.
- Rotarix<sup>®</sup> and RotaTeq<sup>®</sup> are recommended for routine use in all infants. Rotarix<sup>®</sup> is to be given in a 2-dose series at 2 and 4 months of age. RotaTeq<sup>®</sup> is to be given in a 3-dose series at 2, 4 and 6 months of age.

##### **HPV**

- The committee added a minimum interval of 24 weeks between doses 1 and 3 of the HPV vaccine. The change was also made to the VFC resolution.
- The committee discussed a potential recommendation for HPV use in women aged 27-45 years, as licensure for use of the vaccine in this age group is pending at FDA. The committee is leaning toward a permissive recommendation for this age group with a possible vote during the October 2008 meeting.

##### **MMR-V**

- The committee received an update on the combination MMR – varicella vaccine manufactured by Merck. Previously, ACIP recommended removing the preference for MMR-V vaccine over separate administration of MMR and varicella vaccines after preliminary data suggested an increased risk of febrile seizures following MMR-V vaccination. A MMR-V Vaccine Safety Working Group has been formed to formulate policy options for the use of MMR-V vaccine, considering the benefit of vaccination and risk of adverse events. Policy options are anticipated for discussion at the February 2009 ACIP meeting.

##### **Influenza**

- The committee discussed current coverage rates for influenza vaccine and the need for vaccine demand to catch up to supply. The time frame for expanded influenza vaccination recommendations proposed by the working group is: 2010-2011: consider expansion to include household contacts and caregivers of school-aged children and 2012-2013: consider expansion to universal vaccination.

#### **Pneumococcal**

- The committee clarified the risk group definition in the permissive PPV23 recommendation from “For children of Alaska Native or American Indian descent, addition of PPV23 after PCV7 can be considered” to “For Alaska Native or American Indian children aged  $\geq 2$  years, living in areas with documented elevated rates of invasive pneumococcal disease, addition of PPV23 after PCV7 can be considered.”
- The committee made changes to the PPV23 revaccination time interval for high risk children. If the child is aged 2-4 years at the first PPV23 dose, one revaccination after 3 years. If the child is aged  $\geq 5$  years at the first PPV23 dose, one revaccination after 5 years.
- The committee passed a permissive recommendation: “For HIV-infected children aged 5-17 years on HAART who have NOT been previously immunized with PCV7, practitioners may consider administering 2 doses of PCV7 followed by PPV23.”
- The committee added asthma to the list of high risk conditions recommended to receive PPV23 in adults ages 18-64 and clarified language relating to revaccination with PPV23 in adults.

**The Georgia Vaccines for Children Program is currently evaluating cost savings efforts for vaccine purchasing due to budgetary changes. Once decisions are made about vaccine availability, a notice will be sent to all VFC providers.**

*For questions or concerns regarding this blastfax or any other immunization information, please contact the Chapter's Immunization Coordinator, Mike Chaney at (404) 881-5094 or [mchaney@gaaap.org](mailto:mchaney@gaaap.org).*