# Vaccinations in practice

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## DZIENNIK URZĘDOWY

MINISTRA ZDROWIA

Warszawa, dnia 16 października 2019 r.

Poz. 87

Elektronicznie podpisany prze Marcin Ciężki Data: 16.10.2019 14:34:49

#### KOMUNIKAT GŁÓWNEGO INSPEKTORA SANITARNEGO

z dnia 16 października 2019 r.

w sprawie Programu Szczepień Ochronnych na rok 2020

Na podstawie art. 17 ust. 11 ustawy z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakażnych u ludzi (Dz. U. z 2019 r. poz. 1239 i 1495) ogłasza się Program Szczepień Ochronnych na rok 2020, który stanowi załącznik do niniejszego komunikatu.

Główny Inspektor Sanitarny

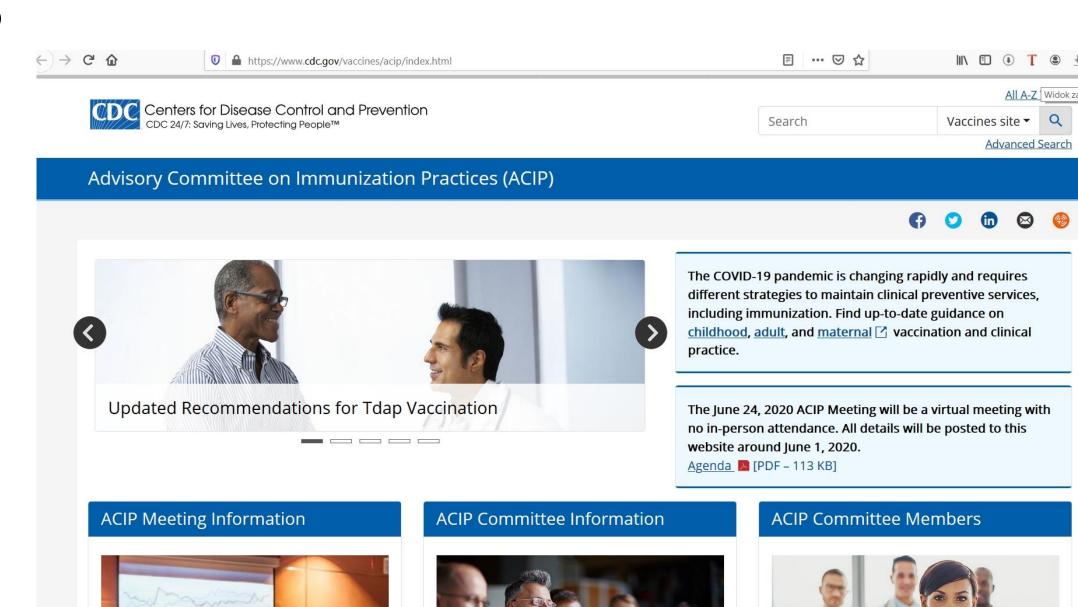
Jarosław Pinkas





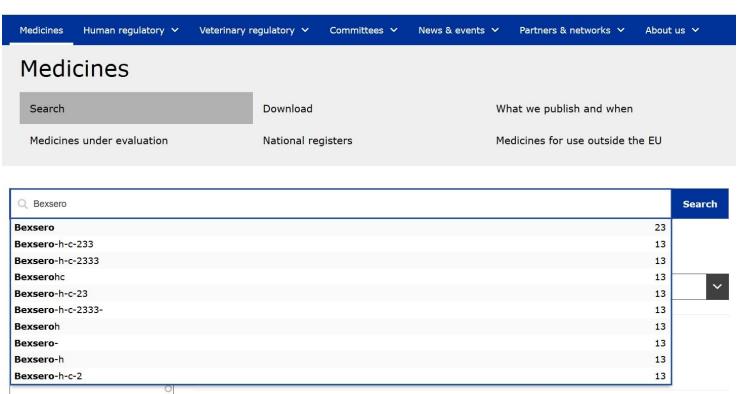
Immunisation and vaccines

## **ACIP**



# European Medicines Agency





# European Medicines Agency - EPAR

- EMA publishes detailed information on the medicines assessed by the Committee for Medicinal Products for Human Use (<u>CHMP</u>) and Committee for Medicinal Products for Veterinary Use (<u>CVMP</u>)
- The main vehicle for this information is known as a European public assessment report

# Summary of product charecteristics

#### Bexsero Meningococcal Group B vaccine for injection in pre-filled syringe

Summary of Product Characteristics Updated 15-May-2020 | GlaxoSmithKline UK

#### 1. Name of the medicinal product

Bexsero suspension for injection in pre-filled syringe

Meningococcal group B Vaccine (rDNA, component, adsorbed)

