



ATAGI CLINICAL ADVICE ON TRANSITIONING TO THE NEW HEPATITIS A VACCINATION SCHEDULE ON THE NATIONAL IMMUNISATION PROGRAM FROM 1 JULY 2020

It is important to read this statement in conjunction with The Australian Immunisation Handbook available at immunisationhandbook.health.gov.au and other related ATAGI statements on NIP schedule changes from 1 July 2020.

Key points

- From 1 July 2020, the hepatitis A vaccination schedule on the National Immunisation Program (NIP) for Aboriginal and Torres Strait Islander (Indigenous) children in the Northern Territory (NT), Queensland (QLD), South Australia (SA) and Western Australia (WA) will change as below:
 - The schedule point for the first dose of hepatitis A vaccine will be at age 18 months (instead of 12 months).
 - The schedule point for the second dose of hepatitis A vaccine will be at age 4 years (instead of 18 months).
- This change to the hepatitis A vaccination schedule will facilitate the implementation of a new NIP-funded meningococcal B (MenB) vaccination program for all Indigenous children aged <2 years from 1 July 2020.
 - By moving the first dose of hepatitis A vaccine to age 18 months, it will reduce the number of vaccines scheduled for administration at age 12 months for Indigenous children in the NT, QLD, SA and WA.
- With this schedule change, from 1 July 2020:
 - Any Indigenous child in the NT, QLD, SA and WA presenting for vaccinations at the 12-month age schedule point will receive vaccinations for pneumococcal, measles/mumps/rubella, meningococcal ACWY and meningococcal B vaccines. They will **not** receive the hepatitis A vaccine at this time. For these children, the first dose of hepatitis A vaccine is to be administered at age 18 months and the second dose of hepatitis A vaccine is to be administered at age 4 years.
 - Indigenous children in the NT, QLD, SA and WA aged <18 months who present late for vaccinations scheduled at the 12-month age schedule point will not need to catch up with the first dose of hepatitis A vaccine; they will receive their first dose of hepatitis A vaccine at age 18 months and the second dose at age 4 years.
 - For Indigenous children in the NT, QLD, SA and WA who have already received their first dose of hepatitis A vaccine (prior to July 2020), the second dose can be given at any time from 6 months (the minimum interval) after the receipt of their first dose. This second dose may be given concurrently with other vaccines when they present for their vaccinations at either 18-month or 4-year age schedule point, or at other visits (such as for an influenza vaccine).
 - When an Indigenous child in the NT, QLD, SA and WA presents for vaccinations at the 4-year age schedule point, their hepatitis A vaccination history should be specifically checked. Unless they have 2 documented doses of hepatitis A vaccine (given at least 6 months apart) on their vaccination history, they should receive a second dose if they had received one dose previously or a first dose of a catch-up series if they had not received any dose previously.
 - It is expected that from January 2023 onwards, an increasing number of children presenting for vaccinations at the 4-year age schedule point will require the second dose of hepatitis A vaccine, and from July 2023 onwards, the second dose of hepatitis A vaccine will be required routinely at age 4 years.
 - This change in the hepatitis A vaccination schedule is not expected to increase the incidence of hepatitis A disease in Indigenous children in the NT, QLD, SA and WA. The change is based on the current epidemiology of hepatitis A in Australia, and evidence of very high vaccine effectiveness in young children and antibody persistence after hepatitis A vaccination.
- The new NIP schedule for Indigenous children in the NT, QLD, SA and WA at ages 12 months, 18 months and 4 years from 1 July 2020 is shown in Table 1.

Table 1: NIP schedule* for Aboriginal and Torres Strait Islander children in the NT, QLD, SA and WA at age 12 months, 18 months and 4 years, from 1 July 2020

| Disease | Vaccine brand | Schedule point | | |
|---------------------------------------|-----------------------------|---|---------------|-------------|
| | | Age 12 months | Age 18 months | Age 4 years |
| Pneumococcal† | Prevenar 13® | ✓ (Last dose of the 4-dose infant schedule) | | |
| | Pneumovax 23® | | | ✓† |
| Measles, mumps, rubella | M-M-R® II or Priorix® | ✓ | | |
| Meningococcal ACWY | Nimenrix® | ✓ | | |
| Meningococcal B‡ | Bexsero® | ✓ (Last dose of the 3- or 4-dose infant schedule§) | | |
| Hepatitis A# | Vaqta® Paediatric | | 1st dose | 2nd dose |
| Measles, mumps, rubella, varicella | Priorix-Tetra® or ProQuad® | | ✓ | |
| Haemophilus influenzae type b | ActHIB® | | ✓ | |
| Diphtheria, tetanus, pertussis | Infanrix® or Tripacel® | | ✓ | |
| Diphtheria, tetanus, pertussis, polio | Infanrix® IPV or Quadracel® | | | ✓ |

* Not including annual influenza vaccine, vaccines/dose(s) recommended for toddlers with some specific medical conditions or vaccines recommended at other NIP schedule points. For the complete NIP schedule, refer to the [Department of Health National Immunisation Program Schedule](#).

† Updated pneumococcal recommendations from 1 July 2020. Refer to the [ATAGI clinical advice on changes to recommendations for use and funding of pneumococcal vaccines from 1 July 2020](#).

‡ Refer to Table 2 for the appropriate schedule.

§ New program of NIP-funded doses of MenB vaccine for all Indigenous infants, with catch-up available up to <2 years of age until June 2023.

New schedule of NIP-funded doses of hepatitis A vaccine from 1 July 2020.

Additional information: meningococcal B vaccination program for Indigenous children under the NIP from 1 July 2020

- From 1 July 2020, MenB vaccine Bexsero will be available through the NIP for all Indigenous infants from 2 months of age. Catch-up vaccination is available for Indigenous children up to <2 years of age until June 2023.
- Clinicians should assess and confirm MenB vaccination history,¹ screen for presence of specified medical risk conditions and provide MenB catch-up vaccination for children up to <2 years of age as required.
- The number of doses of Bexsero required will depend on the age at which vaccination commences and the presence of specified medical risk conditions (refer to Table 2).
- For children who commence Bexsero catch-up vaccination at their 12-month age schedule point visit, it is preferable that they receive the second dose 8 weeks (minimum interval) after the first dose rather than waiting for the next routine vaccination schedule point at age 18 months.

Table 2: Recommended schedule for immunisation of for Aboriginal and Torres Strait Islander infants and children aged <2 years using Bexsero

| Age at start of vaccine course | Number of doses required | Recommended interval between doses |
|--------------------------------|---|---|
| 6 weeks–5 months | 3 (for healthy infants) | 8 weeks between 1st and 2nd doses; 3rd dose at 12 months of age or 8 weeks after 2nd dose, whichever is later |
| | 4 (for infants with a specified medical condition associated with increased risk of meningococcal disease*) | 8 weeks between doses; 4th dose at 12 months of age or 8 weeks after 3rd dose, whichever is later |
| 6–11 months | 3 | 8 weeks between 1st and 2nd doses; 3rd dose at 12 months of age or 8 weeks after 2nd dose, whichever is later |
| 12–23 months | 2 | 8 weeks between doses |

* List of medical conditions are specified in the [Australian Immunisation Handbook](#)

¹ Some Indigenous children in South Australia would have received Bexsero through the state-based program which commenced in October 2018