Welcome to the National Indigenous Immunisation message stick (NIIMS) August 2013

A vaccine preventable diseases newsletter for health services

What’s new in Indigenous immunisation nationally?

**Combined *Haemophilus influenzae* type b and meningococcal C (Hib-MenC) vaccine**

From 1 July 2013, a combined vaccine for *Haemophilus influenzae* type b and meningococcal C (Hib-MenC) was added to the National Immunisation Program (NIP) schedule.

The combined bivalent Hib-MenC vaccine will be given to children at the 12-month schedule point, and replaces the previous separate monovalent doses of *Haemophilus influenzae* type b and meningococcal C. The addition of this combined vaccine reduces the number of injections needed at the 12-month schedule point from three to two.

**Combined measles, mumps, rubella and varicella vaccine**

From 1 July 2013, a combined measles, mumps, rubella, varicella (MMRV) vaccine for children aged 18 months has been added to the NIP schedule.

The combined MMRV vaccine has replaced the monovalent varicella vaccine (for chickenpox) currently given at 18 months and replaces the second dose of measles, mumps and rubella (MMR) vaccine currently scheduled for 4-year olds. This will reduce by one the total number of injections currently provided as part of the NIP. Children will be more fully protected against measles, mumps and rubella 2.5 years earlier than under the previous schedule.

Children who have already received their 18-month-old varicella vaccine (for chickenpox) will still be immunised for measles, mumps and rubella (MMR) at 4 years of age. Information resources including an immunisation provider booklet, A3 posters and parent brochure can be accessed or ordered from [http://immunise.health.gov.au/internet/immunise/publishing.nsf/Content/IT0169-cnt](http://immunise.health.gov.au/internet/immunise/publishing.nsf/Content/IT0169-cnt)
Definition of ‘Fully immunised’

From 1 July 2013, the definition of ‘fully immunised’ was expanded to include the meningococcal C, pneumococcal conjugate and varicella vaccines, which are currently listed on the National Immunisation Program Schedule but have not previously been an eligibility requirement for Family Tax Benefit Part A Supplement payments. Data on the Australian Childhood Immunisation Register (ACIR) will be used to assess children’s immunisation status, so it is important that immunisation providers ensure the child’s ACIR record is up to date to facilitate payment for families.


Human papillomavirus (HPV) and the National HPV Vaccination Program

A new comic book, HPV and Me – My Health, My Future has been released to tell young Aboriginal and Torres Strait Islander people more about human papillomavirus (HPV) and the National HPV Vaccination Program. The National HPV Vaccination Program is a free school-based program to protect males and females aged 12–13 years against a range of cancers and disease caused by HPV. Males aged 14–15 years are also eligible for the free vaccine until the end of 2014.

The comic focuses on the lives of two teenagers, Wes and Bianca, as they find out more about the HPV vaccination by talking to their parents and teachers. From 1 July 2013, audio translations with information about the National HPV Vaccination Program have been available in 20 Aboriginal and Torres Strait Islander languages.

To find out more about HPV and the HPV vaccine, or to order a free copy of the comic or download the audio translations, visit australia.gov.au/hpv
Myths and Realities - responding to arguments against vaccination

The latest (5th) edition of *Myths and Realities – responding to arguments against vaccination* (‘Myths and Realities’) was recently updated by the National Centre for Immunisation Research and Surveillance (NCIRS) to incorporate new vaccines and current evidence about vaccination, including notification rates for vaccine preventable diseases.

Health practitioners play an important role in helping people make informed decisions about vaccination. For those who are hesitant about immunisation, these decisions are often made after discussions with several health practitioners. This booklet provides immunisation providers with the facts associated with common concerns and outlines the public health benefits of immunisation for individuals.

As well as a guide for health professionals, Myths and Realities can be a useful resource for any individuals seeking additional information to make an informed decision about immunisation.

The 5th edition of Myths and Realities was launched by the Minister for Health, The Hon Tanya Plibersek MP on Sunday, 26 May 2013 and hard copies were ready for distribution from early July. Copies can be accessed or ordered from [http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/uci-myths-guideprov](http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/uci-myths-guideprov)

Aboriginal Immunisation Promotion in NSW

**NSW Immunisation Awareness Campaign**

NSW Health launched the ‘Save the Date to Vaccinate’ campaign to remind parents about the importance of vaccinating children on time and provides a range of handy tools and resources to make this easier, including a new smartphone App and campaign website ([www.immunisation.health.nsw.gov.au/](http://www.immunisation.health.nsw.gov.au/)). The campaign includes radio ads, posters and a brochure targeting the Aboriginal and Torres Strait Islander community.

