



Vaccines and Immunizations

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**News and Media Resources:**

## **Immunization Works! November 2008 Issue**

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*November 2008*

# **Immunization Update**

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*immunization works!*



The Centers for Disease Control and Prevention's (CDC) Immunization Works Monthly Immunization Update is provided to professional organization partners for broad distribution to their members and constituencies. The information provided is non-proprietary.

**Front Page News**

**ACIP Recommends Smokers Get PPSV:** The ACIP meets three times annually and provides recommendations to the Director of the CDC and the Secretary of HHS concerning the prevention of vaccine-preventable diseases in the United States. In October, CDC's **Advisory Committee on Immunization Practices (ACIP)** voted to add smoking as an indication for pneumococcal polysaccharide vaccine (PPSV) for adults 19 through 64 years-old.

ACIP also voted **in favor of** the following proposals:

### **PPSV:**

- To change the age range for asthmatics to receive PPSV to 19 through 64 years old (the age range in previously approved recommendations was 18 to 64 years-old).
- Not to recommend routine PPSV vaccination of Alaska Natives/American Indians, 2 through 64 years of age with no other indications (previously, routine vaccination was recommended for all AN/AI in this age group ). However, in special situations, public health authorities may now recommend vaccination for Alaska Natives/American Indians 50-64 years-old living in areas of increased risk.
- Not to routinely administer PPSV after vaccination with PCV for AN/AI children, 24 through 59 months. However, in special situations, public health authorities may now recommend PPSV vaccination for these children if they are living in areas of increased risk.
- For persons who are immuno-compromised, have sickle cell disease or asplenia, standardize the interval between first and second dose of PPSV to 5 years (it had previously been 5 years for some people, 3 years for others).

### **Childhood and Adult Schedules:**

- To accept proposed changes to the adult and childhood schedules for consistency and clarification of previous recommendations.
- To incorporate new recommendations for pneumococcal, rotavirus and influenza vaccines.

### **Anthrax:**

- To update current recommendations.

The ACIP voted **not to accept** proposed changes to The General Recommendations on Immunization concerning timing and spacing of vaccine doses, contraindications and precautions, and vaccine administration. After reviewing recent data, the ACIP decided **not** to make changes to current CDC needle length recommendations.

The new recommendations will be published in a future edition of CDC's Morbidity and Mortality Weekly Report (MMWR). **Slide presentations and the full report from the October ACIP meeting** will be posted soon. The next ACIP meeting will be held at the CDC in Atlanta, Georgia, on February 25-26, 2009.



## Other News & Summaries

***Haemophilus Influenzae* Surveillance:** Health departments, state and hospital laboratories, and physicians should increase efforts for timely serotyping and reporting of all cases of invasive *H. influenzae* disease in children less than 5 years-old. In October 2008 Merck & Co., Inc. announced that their supply outage of *Haemophilus influenzae* type b (Hib) conjugate vaccines (PedvaxHIB® and Comvax®) would continue until mid-2009. As this ongoing outage has disrupted the United States supply of Hib vaccines, national surveillance for invasive Hib disease in children under 5 year-old is of particular importance. Unfortunately, national Hib surveillance is hampered by incomplete serotype reporting. For children under 5 years-old, serotype are missing for nearly 40 percent of *H. influenzae* cases reported to CDC. The extended vaccine shortage heightens the need for timely reporting and investigation of all *H. influenzae* cases, and accurate serotyping of all invasive *H. influenzae* isolates in children under 5 years-old. For more information, please see the full **MMWR article on *Haemophilus Influenzae* surveillance** in CDC's Morbidity and Mortality Weekly Report (MMWR).

### **CDC Releases First Estimate of HPV-Associated Cancer Data:**

Twenty-five thousand cases of human papillomavirus (HPV)-associated cancers occurred in 38 states and the District of Columbia annually during 1998-2003, according to studies conducted by CDC. The report, "Assessing the Burden of Human Papillomavirus (HPV)-Associated Cancers in the United States (ABHACUS)," was published online and appears in the Nov. 15, 2008, supplement edition of *Cancer*. It is the first analysis of the largest, most comprehensive assessment of HPV-associated cancer data to date in the United States. View the **estimate of HPV-associated cancer data article** online (exit).

