

HSE NATIONAL IMMUNISATION OFFICE

IMMUNISATION BULLETIN 64

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COVID-19 vaccination

COVID-19 vaccine VidPrevtyl Beta® introduced as an alternative booster vaccine

The National Immunisation Advisory Committee (NIAC) has recommended that COVID-19 vaccine VidPrevtyl Beta® may be used as a booster vaccine. VidPrevtyl Beta® is a protein subunit vaccine.

All National Immunisation Office materials have been updated to include information on this vaccine.



[Download our information and training materials on VidPrevtyl Beta®.](#)

Indication:

VidPrevtyl Beta® vaccine is licensed as a booster for active immunisation to prevent COVID-19 for those **aged 18 years and older** who have previously received an mRNA or adenoviral vector COVID-19 vaccine.

NIAC recommend VidPrevtyl Beta® may be used as an alternate booster vaccine if there is a contraindication or precaution to an mRNA vaccine or Nuvaxovid, or a person has chosen not to receive these vaccines. The vaccine is only available in community vaccination centres.

VidPrevtyl Beta® is not licensed as a booster for those who have previously received a protein subunit vaccine (e.g. Nuvaxovid).

Excipients:

The vaccine contains AS03 adjuvant which is composed of squalene, DL- α -tocopherol and polysorbate 80.

VidPrevtyl Beta® may contain traces of octylphenol ethoxylate but does not contain preservatives or trometamol.

Latex is not used to manufacture the vaccine.

Contraindications:

Anaphylaxis following a previous dose of the vaccine or any of its constituents including polysorbate 80 or octylphenol ethoxylate.

Pregnancy:

In the context of the limited clinical data available NIAC does not recommend the routine use of VidPrevtyl Beta® in pregnancy. Administration of VidPrevtyl Beta® during pregnancy should only be considered on a case by case basis, in consultation with a relevant specialist when the potential benefits outweigh any potential risks for the mother and foetus.



For more information, read [Summary of Product Characteristics \(SmPC\) for VidPrevtyl Beta®](#)

Monitoring:

VidPrevtyl Beta® is subject to additional monitoring. This will allow quick identification of new safety information. Healthcare professionals are asked to report any suspected adverse reactions to the HPRA.



Click to [report any adverse suspected adverse reactions to the HPRA.](#)

NIAC recommendations for a Spring COVID-19 booster vaccine in 2023

Ideally the Spring booster campaign should be completed by 16th June so that there is an adequate interval before the Autumn booster campaign.

If people from the cohorts come for a spring booster after 16th June then clinical discretion should be used to assess the risk, benefit and impact on Autumn booster timing before administering a spring booster.

Over the summer period, COVID-19 vaccines can still be provided as primary courses, to eligible pregnant women and those who have not yet received a first booster.

Be Measles aware

The HSE is urging parents to make sure children are up to date with their MMR vaccines before travelling outside of Ireland this summer. The MMR vaccine, which is safe and effective, protects against measles cases and outbreaks.

Measles cases are rising internationally. There have been more cases reported in Europe so far this year than were reported in the whole of 2022. There is an ongoing measles outbreak in Austria and measles cases have been reported in the UK, Germany, Hungary and Sweden. Outside Europe, there have been recent outbreaks reported in many countries including South Africa, Indonesia, India and the Philippines.

The World Health Organization (WHO) have warned about the risk of measles in children because of low MMR vaccine uptake following the pandemic.

Measles is highly infectious and can be an acute and serious infection. It causes a rash illness, with cough, runny nose, conjunctivitis and high fever. Complications of measles include ear infections, pneumonia, febrile seizures and less commonly encephalitis (inflammation of the brain) and even death.

The only protection against measles is vaccination. Two doses of MMR vaccine are needed and if a child is not fully protected for their age, then MMR vaccines can be obtained from your GP or travel health clinic.

Measles is a notifiable disease in Ireland. In recent years, most cases of measles reported in Ireland are imported or import related cases. Measles is more common in countries where uptake of measles vaccine is below recommended levels. A booster dose is offered by HSE school vaccination teams when children are in Junior Infants. If a child has missed their MMR vaccines it's not too late to get protected.