#### 2. Qualitative and quantitative composition

One dose (0.5 ml) contains:

Recombinant *Neisseria meningitidis* group B NHBA fusion protein <sup>1, 2, 3</sup>

50 micrograms

Recombinant Neisseria meningitidis group B NadA protein 1, 2, 3

50 micrograms

Recombinant Neisseria meningitidis group B fHbp fusion protein 1, 2, 3

50 micrograms

Outer membrane vesicles (OMV) from *Neisseria meningitidis* group B strain NZ98/254 measured 25 micrograms as amount of total protein containing the PorA P1.4 <sup>2</sup>

For the full list of excipients, see section 6.1.

#### 3. Pharmaceutical form

Suspension for injection.

White opalescent liquid suspension.

#### 4. Clinical particulars

<sup>&</sup>lt;sup>1</sup> produced in *E. coli* cells by recombinant DNA technology

<sup>&</sup>lt;sup>2</sup> adsorbed on aluminium hydroxide (0.5 mg Al<sup>3+</sup>)

<sup>&</sup>lt;sup>3</sup> NHBA (Neisserial Heparin Binding Antigen), NadA (Neisseria adhesin A), fHbp (factor H binding protein)

# EPAR – check for changes!



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### Bexsero Meningococcal Group B vaccine for injection in pre-filled syringe

GlaxoSmithKline UK contact details

Active ingredient

meningococcal group-B vaccine (rDNA, component, adsorbed)

**Legal Category** 

POM: Prescription only medicine

A Report Side Effect

Related Medicines

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**Patient Leaflet** 

Live Chat

This information is intended for use by health professionals

1. Name of the medicinal product

Bexsero suspension for injection in pre-filled syringe

Meningococcal group B Vaccine (rDNA\_component\_adsorbed)

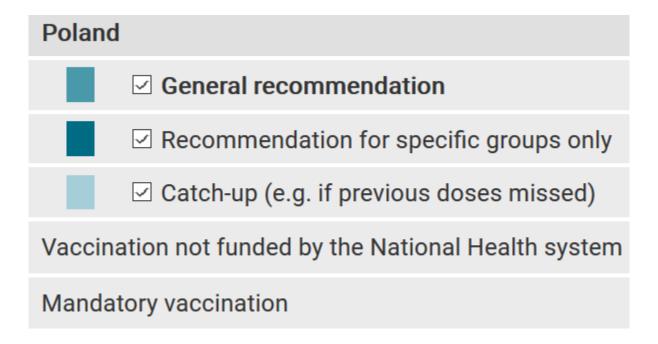
Last undated on emc:

15 May 2020





## Vaccination schedule



## One visit – one vaccination? Check!

#### 4.5 Interaction with other medicinal products and other forms of interaction

#### Use with other vaccines

Bexsero can be given concomitantly with any of the following vaccine antigens, either as monovalent or as combination vaccines: diphtheria, tetanus, acellular pertussis, *Haemophilus influenzae* type b, inactivated poliomyelitis, hepatitis B, heptavalent pneumococcal conjugate, measles, mumps, rubella, varicella, and meningococcal groups A, C, W, Y conjugate.

Clinical studies demonstrated that the immune responses of the co-administered routine vaccines were unaffected by concomitant administration of Bexsero, based on non-inferior antibody response rates to the routine vaccines given alone. Inconsistent results were seen across studies for responses to inactivated poliovirus type 2 and pneumococcal conjugate serotype 6B and lower antibody titers to the pertussis pertactin antigen were also noted, but these data do not suggest clinically significant interference.

Due to an increased risk of fever, tenderness at the injection site, change in eating habits and irritability when Bexsero was coadministered with the above vaccines, separate vaccinations can be considered when possible. Prophylactic use of paracetamol reduces the incidence and severity of fever without affecting the immunogenicity of either Bexsero or routine vaccines. The effect of antipyretics other than paracetamol on the immune response has not been studied.

Concomitant administration of Bexsero with vaccines other than those mentioned above has not been studied.

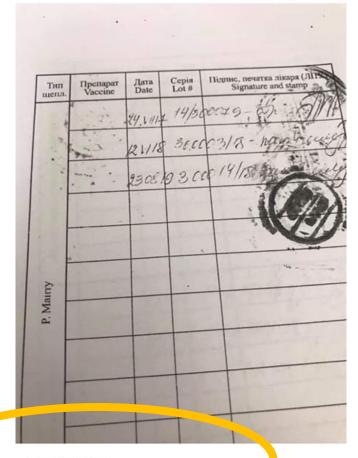
When given concomitantly with other vaccines Bexsero must be administered at separate injection sites (see section 4.2).