**Low Hep B Vaccination Rates for Newborns Worldwide:** An analysis of data collected by the World

Health Organization (WHO) and United Nations Children's Fund (UNICEF) indicates low worldwide coverage of hepatitis B (HepB) vaccination of infants at birth. Only 27 percent of infants born worldwide and 36 percent of infants born in countries with high rates of chronic hepatitis B virus (HBV) infection received HepB vaccination within 24 hours of birth. WHO recommends HepB vaccination of newborns in countries with high rates of chronic hepatitis B, since vaccination within 24 hours of birth is up to 95 percent effective in preventing mother-to-child HBV transmission. Globally, hepatitis B is a major cause of cirrhosis and liver cancer and is estimated to cause 620,000 deaths each year. Infants who become HBV-infected have a 90 percent risk of developing chronic infection and a 25 percent risk of dying from the disease. Low worldwide coverage of the HepB vaccine at birth represents significant missed opportunities. For more information, please see the full **Hep B vaccination rates article** in CDC's Morbidity and Mortality Weekly Report (MMWR).

**Rotavirus Surveillance – Worldwide:** Rotavirus is the leading cause of severe diarrhea in young children worldwide, accounting for approximately 40 percent of hospitalizations for this disease. The large health burden underscores the potential health benefits of new vaccines against rotavirus. The availability and use of rotavirus vaccines globally can have a substantial impact in reducing hospitalizations and the estimated more than 500,000 annual deaths from rotavirus diarrhea. This would contribute to the achievement of the United Nation's Millennium Development Goals for reduction of childhood mortality. Approximately 40 percent of diarrhea hospitalizations among children under 5 years-old worldwide were attributed to rotavirus infection, according to surveillance conducted during 2001-2008 at sentinel hospitals in 35 countries in each of the 6 regions of the World Health Organization. For more information, please see the full **MMWR rotavirus surveillance article** in CDC's Morbidity and Mortality Weekly Report (MMWR).

**Western Hemisphere on Track to Meet Rubella Goals:** Countries in the Americas have demonstrated progress toward the rubella and CRS elimination goal with the expectation of reaching the 2010 rubella and CRS elimination goals. In 2003, the Pan American Health Organization (PAHO) established a goal of rubella and congenital rubella syndrome (CRS) elimination in the Americas by the year 2010. To accomplish this goal, PAHO developed a comprehensive rubella and CRS elimination strategy. During 1998–2006, confirmed rubella cases decreased 97.8 percent (from 135,947 to 2,998) in the Americas. However, during 2007, rubella outbreaks occurred in three countries: Argentina, Brazil, and Chile. Despite these setbacks, it is expected that 2010 goals of eliminating rubella and CRS will be reached. For more information, please see the full **MMWR rubella goals article** in CDC's Morbidity and Mortality Weekly Report (MMWR).

**PCV7 Must Reach Children Most at Risk:** A pneumococcal conjugate vaccine (PCV) that includes seven pneumococcal serotypes (PCV7) first became available in 2000. Although much progress is being made in the use of pneumococcal conjugate vaccine worldwide, these life-saving vaccines are not reaching young children in developing countries that need them most. Pneumococcal disease is a leading

cause of childhood mortality globally. Low-income countries, where most of the disease occurs, will benefit most from introduction of pneumococcal conjugate vaccines. As of August 2008, 26 countries offered PCV7 to children as part of national immunization programs or had the vaccine in widespread use; however, none of these countries is a low-income country. The safety and effectiveness of pneumococcal conjugate vaccines justify its use, especially in low-income countries. Much is being done to address historic obstacles to vaccine introduction in both low and middle-income countries. In October, the **Pneumococcal Awareness Council of Experts** (exit) and its partners issued a **Global Call to Action** (exit) urging access to pneumococcal vaccines for every person who needs them worldwide. For more information, please see the full **MMWR PCV7 risk article** in CDC's Morbidity and Mortality Weekly Report (MMWR).



## Meetings, Conferences & Resources

**new! NIVW Net-Conference:** On December 12, from 2:00 PM to 3:00 PM ET, CDC will present a live netconference program about National Influenza Vaccination Week (NIVW). This program will focus on Influenza Vaccination of Healthcare Workers, and will combine a telephone audio conference with simultaneous online visual content. Participants can take part in a question and answer segment by telephone and/or via the Internet. Registration is required. To register, visit the **Current Issues in Immunization NetConference** webpage.

**new! Immunization Webcast:** On December 18, from noon to 2:00 PM ET, CDC will present an important webcast titled The Immunization Encounter, Critical Issues. This program will address issues related to the routine immunization clinic encounter including patient and parent communication and education, vaccine storage and handling, preparing for medical emergencies, etc. Continuing Education (CE) credits will be provided. For more information, visit the **immunization webcast course overview** webpage.

