

# Flu 2013 - Q&As

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- Q1** When does the **seasonal** flu vaccination programme begin ?  
**A1** The programme officially begins on 1<sup>st</sup> October 2013 and runs to the end of the season (March 2014). Details are contained within the [CMO letter](#) of 20<sup>th</sup> July
- Q2** What about the risk groups; same as before ?  
**A2** Yes, the [same risk groups](#) but this year the programme has been extended to include all 2-3-year-olds (born between 02/09/2009 and 01/09/2011) and selected [primary school](#) children. This programme will extend to all children aged 2-17 years over the next few years
- Q3** Have parents of children in the 2-3-year-old cohort been informed ?  
**A3** A letter to parents will be sent out from 19<sup>th</sup> September onwards advising them to contact their practices
- Q4** Where are the details of the extended programme ?  
**A4** The details are set out in the [CMO letter](#) of 11<sup>th</sup> September
- Q5** How are the children to be invited for vaccination ?  
**A5** In mid-September, Child Health will send a list of eligible children to all GP practices and each practice will make its own arrangements ( see Q3)
- Q6** Which vaccine is being used in the extended programme ?  
**A6** [Fluenz](#)® which is live and administered intra-nasally
- Q7** Will Fluenz® be supplied by the PDC ?  
**A7** Yes, but only for children in the 2-3-year-old group
- Q8** What about using Fluenz® for children in clinical risk groups ?  
**A8** Fluenz® is also the preferred vaccine for those aged 4-17 years with risk conditions but it should be ordered from community pharmacy and **NOT** from the PDC
- Q9** Are there contra-indications with Fluenz® ?  
**A9** Yes, it's NOT to be used in children with proven egg allergy (regardless of severity). Details of other contraindications are in the new [Green Book chapter](#)
- Q10** Which vaccines can be used if there if proven egg allergy ?  
**A10** If severe egg allergy with anaphylactic reaction – use egg-free vaccine such as Optaflu (but only licensed for age 18 and over) or refer to hospital clinic if no licensed egg free vaccine available.  
  
If non-severe egg allergy - use a low ovalbumin content vaccine (less than 0.06 µg/dose) see [Appendix](#)
- Q11** What about the flu vaccines for the clinical risk groups aged 18 and over ?  
**A11** They are all listed in the PGD
- Q12** Is it correct that some 'at risk' children require two doses of Fluenz® ?  
**A12** Yes, those aged between 2 and 9 years who have **never** received flu vaccine before require two doses 4-6 weeks apart ([see algorithm](#))
- Q13** Will all flu vaccines be administered under one PGD ?  
**A13** No - there is a separate Fluenz® [PGD](#) and a seasonal flu vaccine [PGD](#)
- Q14** Can health care assistants administer the vaccine ?  
**A14** See A11 in the Shingles Q&A
- Q15** What about the vaccination programme for NHS staff ?  
**A15** This programme also starts on 1<sup>st</sup> October and further details are available on [Occupational Health](#) website
- Q16** Is peer immunisation still an option ?  
**A16** Yes. The [NHSGGC Flu](#) website contains information for hospital staff, primary care teams and patients. NHSGGC-employed staff who would like to participate in [peer immunisation](#) can obtain information on how to organise clinics and can complete the relevant screening and vaccine-order forms on line.
- Q17** How do GP staff get vaccinated against flu ?  
**A17** GP staff are not NHSGGC employees and therefore individual practices must make their own arrangements
- Q18** Are there patient leaflets about seasonal flu and child flu ?  
**A18** Yes, [seasonal flu](#) leaflet and [child flu](#) leaflets are available as downloads from the Immunisation Scotland website and can be ordered [on line](#) from the Public Health Directory Resource

# Shingles 2013 - Q&As

[Click here](#) to view the Shingles slide show

- Q1** When does the new shingles vaccination programme begin ?  
**A1** The programme officially begins on 1<sup>st</sup> September 2013 but the vaccine can be given either with the seasonal flu vaccine or at any time between now and August 2014, depending on vaccine availability
- Q2** Why has the programme been introduced ?  
**A2** The epidemiology of shingles shows that individuals over 70 years of age are not only at an increased risk of developing the disease, but they also suffer a more severe form of the illness resulting in complications such as post herpetic neuralgia and an increase in hospital admissions
- Q3** Who is to be vaccinated this year ?  
**A3** All 70-year-olds (born between 02/09/42 and 01/09/43) and there's a catch-up for the 79-year-olds ( born between 02/09/33 and 01/09/34)
- Q4** Why only this age group ?  
**A4** Studies undertaken on behalf of the JCVI show that the most cost-effective age for offering vaccination to prevent and/or reduce the disease burden is for those aged 70 to 79 years
- Q5** Are both programmes running concurrently ?  
**A5** Yes, both groups can be invited anytime from now until August 2014
- Q6** What about those aged 71 -78 years of age, when are they being vaccinated ?  
**A6** The Scottish Government will make a policy decision about them as soon as is possible depending on vaccine supplies etc.
- Q7** Where are details of the vaccination programme ?  
**A7** All the arrangements are laid out in the [CMO letter](#) of 13<sup>th</sup> August
- Q8** How are the patients to be contacted ?  
**A8** The SGHD has produced a [template letter](#) of invitation and the PHPU has provided a list of eligible patients. These have been sent to all GP practices and it is up to practices to make arrangements for vaccination.
- Q9** What vaccine is being used and where is it injected ?  
**A9** [Zostavax](#)<sup>®</sup> - a live vaccine injected subcutaneously into the upper arm
- Q10** Will it be administered under a PGD ?  
**A10** Yes - all immunising staff in primary care should sign the new [PGD](#)
- Q11** Can health care assistants administer the vaccine ?  
**A11** Yes, if all the following conditions are met :-  
1. The vaccine is prescribed under a **PSD** by GP or a prescriber  
2. The prescriber assesses the patient prior to vaccination  
3. The prescriber ensures that the HCA has been trained to administer the vaccine  
4. The prescriber retains clinical responsibility.
- Q12** What about patients with chronic inflammatory disorders who are on immunosuppressant drugs ?  
**A12** Zostavax<sup>®</sup> can be used for patients on low dose methotrexate (<0.4mg/kg/week), azathioprine (<0.3mg/kg/day) or 6-mercaptopurine (<0.1.5mg/kg/day)
- Q13** Are there any contraindications ?  
**A13** Hypersensitivity to any constituent of the vaccine (e.g., neomycin). If manifestation of allergy to neomycin is contact dermatitis, and it usually is, then this is not a contraindication. It is contraindicated in those with primary or acquired immunodeficiency. For details see [Green Book chapter](#)
- Q14** Are there any side effects ?  
**A14** 10% of people might develop a headache, redness or tenderness at the injection site
- Q15** What if the patient has already had shingles ?  
**A15** Vaccination should still go ahead and, if a recent episode, once patient is fully recovered
- Q16** What about ordering and vaccine supplies ?  
**A16** Click here to see [ordering procedure](#). Limited supplies of this vaccine are available over the first few months so practices will be unable to order for their entire cohort; supplies will be allocated by PDC according to availability from the manufacturer. Less than 50% of delivery is expected by end of September
- Q17** Is there a patient [leaflet](#) and [poster](#) ?  
**A17** Yes, these have been [sent out](#) to GP practices but can be ordered [on line](#) at the new PHRD site