Proszę o rozszyfrowanie przeciw czemu jest to wpisane w ukraińską książeczkę szczepienie...



Komentarze: 17

# Types of vaccines:

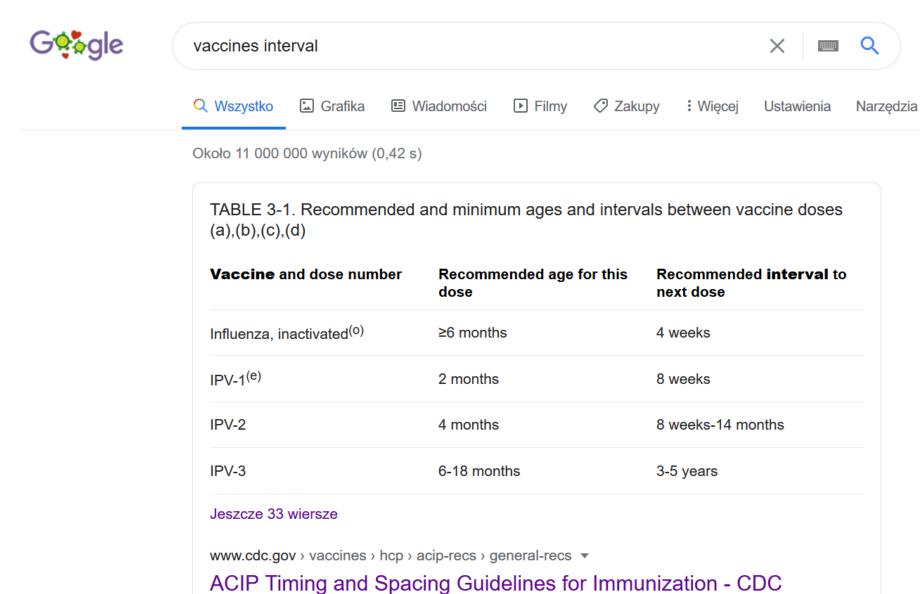
- Live-attenuated vaccines.
- Inactivated vaccines.
- Subunit, recombinant, polysaccharide, and conjugate vaccines.
- Toxoid vaccines.

killed

## Intervals between different vaccines

- attenuated ← attenuated
  - On the same day or >28 days
  - If two live vaccines are not given on the same day and are given less than four weeks apart, the second vaccine should be repeated
- Killed → killed no interval required

## Intervals between vaccine doses



## Intervals between vaccine doses

- Doses of any vaccine administered ≥5 days earlier than the minimum interval or age should not be counted as valid doses and should be repeated as age appropriate. The repeat dose should be spaced after the invalid dose by the recommended minimum interval
- For example, if the first and second doses of *Haemophilus influenzae* type b (Hib) were administered only 14 days apart, the second dose would be invalid and need to be repeated because the minimum interval from dose 1 to dose 2 is 4 weeks. The repeat dose should be administered ≥4 weeks after the invalid dose (in this case, the second). The repeat dose is counted as the valid second dose.

## Dea









Odstępy czasowe między kolejnymi dawkami tej samej szczepionki



Odstępy czasowe między kolejnymi dawkami tej samej szczepionki

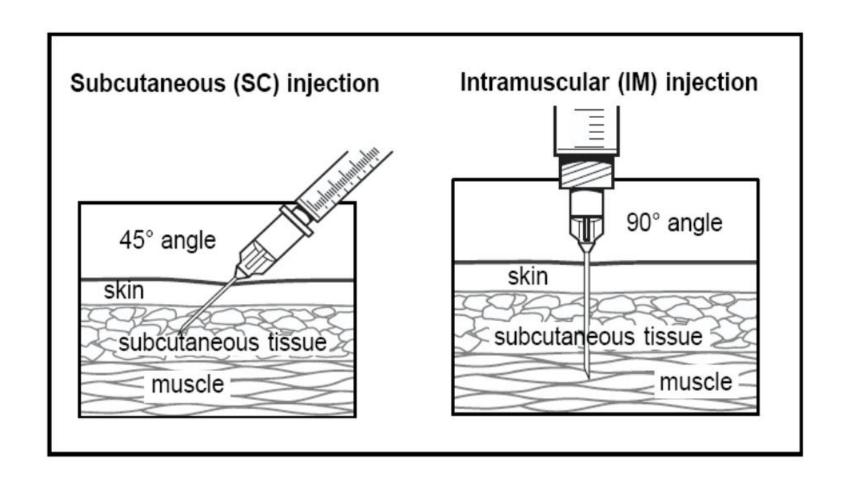
Tabela 1. Zalecany optymalny i minimalny wiek oraz zalecane i minimalne odstępy czasu pomiędzy kolejnymi dawkami rutynowo stosowanych szczepionek<sup>a-c</sup>