Uptake rates of MMR vaccine in Ireland are currently below the rates recommended by WHO. Most recently available information on the uptake of the second dose of MMR in Ireland for children in the 2020/2021 school year was 88%. This is down from 91% reported for the 2019/2020 school year. Both of these uptake rates are below the WHO recommended 95% uptake rates to stop measles transmission and indicates gaps in immunity.



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[Read more about measles and the MMR vaccine.](#)

[Download the NIO's Communications Toolkit on measles and the MMR vaccine.](#)

[Watch a video from Dr Éamonn O'Moore, Director for HSE National Health Protection, about why the MMR vaccine is important for children.](#)

[Féach ar an bhfíseán seo: An Dr Evelyn Fennelly, Oifigeach Leighis Sinsearach, Oifig Náisiúnta Imdhíonta FSS, ag caint faoin gcúis a bhfuil sé tábhachtach go bhfuil do pháiste cosanta go hiomlán ar an mbrúitíneach.](#)

Primary Childhood Immunisation Schedule

Single dose Hib vaccine

There have been a few queries from Practice Nurses where a child has been advised to attend their GP for catch up with Hib vaccine only.

However, there is no single Hib vaccine available since 2017 in the Primary Childhood Immunisation Schedule and the cold chain cannot supply the vaccine anymore. These children are recommended Hib/MenC vaccine. There is no problem giving a further dose of MenC vaccine to any child.

The only vaccines available for catch up in the Primary Childhood Immunisation Schedule up to the age of 10 years are the vaccines funded and recommended at 2, 4, 6, 12 and 13 months of age.

If requested can the Primary Childhood Immunisation Schedule be provided over more than 5 visits?

No, the HSE is guided by National Immunisation Advisory Committee (NIAC) recommendations when providing the primary childhood immunisation schedule. NIAC advises the primary childhood immunisation schedule should be provided over 5 visits. Furthermore, there is only funding to provide payment for a maximum of five vaccination visits to the patient's GP.

Worldwide there is no recommendation to spread the childhood immunisation schedule out over more visits as it means extra visits, delay in getting the vaccines and associated risk of infection.

Each year millions of children are given several vaccines at each visit to protect them as early as possible from vaccine preventable diseases, which are commonest in the 1st year of life.

The HSE cannot provide a schedule offering one or two vaccines at each visit as this is not recommended by NIAC or the World Health Organisation.

The NIO has developed a HSeLand eLearning module that addresses specifically the scenario where a parent wants single vaccines – you may have seen this.



[Complete the NIO's 'Talking About Immunisation' HSeLand training programme.](#)

Varicella and travel vaccines

The HSE National Immunisation Office provides information on the National Immunisation programmes only. The HSE does not provide varicella vaccine or travel vaccines and so cannot provide information about these vaccines.



[Read more about travel vaccines in Chapter 5 of the RCPI NIAC Immunisation Guidelines.](#)
[Read more about varicella vaccine in Chapter 23 of the RCPI NIAC Immunisation Guidelines.](#)

Updated NIAC Chapters

Chapter 3 (Immunisation of Immunocompromised Persons) and Chapter 22 (BCG) have recently been updated.



[Read updated Chapters 3 and 22 of the RCPI NIAC Immunisation Guidelines.](#)

Website



[Visit our website](#)

Visit our website www.immunisation.ie regularly for information to support vaccinators and health professionals responding to queries.

HSeLanD Vaccination Training Programme



[Visit HSeLanD](#)

You will find programmes developed by our office by logging into your account on www.hseland.ie selecting **courses** then selecting **clinical skills** and finally selecting **National Immunisation Office**.



[Contact HSeLanD](#)

If you have any issues with the platform please contact HSeLanD directly.

Do you have queries?



[Send your query](#)

Clinical queries from healthcare professionals can be directed to our dedicated email address

Should vaccines be exposed to temperatures outside of parameters please contact a National Immunisation Office pharmacist immediately. Contacts include:

- email pharmacynio@hse.ie
- Leah Gaughan: mobile 087 1881667
- Achal Gupta: mobile 087 4064810
- Cliona Kiersey: mobile 087 9915452

If you have a query about errors or changes to records on COVAX, please contact the Contact Management Programme on 01 240 8786.

Queries that are not clinical or technical cannot be answered by the National Immunisation Office



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