

PHPU Newsletter

Public Health Protection Unit
Telephone 0141 201 4917

e-mail: phpu@ggc.scot.nhs.uk
Fax 0141 201 4950

CMO update letters on vaccines 2015/16

Please note the recent CMO letters relating to current and new immunisation programmes

Seasonal Flu Programme 2015-16 [CMO\(2015\)12](#)

Childhood Flu Programme 2015-16 [CMO\(2015\)13](#)

Shingles (Herpes Zoster) Programme 2015-16 [CMO\(2015\)14](#)

Meningococcal ACWY (Men ACWY) Programme: University Freshers and Adolescents (14-18) [CMO\(2015\)10](#)

Introduction of Meningococcal Group B (Men B) Vaccination Programme in 2015-16 [CMO\(2015\)11](#)

Hepatitis A vaccine – supply problems

There are intermittent supply difficulties with some Hepatitis A vaccines so it should be prescribed generically to avoid delay.

The table below shows the vaccines that a pharmacy might supply under a generic prescription. Most are presented as a 0.5ml volume dose with the exception of Havrix® and Vaqta Adult® which are 1ml. Please note that not all the vaccines are licensed for children. Prescriptions for children should be clearly identified as such by adding, 'Please supply vaccine suitable for child age', and the SPC consulted. The NHSGGC Hep A PGD is available [online for reference only](#).

Adult	Children > 1year
Havrix® (1ml)	Havrix Junior®
Vaqta® (1ml)	Vaqta Paediatric®
Epaxal®	Epaxal®
Avaxim® (from 16yrs)	

Menitorix® and the risk of needlestick injury

Staff are reminded that Menitorix® may be supplied with either a luer slip or luer lok syringe (refer to the [SPC](#)). Both presentations have been in use for some time and care should be taken to avoid needlestick injury.

Immunisation-Update Seminar

Immunisation staff should note that all the immunisation- update seminars published in last month's newsletter are now fully booked. Due to demand there will be an additional seminar on Tuesday 25th August 1130-1400 at the David Lloyd Glasgow Renfrew. Please click on the link below to book a place:

<https://www.eventbrite.co.uk/e/immunisation-seminar-david-lloyd-renfrew-tickets-17916356304>

The seminars are targeted at primary care staff, midwifery and occupational health staff.

BCG appointments for babies

Please note that there is currently a 2-3 month waiting time for BCG for babies at the Public Health BCG Community Clinics in NHSGGC. Whilst trying to increase the numbers invited to any one clinic, the PHPU may also organise extra clinics to reduce the waiting time.

Children who fail to attend once are automatically reappointed but any child who fails to attend twice is not reappointed. In these cases the health visitor should contact the BCG appointment line 0141 201 4932 to arrange a further appointment. From September, the PHPU will notify the GP and HV, by letter, of any child who fails to attend twice.

Rise in HIV cases in people who inject drugs in Glasgow

There has been a rise in new HIV infections in this population group in Glasgow. There are, on average, 115 new cases of HIV a year in NHSGGC, the majority of which are sexually transmitted. The number of cases thought to be transmitted through injecting drug use averages around 10 new cases a year, but since January this year there have been 24 new cases exceeding the number for the whole of 2014.

It is important that staff and services who work with people who inject drugs:

1. Refresh the [key facts](#) about HIV

2. Understand Key HIV prevention messages:

- **The best way to avoid bloodborne viruses (BBV) such as HIV and hepatitis is not to inject drugs.** Foil for smoking heroin is now available from all community addiction teams to help facilitate alternatives to injecting.
- **If people are injecting – don't share equipment.** Use a new set of sterile injecting equipment for every injecting episode. This includes spoons, water and all other equipment used to prepare and inject drugs. Injecting equipment is available free at the services listed [here](#)
- **Always use a condom for sex.** Pharmacies and the Glasgow Drug Crisis Centre provide a range of free condoms. For more information click [here](#)
- **Get tested.** You can't tell by looking at someone if they have HIV or any other BBV. The only way to know is to get tested.

3. Encourage HIV testing

It is recommended that clinical colleagues in primary and secondary care offer an HIV test to all patients with a history of drug addiction, particularly injecting drug use, when they present for health care in these settings. As there is significant overlap in the routes of acquiring HIV, HCV and HBV, it may be beneficial to test for all three infections if the patient's status is not already known.

Staff who require further advice, information or support around HIV/BBV testing or related patient issues should contact the Sandyford STI Shared Care Support Service on 0141 211 8639.

4. Support diagnosed patients to attend specialist treatment and care services, assisting those who are not currently attending to re-engage and to re-refer them if required

World Hepatitis Day - 28th July 2015

World Hepatitis Day is celebrated on the 28th July each year and is a great opportunity to raise awareness of viral hepatitis among colleagues and patients. Over 14,000 have been diagnosed with hep C infection in NHSGGC. It is estimated that there are a further 14,000 undiagnosed infections. Untreated hep C can result in cirrhosis, liver cancer and liver failure. The good news is that new effective treatments are available. New treatments are increasingly well-tolerated and can cure hep C in over 90% of patients who complete a course.

For patients to benefit from clinical care, they need to be diagnosed. NHSGGC is working with Hepatitis Scotland to deliver a public-facing campaign with the message "Hep C: see it, treat it, beat it", encouraging people who have been at risk to access testing. In Scotland, hep C is mostly found among people who:

- have ever injected drugs
- have received medical or dental treatment in countries with a high prevalence of hep C and poor infection control
- have had a tattoo or piercing in settings with poor infection control
- in the UK, received a blood transfusion before 1991, or blood products before 1987

Historically, around 50% of people diagnosed with active hep C infection have become lost to follow-up in specialist care. These patients are at risk of developing serious liver disease and onward transmission. NHSGGC is supporting a national 'Re-engage hep C' campaign, to encourage patients to access specialist care and treatment.

Colleagues in Primary Care, Addiction services and Prisons are encouraged to discuss and offer diagnostic testing to any patients who may have been at risk. Clinicians are also asked to re-refer any patients previously diagnosed with active infection, who are not currently under specialist care.

For more information see the following sites (both going live on World Hepatitis Day, 28th July)

NHSGGC Viral Hepatitis MCN: www.hepnet.scot.nhs.uk

Hepatitis Scotland: <http://hepcscot.org>

If you would like to comment on any aspect of this newsletter please contact Marie Laurie on 0141 201 4917 or email marie.laurie@ggc.scot.nhs.uk