

BCG catch up and referral form

Attached to this bulletin you should find a copy of the current BCG Eligibility Assessment and Referral Form. This may be available electronically in the near future from the BPAC e-referral system.

Although there is no formal catch up programme, and none recommended by the Ministry when BCG became available late last year, it is salient to note that there have been approximately 750 referrals (650 done, 100 waiting) in the last 6 months. That is three times the monthly rate prior to the interruption in supply. At least for one disease parents are really keen to get an immunisation for their eligible children!

Influenza vaccinations

This year's influenza immunisation programme will begin from 1 April 2019. **In contrast to previous years, claims for funded influenza vaccines given before 1 April will not be accepted.** The Flu Kit is now available online at www.influenza.org.nz with hard copies and other printed resources distributed in the coming weeks. As for 2018, there are two funded quadrivalent influenza vaccines for 2019:

- Inluvac Tetra – for adults and children 3 years and over
- Fluarix Tetra – for children under 3 years i.e. 6 to 35 months. Limited quantities of Fluarix Tetra are available – please reserve this for children aged 6 to 35 months old.

While we expect Inluvac Tetra will be available to order in time for vaccination in the first week of April, Fluarix Tetra may arrive later. The ministry will advise once they have further information. Please do not plan clinics for young children until these supplies have arrived.

During 2017 and 2018, Māori and Asian immunisation rates for those aged 65 and over were notably lower than for other ethnic groups. Please ensure all your 65 and over populations are offered annual influenza vaccination and that these are all recorded on the NIR.

Please remember to recall your patients with Rheumatic heart disease, as they are eligible for this annually. Please refer to <https://www.heartfoundation.org.nz> for further information.

Measles (again!)

You will probably be aware that there is a risk of continuing to import measles when travellers return to NZ, and this often leads to local spread. You will also have heard about the current rapid escalation of cases in Canterbury (30 so far) and the immunisation programme that the PHO there is implementing.

The Ministry of Health has also promulgated three recent National Health Advisory notices:

1. 28 February: MMR from 6 months onwards was recommended as a travel vaccine for all travellers with no documented immunity or without 2 MMR immunisations aged under 50 years.
2. 8 March: reminded that people working in health care facilities should be protected against measles, i.e. immunised.
3. 15 March: clarified issues with MMR availability and priority, including confirming that regions outside of Canterbury should conform to the national immunisation schedule.

We sum up the best protection against measles for 1-50 year olds as "Can't show, Don't know, Better Go!". Meaning if you:

- *can't show* you are immune (IgG positive, previous history of doctor diagnosed measles) or fully immunised (have had **two** doses of MMR/measles vaccine), then you
- *don't know* that you are immune, so you had
- *better go* to your GP to get caught up (one or two MMR vaccines four weeks apart).

Remember, catch up is free and can be claimed as catch up immunisation.

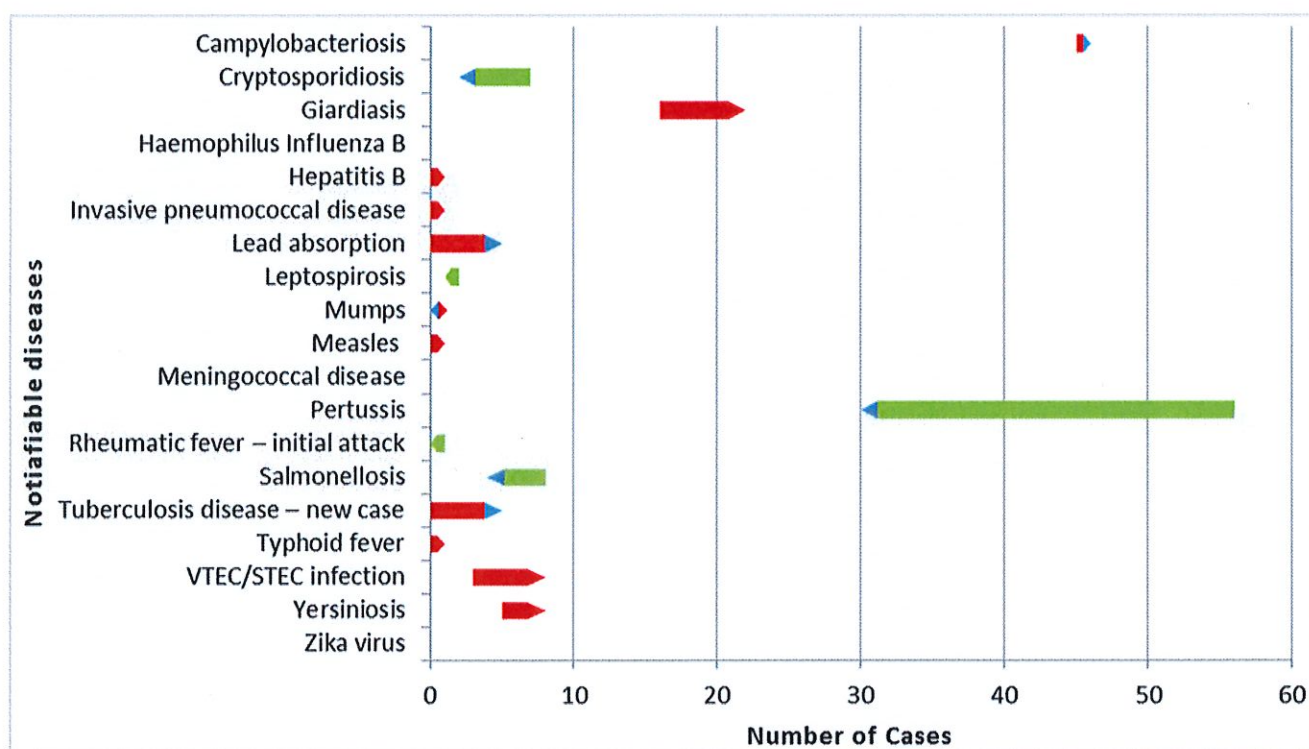
There is very good advice in a "hot topic" on the IMAC (www.immune.org.nz) website.