Szczepionka i numer dawki	Zalecany wiek dla podania tej dawki	Minimalny wiek dla podania tej dawki	Zalecany odstęp do podania kolejnej dawki	Minimalny odstęp do podania kolejnej dawki
HepB-1 <sup>c</sup>	w ciągu 24 h po urodzeniu	w ciągu 24 h po urodzeniu	1–4 miesięcy	4 tygodnie
НерВ-2	1-2 miesięcy	4 tygodnie	2-17 miesięcy	8 tygodni
HepB-3 <sup>d</sup>	6-18 miesięcy	24 tygodnie	=-	-
(DTPa, DTPw)-1 <sup>c</sup>	2 miesiące	6 tygodni	2 miesiące	4 tygodnie
(DTPa, DTPw)-2	4 miesiące	10 tygodni	2 miesiące	4 tygodnie
(DTPa, DTPw)-3	6 miesięcy	14 tygodni	6–12 miesięcy <sup>e</sup>	6 miesięcy <sup>e,f</sup>
(DTPa, DTPw)-4	15-18 miesięcy	12 miesięcy	3-4 lata	6 miesięcy <sup>e</sup>
DTPa-5	4-6 lat	4 lata	_	-
Hib-1 <sup>c,g</sup>	2 miesiące	6 tygodni	2 miesiące	4 tygodnie
Hib-2	4 miesiące	10 tygodni	2 miesiące	4 tygodnie
Hib-3h	6 miesięcy	14 tygodni	6-9 miesięcye	8 tygodni
Hib-4	12-18 miesięcy	12 miesięcy	= .	-
IPV-1 <sup>c</sup>	3-4 miesięcy	6 tygodni	2 miesiące	4 tygodnie
IPV-2	5-6 miesięcy	10 tygodni	2-14 miesięcy	4 tygodnie
IPV-3	16-18 miesięcy	14 tygodni	3-5 lat	4 tygodnie
IPV-4	4-6 lat	18 tygodni	-	-

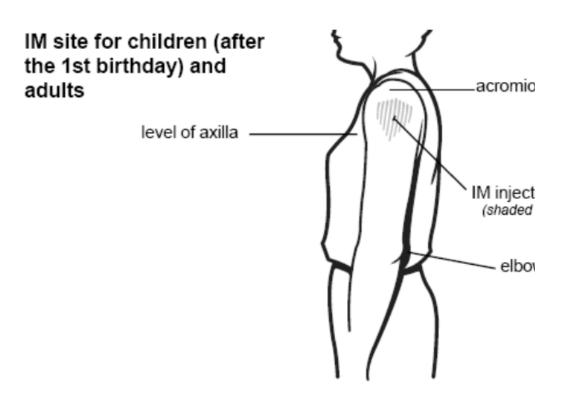
TABLE 6-1. Dose and route of administration for selected vaccines

Vaccine	Dose	Route
DTaP, DT, Td, Tdap	0.5 mL	IM
DTaP-HepB-IPV	0.5 mL	IM
DTaP/Hib	0.5 mL	IM
DTaP-IPV/Hib	0.5 mL	IM
DTaP-IPV	0.5 mL	IM
Hib	0.5 mL	IM
Hib-MenCY	0.5 mL	IM
НерА	≤18 years: 0.5 mL ≥19 years: 1.0 mL	IM
НерВ	≤19 years: 0.5 mL <sup>(a)</sup> ≥20 years: 1.0 mL	IM
НерА-НерВ	≥18 years: 1.0 mL	IM
LAIV	0.2 mL divided dose between nares	Intranasal spray

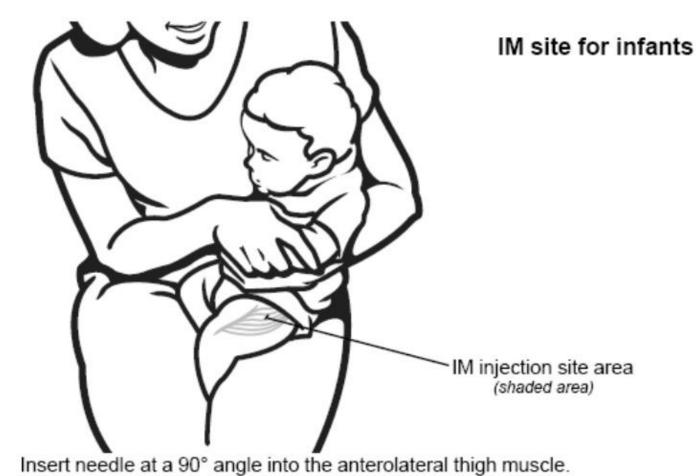
# Injection types



# Intramuscular injection



Insert needle at a 90° angle into thickest portion of deltoid muscle—at the level of the axilla and below the acromion.