**Aboriginal Immunisation Health Worker Program**

NSW Health is funding a 3-year pilot program to employ Aboriginal Health Workers in Local Health Districts (LHDs) to work collaboratively with existing services to promote timely vaccination through targeted interventions. Program impact will be evaluated over the life of the program using specific Key Performance Indicators.
Research activity

**QIMR starts human trials of Strep A vaccine in Queensland**

The Queensland Institute of Medical Research (QIMR) has begun human trials of a vaccine for Streptococcus A, the germ that causes rheumatic fever.

The vaccine has been developed over more than 20 years by Professor Michael Good from Griffith University's Institute for Glycomics and scientists at QIMR.

The head of QIMR's infectious diseases program, Professor James McCarthy, will lead the year-long trial of 20 healthy adults in Brisbane, at the co-owned and co-located clinical trial facility, Q-Pharm.

Repeated attacks of rheumatic fever can cause a build-up of damage to the heart valves, known as rheumatic heart disease. It's largely a disease of poverty, and a major issue in northern Australia's remote Indigenous communities.

'Infection rates in remote Indigenous communities in Queensland are among the highest in the world. Nine out of every ten people affected in Queensland are Indigenous,' Professor Good said.

The research was funded by the National Heart Foundation, the National Institutes of Health, the Co-operative Research Centre for Vaccine Technology, the Perpetual Foundation and the Prince Charles Hospital Foundation. To learn more go to the following link:


**Centre of Research Excellence (CRE) in Population Health Research**

The CRE has extensive experience in Indigenous vaccinology research and is developing methods to extend the use of administrative data sets. Research in this theme will focus on methods to improve Indigenous identifiers, means to monitor program effectiveness, methods to better target vaccination programs and models of delivering immunisation programs to Aboriginal and Torres Strait Islander people, and research into improving vaccine delivery, coverage and timeliness.


Projects include:

- Immunisation issues among disadvantaged Aboriginal men (Principal Research Person M. Williams)
- Developing an understanding of how two Aboriginal communities see and experience immunisation during pregnancy (MPhil student A. Creighton)

- Molecular typing of the *Haemophilus influenzae* strains following the study of incidence of *Haemophilus influenzae* type a (Hia) disease in Indigenous Australians in the pre- and post-immunisation eras (Chief Investigator R. Menzies)

- Aboriginal Medical Services contribution to Indigenous childhood immunisation in New South Wales and evaluation of reporting of the immunisations to the Australian Childhood Immunisation Register (Principal Research Person T. Joseph)

- Linkage of the Australian Childhood Immunisation Register (ACIR) and state-based registers to evaluate and inform Australia’s immunisation program (Principal Research Person H. Gidding)

- Impact of Australia’s HPV vaccination program on prevalence of HPV genotypes in Aboriginal and Torres Strait Islander women attending for Pap testing (Principal Research Person B. Liu)

- Identification of culturally sensitive approaches to improve immunisation coverage and timeliness among Aboriginal and Torres Strait Islander children and their families (CRE Fellow J. Royle)

**Publications of interest**

**A new resource for Indigenous health workers**

A new resource to support Aboriginal and Torres Strait Islander Health Workers. *Aboriginal and Torres Strait Islander Health Workers and Blood-Borne Viruses* is a practical guide to HIV, hepatitis B and hepatitis C, the three main blood-borne viruses (BBVs). It is available at the following link: http://www.ashm.org.au/images/publications/booklets/PBB_ATSI_FINAL_WEB.pdf

Indigenous Health Workers are essential in the provision of ongoing education in their communities to raise awareness of BBVs, and they also perform vital work in ensuring mainstream healthcare workers deliver their services with respect to cultural sensitivities.

This new booklet, endorsed by peak Indigenous health organisations National Aboriginal Community Controlled Health Organisation and National Aboriginal and Torres Strait Islander Health Worker Association (NATSIWHA), provides an overview of the viruses, as well as transmission routes, testing procedures and management options. It includes a comprehensive table outlining how Indigenous Health Workers can deliver healthcare prevention and promotion activities.
Healthy for Life – Aboriginal Community Controlled Health Services: report card
Australian Institute of Health and Welfare, Catalogue Number IHW 97 (2013)

The Healthy for Life (HfL) report card provides information against Essential Indicators from the HfL Program for Aboriginal Community Controlled Health Services (ACCHS) that have participated in the program since 2007, and the 2010–2011 Office of Aboriginal and Torres Strait Islander Health (OATSIH) Services Reporting data for ACCHS. The report is available from the link below: http://www.aihw.gov.au/publication-detail/?id=60129543590

Events of interest

Save the date:


The Telethon Institute for Child Health Research will be hosting this national workshop in November at the Esplanade Hotel in Fremantle, in conjunction with the NHMRC CRE in Immunisation in Under Studied and Special Risk Populations and the National Centre for Immunisation Research and Surveillance.

The purpose is to bring together vaccine researchers with policymakers, service providers and interested stakeholders to present recent and current work in this field, to discuss research priorities, and to foster collaboration and research translation.

Registrations are open by going to http://www.trybooking.com/58237
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