

The Vac Scene[®]

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A bi-monthly newsletter for immunization providers, from Public Health - Seattle & King County (PHSKC). For back issues, visit our website: <http://www.metrokc.gov/health>

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INFANT PERTUSSIS INCREASE IN KING COUNTY

The rate of pertussis in young infants has increased. Between January and mid-June of 2003, 15 King County infants under 120 days of age have been reported as having confirmed pertussis. Public Health-Seattle & King County pertussis data show that the portion of total reported cases represented by very small infants by mid-June 2003 has doubled to 14% (15/105) from 7% (11/155) in all of 2002.

There are a few unique features about pertussis in the very young. While older infants and toddlers may present with symptoms that are clinically diagnostic for pertussis, very young infants may have less specific symptoms. This may delay the inclusion of pertussis in the differential diagnosis. For example, some young infants may experience difficulty eating rather than presenting with a clearly defined cough syndrome. Further, because of their very young age and limited activities, transmission of pertussis is most likely from the adults and older children around them.

Providers are requested to maintain a heightened awareness of this increase in infant pertussis disease when seeing babies that present with breathing and/or feeding difficulties. It may also be helpful to ask specifically about coughing household members and close contacts of these infants.

Public Health-Seattle & King County Communicable Disease section is participating in a CDC sponsored multi-site case-control study to better describe the transmission patterns and sources of infant pertussis.

NEWS FROM PUBLIC HEALTH'S VACCINES FOR CHILDREN (VFC) PROGRAM

Changes To The Vaccine Menu

- The nationwide shortage of **pneumococcal conjugate 7-valent (Prevnar)** is over! Providers can now return to the regular 4-dose schedule. For more detail and a catch-up schedule for missed doses, refer to VFC's May 22nd Broadcast Fax, visit <http://www.cdc.gov/nip> and click on the Health Care Professionals tab, or call (206) 296-4774 and talk with Darren or Susan. Note that, depending on the age of the child, all four doses may not be needed to complete the vaccine series.
- The Washington State Department of Health Immunization Program determines which vaccines are offered through the King County VFC Program. Because of parental concerns and market issues, beginning around July 1st, shipments of DTaP will be of Aventis-Pasteur's **Daptacel** vaccine in single dose vials, replacing Tripedia. Daptacel contains no thimerosal at all unlike Tripedia, which may retain a trace amount from the manufacturing process (<0.3 µg [micrograms] of ethylmercury). This is 1/3,000 the amount formerly contained in that vaccine. **When the current stock of Tripedia has been distributed**, providers will begin receiving the Daptacel formulation.

2003-2004 Flu Season

- It's not too soon to begin thinking about the 2003-2004 influenza season. This year, the VFC Program can offer limited amounts of **Fluzone** for **children ages 6 months through 23 months, *whether or not they are high-risk.*** The vaccine is supplied in pre-filled syringes (without needles); syringes take up more room in your refrigerator than the usual vials, so keep that in mind when ordering. The manufacturer is allowed to refer to this formulation as "preservative-free"; however, it may contain a trace amount of thimerosal from manufacturing (the same as Tripedia). Some parents may want this information.
- In addition, VFC will offer the regular 10-dose vials of **Fluzone for high-risk children 2 years and older** and other children who are their household contacts. This formulation does contain thimerosal (25 µg [micrograms] per 0.5-ml dose). Please review your flu vaccine usage from last year to plan your order, or call (206) 296-4774 and we can look it up for you. A revised Vaccine Order Form will be sent to you in August.
- Many providers also **purchase flu vaccine** for adults and "healthy" children (groups not eligible for VFC flu vaccine). If you have not yet ordered flu vaccine from the manufacturer, do so as soon as possible to reserve the number of doses you will need.
- Unused flu vaccine from the 2002-2003 season will expire on June 30, 2003. Please remember to return any **unopened vials** to Public Health. Consult your VFC Provider Manual for instructions. Remember to discard the Influenza VIS from previous years. To access the new VIS go to: <http://www.cdc.gov/nip/publications/VIS/#flu>

How Much Did You Bench?

May 31st was the last day for the 2003 Benchmarking process. Please collect the completed forms and mail them to:

Washington State Department of Health
Immunization Program
PO Box 47843
Olympia WA 98599-7843

You should have received a postage-paid envelope for your returns. If you have a large number of benchmarking forms, the envelope can be taped securely to a larger envelope or even a box to save you the mailing costs. Call (206) 296-4774 if you need another postage-paid envelope.

Refrigerator Shopping Guide

Are you in the market for a new vaccine refrigerator? Public Health's VFC Program can provide you with information from *Consumer Reports* on refrigerator/freezer quality ratings and prices. Please call Ricky Robles at (206) 296-4774 or email him at richard.robles@metrokc.gov

CHILD PROFILE IMMUNIZATION REGISTRY: WHY HAVE A REGISTRY AND WHO BENEFITS?

(This article is the second of three articles on the CHILD Profile Immunization Registry and discusses the benefits from participating in the registry. The first focused on a description of CHILD Profile.)

Immunization registries have become an important part of public health infrastructure in all 50 states. CDC's *Healthy People 2010* includes an objective that all children from birth to age six be enrolled in a fully functional immunization registry. The CHILD Profile Immunization Registry gathers data from Washington State birth records to meet this goal. The goal set for Washington State for 2006 is that 95% of children from birth to six years of age and 95% of their health care providers be enrolled in the CHILD Profile Immunization Registry.

Public providers were approached first to enroll in CHILD Profile. Currently, 81% of public providers (public health centers, community health centers and tribal clinics) statewide are enrolled in the registry and sharing data in the registry. To meet the CDC standard for immunization registries and offer a database with full impact, private providers also need to enroll. Statewide, 12% of all private providers have joined the Immunization Registry.