**new! GOOGLE Launches a New Tool to Track the Flu:** In November, Google.org launched Google Flu Trends, a website that provides real-time influenza-like illness (ILI) estimates based on public search queries on **Google.com** (exit). Google Flu Trends allows researchers, public health officials and the general public to learn more about current ILI activity levels in each state. For more information, visit the **Flu Trends** (exit) webpage.

**new! Shots 2008, Now Available: SHOTS 2008** (exit) is a quick reference guide to the 2008 Childhood, Adolescent and Adult Immunization Schedules that can be downloaded onto your palm OS or pocket PC. It is a collaboration of the Advisory Committee on Immunization Practices (ACIP), the

American Academy of Pediatrics (AAP) and the American Academy of Family Physicians (AAFP).

**new! Updated Td/Tdap VIS:** CDC has developed a **new Vaccine Information Statement (VIS) that can be used for both Td and Tdap vaccines**. It is dated 11/18/08, and available on the CDC vaccine information statements webpage. This Td/Tdap VIS replaces the 7/12/06 Tdap VIS and the 6/10/94 Td VIS. These two older VISs may still be used until stocks are depleted.

**What are You Doing for NIVW? National Influenza Vaccination Week (NIVW)** NIVW is December 8-14. CDC has many influenza resources available at the **Flu website**, including free materials such as flyers, posters, stickers, and public service announcements for various public audiences and healthcare providers at the **Flu Gallery**. Please check the Gallery for new materials throughout the influenza season.

**Mark Your Calendars for NIC:** Make plans now to attend the **National Immunization Conference (NIC)**, scheduled March 30–April 2, 2009, at the Sheraton Dallas. Early bird on-line registration is available until January 30th.

**CDC Training Opportunities:** Through established programs, CDC offers many unique training opportunities in infectious disease, including international opportunities. For a current listing of CDC training opportunities, please visit the **CDC Public Health Training** webpage.

**CDC Job Openings:** CDC is committed to recruiting and hiring qualified candidates for a wide range of immunization positions. Researchers, Medical Officers and Epidemiologists and other specialties are often needed to fill positions within CDC. For a current listing, including international opportunities, please visit the **CDC Employment** webpage.



## Respiratory News & Resources

*Since 2006, immunization has been part of CDC's National Center for Immunization and Respiratory Diseases. As a result, readers can periodically expect to see news about respiratory diseases.*

**Get Smart About Antibiotics Week:** The CDC's Get Smart: Know When Antibiotics Work campaign organized its first annual **Get Smart about Antibiotics Week** from October 6th-10th, 2008. CDC's Get Smart campaign collaborated with 19 state-based appropriate antibiotic use campaigns, non-profit and for-profit partners to educate the general public, parents of young children and healthcare providers

about appropriate antibiotic use. The theme of the week was "The power to prevent resistance is in your hands."

The media and public response was enthusiastic. Lysol's HomeSolutionsNews featured an article about Get Smart about Antibiotics Week and distributed it to more than 2.4 million people. More than 150 web sites featured information regarding Get Smart about Antibiotics Week. CDC's homepage, when it highlighted Get Smart about Antibiotics Week, received more than 4,200 hits in one week. During the month of October, CNN Accent Health - a waiting room TV network - played the Get Smart Campaign's PSA "Always Give Hugs" in 1,000 obstetrics and gynecology offices and 1900 pediatric offices. The National Association of Chain Drug Stores wrote an article about Get Smart About Antibiotics Week in their association publication that was distributed to more than 39,000 retail community pharmacies.

CDC would like to thank many of its distinguished partners for their work on Get Smart about Antibiotics Week: Ortho-McNeil, Reckitt Benckiser (the maker of Lysol), CNN Accent Health, National Association of Chain Drug Stores, Drug Store News, American Academy of Pediatrics, American Academy of Physician Assistants, American Academy of Nurse Practitioners, American Medical Association, American Pharmacists Association, American Public Health Association, Infectious Diseases Society of America, Convenient Care Association, Food and Drug Administration, National Association of Child Care Resource and Referral Agencies, and Student Academy of the American Academy of Physician Assistants.

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This page last modified on January 2, 2009

Content last reviewed on December 4, 2008

Content Source: National Center for Immunization and Respiratory Diseases

**Page Located on the Web at <http://www.cdc.gov/vaccines/news/newsltrs/imwrks/2008/200811.htm>**

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