The good news (at the time of writing) is that it has now been 5 weeks since the last confirmed case in the Waikato region was infectious, but with the continued risk of exposure from other parts of NZ or people that got it overseas, vigilance is required! A flowchart and notification details are in the "For health professionals" section under "notifiable and communicable diseases" at: www.waikatodhb.health.nz.

Communicable diseases notified February 2019

Disease name	Feb 2018	Feb 2019	YTD	Disease name	Feb 2018	Feb 2019	YTD
Campylobacteriosis	45	46	134	Malaria	1	0	0
Cryptosporidiosis	7	2	4	Measles	0	1	12
Dengue fever	3	3	4	Mumps	0	0	1
Gastroenteritis – unknown cause	1	0	0	Pertussis	56	30	57
Gastroenteritis – foodborne intoxication	0	9	18	Rheumatic fever - initial attack	1	0	1
Giardiasis	16	22	30	Rheumatic fever – recurrent attack	0	1	1
Hepatitis A	2	0	1	Salmonellosis	8	4	19
Hepatitis B	0	1	1	Shigellosis	4	1	3
Invasive pneumococcal disease	0	1	3	Tuberculosis disease - new case	0	5	7
Lead absorption	0	5	5	Typhoid fever	0	1	1
Latent Tuberculosis	4	1	2	VTEC/STEC infection	3	8	17
Leptospirosis	2	1	2	Yersiniosis	5	8	11

Figure 1: Notifiable diseases (selected), February 2019 compared to February 2018, Waikato DHB



Medical Officers of Health: Felicity Dumble -- Richard Wall – Richard Vipond – Richard Hoskins

After hours:

MOoH 021 359 650

HPO 021 999 521

If there is no answer, please contact Waikato Hospital's switchboard 07 839 8899 and ask for the on-call MOoH.

During office hours:

Population Health (MOoH or HPO) (07) 838 2569

Notifications 07 838 2569 ext. 22065 or 22020

Notifications outside Hamilton: 0800 800 977

Fax: 07 838 2382 Email: notifiablediseases@waikatodhb.health.nz



Patient Label	
Name: _____	
NHI: _____	DOB: _____ <small>dd/mm/yy</small>
Address: _____	

BCG Eligibility Assessment and Referral Form

Age: _____ Sex: M / F _____ GP: _____
 Ethnicity: _____ Interpreter required? Yes No Language: _____

Caregiver's details

Name: _____ Phone number: _____
 Relationship to child: _____

Answer ALL questions and please tick (✓) either Yes or No to each

Babies or children less than five years of age are eligible for BCG vaccination if they meet the following criteria:

- they will be living in a house or family/whānau with a person with either current TB or a history of TB Yes No
- they have one or both parents or household members or carers who, within the last 5 years, lived for a period of 6 months or longer in countries with a TB rate \geq 40 per 100,000 Yes No
- during their first 5 years they will be living for 3 months or longer in a country with a TB rate \geq 40 per 100,000 Yes No

As a general indication, the following global areas have rates \geq 40 per 100,000:

- most of Africa
- much of South America
- Russia and the former Soviet states
- Indian subcontinent
- China, including Hong Kong, Taiwan
- South East Asia
- Some parts of the Pacific (Kiribati and Papua New Guinea have consistently high rates; (ref: Immunisation Handbook 2017)

If one or more YES answers are ticked, this baby is at High Risk of being exposed to TB. The BCG Vaccination is therefore recommended for this baby.

To enable us to confirm receipt of your referral

Referrers name: _____
 Organisation: _____
 Phone contact: _____
 Email: _____
 Fax: _____

Please COMPLETE this form and forward to:

Waikato Hospital internal fax: **Community Referral Centre: 22071**
Attention BCG Coordinator

Waikato Hospital external fax: **Community Referral Centre: 07 858 1071**
Attention BCG Coordinator

or email: communityreferralcentre@waikatodhb.health.nz