Who benefits from the Registry? The Immunization Registry stores immunization records, helps eliminate duplication of immunizations, and benefits children enrolled and the community at-large by facilitating complete immunization coverage. Additionally, CHILD Profile offers health care providers the option to:

- access immunization records for children who have moved or changed providers
- receive recommendations of immunizations due at each visit
- receive updates and alerts on vaccines
- consolidate immunization information and add new records
- identify children who need or have missed shots
- print immunization records for child care, school and camp
- generate reports, including individual immunization records and clinic immunization assessments

What about privacy and HIPAA? CHILD Profile meets all HIPAA requirements. CHILD Profile has a specific statement for providers, which explains how participation in the immunization registry relates to HIPAA and RCW 70.02, Washington's Health Care Information Access and Disclosure Act. Call or email the Help Desk to request your free copy. *CHILD Profile is a secure and permanent record accessible only to health care providers who have registered to participate.*

For more information or to register, contact the CHILD Profile Help Desk at (800) 325-5599 or (206) 205-4141 or email cphelpdesk@metrokc.gov

VIS (VACCINE INFORMATION STATEMENTS) AND INFORMED CONSENT

Vaccine Information Statements (VISs) are information sheets produced by the Centers for Disease Control and Prevention (CDC) that explain to vaccine recipients, their parents, or their legal representatives both the benefits and risks of a vaccine.

Federal law requires that VISs be handed out whenever (before each dose) vaccinations are given.

While signature for consent of vaccine administration is no longer required, providers are **required** to document informed consent. This means that providers must document in the patient's permanent record that the patient's parent/guardian has **received** the current VIS for each vaccine, **each time** it is given. While it is convenient to have the VIS laminated for easy use in an office, it is expected that individual copies be sent home with the patient.

The Vaccine Administration Record (rev 03/01), developed by Washington State DOH, is a convenient option for documenting informed consent and the other required documentation related to vaccine administration. To order copies, fax the DOH Immunization Program Warehouse at (360) 586-3890.

Note that CDC recently changed the web address for the National Vaccine Injury Compensation Program (VICP) to www.hrsa.gov/osp/vicp on the VIS for DTaP, PCV7, IPV, Hib, hepatitis B, and varicella. Because CDC did not change the issue date of these VISs, **it is not necessary to replace the VIS you are currently using.** You can download these from www.immunize.org or www.cdc.gov/nip

REPORTING INVASIVE PNEUMOCOCCAL DISEASE AMONG VACCINEES

Health care providers are encouraged to report invasive pneumococcal disease occurring in children less than 5 years old who have received one or more doses of pneumococcal conjugate vaccine to CDC. Providers can send these reports through Public Health-Seattle & King County. CDC is investigating situations in which invasive pneumococcal disease occurs despite vaccination. If pneumococcal isolates are available from vaccinated children, CDC will perform serotyping to determine whether the strain is a type included in the vaccine. Additional information is available at www.cdc.gov/nip/diseases/pneumo/PCV-survrpts/default.htm

RECONSTITUTED MENOMUNE EXTENDED SHELF LIFE

Menomune-A/C/Y/W-135 by Aventis Pasteur has been approved for 35-days following reconstitution according to recent Food and Drug Administration approval.

Until now, health care providers had only 10 days to use reconstituted 10-dose vials. The vaccine's extended shelf life following reconstitution will allow providers more time to schedule meningococcal vaccinations for their patients. Revised in January 2003, the Menomune package insert reflects the new timeline for using reconstituted 10-dose vials of Menomune. Even if your package insert is dated before January 2003 and states that the product must be used within 10 days of reconstitution, the new 35-day period applies. It is important to note the extended time frame for using reconstituted Menomune applies **only** to 10-dose vials, not to single-dose vials.

Because of the current shortage of single-dose vials, Aventis Pasteur will refund providers for up to 5 doses of a reconstituted 10-dose vial that are not used within 35 days.

For further information, contact Aventis Pasteur at www.vaccineshoppe.com or call (800) 822-2463.

AAP RESPONDS TO ARTICLE CLAIMING THIMEROSAL AND AUTISM LINK

The AAP (American Academy of Pediatrics) has responded to a recently published article that suggests a connection between thimerosal in vaccines and autism rates. The AAP response begins with; "This paper (the Geier and Geier article) uses data from the Vaccine Adverse Event Reporting System (VAERS) inappropriately and contains numerous conceptual and scientific flaws, omissions of fact, inaccuracies, and misstatements". To access the AAP response go to: <http://www.aap.org/profed/thimaut-may03.htm>

To access the Geier and Geier article (*Journal of American Physicians and Surgeons*, vol. 8, no 1, spring 2003) <http://www.jpands.org/vol8no1/geier.pdf>

IMMUNIZATION RESOURCES

Provider's Guide: Helping Parents Who Question Vaccines

Visit <http://www.cdc.gov/nip/vacsafe/parents-question-vacc-hcp.htm> to learn some practical tips on how to respond to parents who question the need for or safety of childhood vaccines in order to assist parents in making fully informed immunization decisions. Another good resource is "Plain Talk About Childhood Immunizations," available free from the Washington State Department of Health Materials Warehouse (www.immunematerials@doh.wa.gov).

Correction to *Vac Scene*, March/April 2003 Issue

The web site to access the 2003 Childhood and Adolescent Immunization Schedule was incorrectly printed in the last *Vac Scene*. The correct web site for accessing the 2003 schedule, and the newly created catch-up schedule, is www.cdc.gov/nip/recs/child-schedule.htm
We apologize for any inconvenience caused by this error.