

20 January 2017

Matthew Wolfenden Procurement Manager PHARMAC PO Box 10 254 Wellington 6143

Via email: vaccines@pharmac.govt.nz

## Dear Mr Wolfenden

The Royal Australasian College of Physicians (RACP) and the Paediatric Society of New Zealand (PSNZ) welcome the opportunity to submit feedback on the Proposal to amend listings in the National Immunisation Schedule.

The RACP works across more than 40 medical specialties to educate, innovate, and advocate for excellence in health and medical care. The RACP trains the next generation of specialists while playing a lead role in developing world best practice models of care. We draw on the skills of our members to develop policies that promote a healthier society. By working together, our members advance the interest of our profession, our patients and the broader community.

We are supportive of the proposed amendments to the Schedule, noting in particular positive changes to the eligibility criteria for the pneumococcal conjugated (PCV13) vaccine and the varicella vaccine. We particularly welcome the reinstatement of additional measures to prevent infectious disease among high-risk children under five years of age, as in the proposed PCV13 amendments.

We recommend additional clarification on the following points in the Schedule:

## Varicella vaccine

Point 1.1.2 states the vaccine can be given to "previously unvaccinated children turning 11 years old on or after 1 July 2017, who have not previously had varicella infection (chickenpox)". This statement is not clear if the vaccine must be given at age 11: if it is funded for children aged over 11 year who are not immune, the Schedule should then specify that children aged over 13 years require two doses six weeks apart, as the single dose is ineffective in adolescents and adults.

## Meningococcal (Groups A, C, Y and W-135) conjugate vaccine – Menactra

Menactra is currently available to close contacts of meningococcal cases; furthermore it is funded regardless of serogroup. This means that families of people with serogroup B disease (for which there is no vaccine available in New Zealand) can receive a funded vaccine covering extra serogroups, but not the patient themselves. The RACP recommend PHARMAC and the Immunisation Subcommittee undertake further enquiry around the extension of a funded dose of Menactra where appropriate.

## Pneumococcal (PPV23) polysaccharide vaccine – Pneumovax 23

Children aged over 5 years who are at high risk of pneumococcal disease should receive a single dose of PCV13 prior to receiving Pneumovax 23. The proposed amendments are for two doses to be funded for the re-immunisation of patients with chronic conditions and/or are immunocompromised (p10 s2 of the consultation document).

We wish to thank PHARMAC for the opportunity to provide feedback on this consultation. The RACP is aware that the Paediatric Society of New Zealand (PSNZ) is also making a submission to which we lend our support. To discuss this submission further, please contact the NZ Policy and Advocacy Unit at <a href="mailto:policy@racp.org.nz">policy@racp.org.nz</a>.

Yours sincerely

Dr Jeff Brown FRACP NZ President-elect

Jeff Brown

The Royal Australasian College of Physicians