

*From the Chief Medical Officer*  
Dr Michael McBride



Department of  
**Health, Social Services  
and Public Safety**

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HSS(MD)58/2009

AN ROINN

**Sláinte, Seirbhísí Sóisialta  
agus Sábháilteachta Poiblí**

MÄNNYSTRIE O

**Poustie, Resydènter Heisin  
an Fowk Siccar**

Chief Executives, Public Health Agency/Health & Social  
Care Board/ HSC Trusts/NIAS  
Director of Public Health/Medical Director, Public Health Agency  
(*for onward distribution to all healthprotection staff*)  
Assistant Director Health Protection, Public Health Agency  
Director of Nursing, Public Health Agency  
Director of Pharmaceutical Services, Health & Social Care  
Board/Trusts  
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Board (*for cascade to GP Out of Hours services*)  
GP Medical Advisers, Health & Social Care Board  
All General Practitioners and GP Locums (*for onward distribution  
to practice staff*)  
All Community Pharmacists  
Medical Directors, HSC Trusts (*for onward distribution to all  
Consultant Paediatricians*)  
Nursing Directors, HSC Trusts (*for onward distribution to all  
Community Nurses*)  
Directors of Children's Services, HSC Trusts

Castle Buildings  
Stormont Estate  
Belfast BT4 3SQ  
Tel: 028 9052 0563  
Fax: 028 9052 0574  
Email: [michael.mcbride@dhsspsni.gov.uk](mailto:michael.mcbride@dhsspsni.gov.uk)

Your Ref:

Our Ref: HSS(MD)58/2009

Date: 10 December 2009

Dear Colleague

## **SWINE INFLUENZA (H1N1): REVISED DOSAGE SCHEDULE FOR PANDEMRIX VACCINE FOR CHILDREN AGED OVER 6 MONTHS AND BELOW 10 YEARS**

### **INTRODUCTION**

1. Further to our letter of 24 November (HSS(MD) 56/2009) we are writing to provide you with an update on the dosage schedule for the Pandemrix vaccine in relation to children aged over 6 months and below 10 years.

### **Revised Dosage schedule for children aged over 6 months and below 10 years**

2. Following new advice from the European Medicines Agency and preliminary data on the reactogenicity of H1N1 vaccines from a paediatric trial coordinated by the Health Protection Agency, the Joint Committee on Vaccination and Immunisation (JCVI) have provided updated advice and the following revised dosage schedule in respect of Pandemrix H1N1 vaccine:

**Children aged over 6 months and below 10 years who are healthy or in the clinical at risk groups** as defined previously in my letter dated 15 October 2009 (HSS (MD) 47/2009) should be given:

- **ONE 0.25ml** dose (i.e. half the adult dose)

**Immunocompromised children aged over 6 months and below 10 years** should be given:

- **two 0.25ml** doses (i.e. two half adult doses) with a minimum of 3 weeks between doses.

Advice on the use of Pandemrix in children aged 10 years and above and adults remains that previously given in the earlier Chief Professional letter.

3. Below is a copy of the JCVI advice setting out the reasons for the revised dosage of Pandemrix vaccine:

#### **JCVI updated advice on H1N1v vaccination 8 December 2009**

The committee considered new advice from the European Medicines Agency<sup>1</sup> on the use of Pandemrix in young children based on data from the manufacturer showing a higher rate of fever in young children following a second dose. The committee also considered preliminary data on the reactogenicity of H1N1v vaccines from a paediatric trial coordinated by the Health Protection Agency.

The committee concluded that for children offered Pandemrix, one dose (that is half the adult dose) should be given to children aged over 6 months and below 10 years that are healthy or in the clinical at risk groups as defined previously by the JCVI<sup>2</sup> with the exception of children who are immunocompromised. Immunocompromised children in this age group should receive two doses (both half the adult dose) of Pandemrix that are given at least 3 weeks apart. Advice on the use of Pandemrix in children aged 10 years and above and adults remains that previously given by the committee<sup>2</sup>.

Parents should be advised to look for signs of fever following H1N1v vaccination. Childhood antipyretics can be given to treat a fever should one develop. However, they should not be given before or shortly after vaccination in anticipation of a fever since there is some evidence that this may make vaccines less effective.

#### **ACTION REQUIRED**

4. **Please ensure that this revised dosage schedule for Pandemrix is drawn to the attention of all staff who are giving swine flu vaccines or involved in the call and recall of children for vaccination.**
5. **THE REVISED DOSAGE SCHEDULE SHOULD BE IMPLEMENTED IMMEDIATELY.**
6. **Please note that the dosage schedule for Celvapan remains unchanged.**

## CONCLUSION

7. The numbers of people receiving swine flu vaccine continues to increase. We want to pay tribute to the work of many staff in Trusts and primary care who have worked so hard to deliver this programme. Planning this programme has been a major undertaking and I am also very appreciative of all those from a wide range of organisations who have worked together to make this possible.

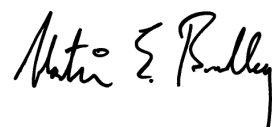
Yours sincerely



**Dr M McBride**  
Chief Medical Officer



**Dr N Morrow**  
Chief Pharmaceutical Officer



**Mr M Bradley**  
Chief Nursing Officer

cc Dr A McCormick  
Norman Morrow, DHSSPS  
Martin Bradley, DHSSPS  
Mrs Linda Brown, DHSSPS  
Dr M McCarthy, DHSSPS  
Mr S Donaghy, DHSSPS  
Mr Dean Sullivan, DHSSPS  
Dr M Briscoe, DHSSPS  
Mr A Elliott, DHSSPS  
Ms C Jendoubi, DHSSPS  
Mr J Farrell, DHSSPS  
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Ms Diane Taylor, DHSSPS  
Mr M Coleman, DHSSPS  
Dr B Dunn, Chair, GPS, BMA  
Prescribing Advisers, HSC Trusts  
Regional Drug and Poisons Information Service  
Dr Jill Mairs, Regional Procurement Pharmacist  
Mr D Bannon, SEHSCT (NI Prison Service)  
Universities Student Health Services  
NICS Occupational Health  
Mr P Tiffney, Movianto Ireland  
Dr Richard Smithson (*for onward transmission to members of the Pandemic Vaccination Project Board*)  
Prof P Johnston, Dean of Medical School at QUB  
Prof L Johnston, Head of Nursing & Midwifery, QUB  
Prof H McKenna, Head of Life and Health Sciences UU  
Dr O Barr, Head of School of Nursing, UU

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