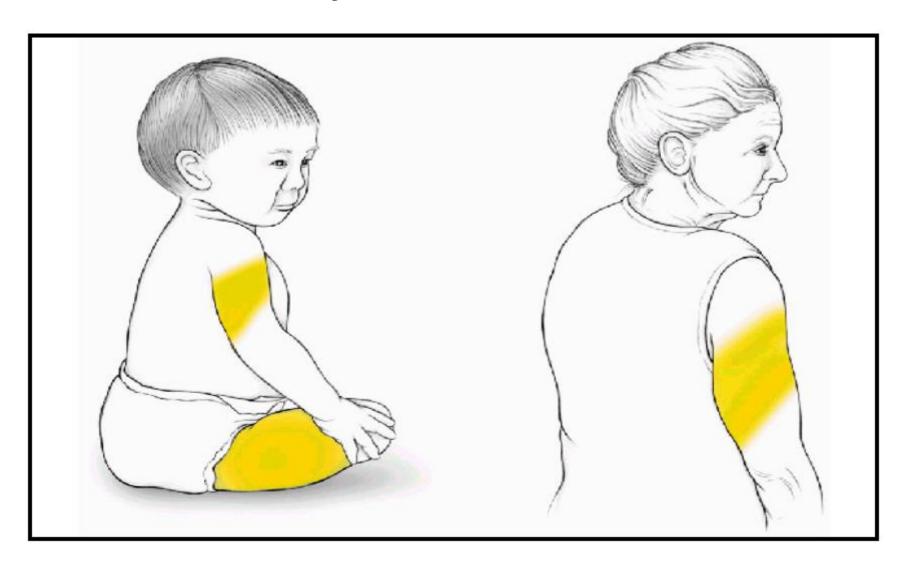


# Intramuscular injection

TABLE 6-2. Needle length and injection site of IM injections for children aged ≤18 years (by age) and adults aged ≥19 years (by sex and weight)

Age group	Needle length	Injection site			
Children (birth-18 years)					
Neonates <sup>(a)</sup>	5/8 inch (16 mm) <sup>(b)</sup>	Anterolateral thigh			
Infants, 1-12 months	1 inch (25 mm)	Anterolateral thigh			
Toddlers, 1-2 years	1-1.25 inch (25-32 mm)	Anterolateral thigh <sup>(c)</sup>			
	5/8 <sup>(b)</sup> -1 inch (16-25 mm)	Deltoid muscle of arm			
Children, 3-10 years	5/8 <sup>(b)</sup> -1 inch (16-25 mm)	Deltoid muscle of arm <sup>(c)</sup>			
	1-1.25 inches (25-32 mm)	Anterolateral thigh			
Children, 11-18 years	5/8 <sup>(b)</sup> -1 inch (16-25 mm)	Deltoid muscle of arm <sup>(c)</sup>			
	1-1.5 inches (25-38 mm)	Anterolateral thigh			

# Subcutaneous injection



## Multiple injections?

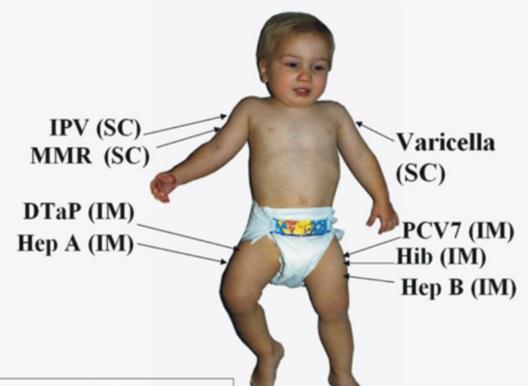
- DTP
- menB
- menACWY
- PCV13
- hepB

?

## Giving All the Doses ≥ 12 months

One way to give 8 doses at one visit

- Needle Lengths IM=1 inch to 1.5 inches SC=5/8 inch
- Separate injection sites by 1-2 inches
- Anterolateral thigh is the preferred site for multiple IM injections
- Deltoid (upper arm) is an option for IM in children ≥18 mo with adequate muscle mass





# Time to practice!