Dear Colleague

CHANGES TO THE SHINGLES (HERPES ZOSTER) VACCINATION PROGRAMME IN 2014-15

Introduction

1. This letter provides details of the 2014-15 shingles vaccination programme including those eligible for vaccination. In 2014/15 the programme will target:

   • People age 70 years (routine)
   • People aged 78 and 79 years (catch-up).

2. Shingles is a debilitating condition, which occurs more frequently, and tends to be more severe, in older people. It is estimated that around 7,000 people aged 70 years and above are affected in Scotland each year. Of these, between 700-1,400 develop a very painful and long lasting condition – Post Herpetic Neuralgia (PHN). Around 600 hospitalisation episodes are recorded per year, with approximately 5 cases resulting in death each year.

3. Colleagues will recognise the significant benefits the vaccine will bring to their patients, and we would like to take this opportunity to thank all those involved in continuing to deliver the programme for their continued hard work.

4. This letter sets out key information which General Practitioners and others should be aware of.

2014/15 Vaccination Programme

5. The programme will run from 1 September 2014 until 31 August 2015. This year the vaccine should be offered to people aged 70 years. It is now a part of the routine vaccination programme for people aged 70. We also plan to continue the catch-up immunisation programme in 2014 for people aged 78 and 79 years. The catch-up campaign
for those aged 78 and 79 will also begin on that date. The efficacy of the vaccine declines with age and so it is not recommended for people aged 80 years or older.

6. General practitioners should be aware that vaccination can be administered at any time of the year – it does not need to be given at the same time as seasonal flu vaccinations.

**Call Up**

7. Call up for the shingles programme will be through GPs only; there will be no central call or recall for this programme. GPs are reminded that they are required to develop a proactive and preventative approach to offering immunisations by adopting robust call and reminder systems to contact all eligible patients. We would encourage all GP practices to provide call and recall by way of a letter, as recent experience has indicated that such letters can have a very positive impact on vaccine uptake. Template letters will be provided by your Immunisation Co-ordinator to help with the call-up process. These will be made available nearer the time of commencement of the programme. You may wish to include a copy of the 2014 shingles materials with the invitation (see paragraph 25 for details).

**Uptake Rates**

8. Average uptake rates in practices across Scotland to the end of May 2014 were 54.7% for the 70 year olds in the routine programme and 50.6% for the 79 year olds in the catch-up cohort. A letter was issued to all GP Practices on 11 June 2014 highlighting uptake rates and reminding practices that they can continue to invite 70 and 79 year olds eligible in year 1 of the programme (2013-2014) until 31 August 2014.

9. Furthermore, it has been agreed that during the 14/15 programme, GPs can continue to vaccinate any 70 year olds who were eligible in year 1 (13/14) but did not take up the offer (ie those individuals who were 70 years on 1 September 2013). This decision will apply in the first instance for 2014-15 only and will be subject to review for future years.

10. The vaccine is not recommended for people aged 80 years and over. Those individuals who were aged 79 in year 1 of the programme (2013/14) will no longer be eligible from 1 September 2014.

**Further Information**

11. A chapter on shingles, including clinical advice and information about the shingles vaccine, has been included in *Immunisation against Infectious Disease 2006* (the Green Book), available to read at: https://www.gov.uk/government/publications/shingles-herpes-zoster-the-green-book-chapter-28a. It is important for all staff to ensure that they always refer to the most recent online version of the Green Book, in addition to this letter.


13. Annex A to this letter includes detailed information about surveillance and monitoring, communications and contractual issues.
Action

14. Recipients are asked to note the contents of this letter, including the important information in Annex A, and to take action as necessary to support this important public health programme.

Yours sincerely,

Aileen Keel  Ros Moore  Bill Scott

Aileen Keel CBE  Acting Chief Medical Officer
Ros Moore  Chief Nursing Officer
Professor Bill Scott  Chief Pharmaceutical Officer
Timing

1. Year 2 of the shingles vaccination programme will begin on 1 September 2014 and end on 31 August 2015.

2. To ensure adequate supplies of vaccine for each year of the programme, and given the short shelf life of the product, the vaccine has been purchased centrally to ensure enough vaccine is available to deliver to one (routine) cohort each year, and for the (catch-up) cohort in 2014/15.

Eligibility

3. Patients who are eligible for vaccination in the routine and catch-up programmes in 2014/15 (Year 2) are detailed below:

   - The routine cohort for those aged 70 in 2014/15 is defined by the patient’s age on 1st September 2014. Those born between 2 September 1943 and 1 September 1944 should be offered the vaccine in the 2014/15 routine programme.

   - The catch-up cohort for those aged 78 in 2014/15 is defined by the patient’s age on 1st September 2014. Those born between 2 September 1935 and 1 September 1936 should be offered vaccine in the 2014/15 catch-up programme.

   - The catch-up cohort for those aged 79 in 2014/15 is defined by the patient’s age on 1st September 2014. Those born between 2 September 1934 and 1 September 1935 should be offered vaccine in the 2014/15 catch-up programme.

4. NHS Boards and GP practices are reminded of their responsibilities in the vaccination of eligible persons in care homes and long-term hospital care.

5. Central vaccine supply must only be used for those in the eligible cohorts.

Recommendations for use of the vaccine

6. Zostavax® is the only shingles vaccine with market authorisation available in the UK. It contains live, attenuated virus derived from the Oka/Merck strain of varicella zoster virus. It should be noted that there is a pork gelatin content in the shingles vaccine, a common ingredient in many medicines. The Immunisation Scotland website contains further information on this issue [http://www.immunisationscotland.org.uk/vaccines-and-diseases/shingles.aspx](http://www.immunisationscotland.org.uk/vaccines-and-diseases/shingles.aspx)

7. Full details on dosage, administration, concomitant administration with other vaccines, contraindications, consent and reporting of adverse reactions is set out in the chapter 28a on Shingles (Herpes Zoster) This is available online at: [https://www.gov.uk/government/publications/shingles-herpes-zoster-the-green-book-chapter-28a](https://www.gov.uk/government/publications/shingles-herpes-zoster-the-green-book-chapter-28a).

Supply

8. Zostavax® should be ordered through NHS vaccine holding centres using the ordering system required by each NHS Board. GP practices and vaccine holding centres must liaise
closely to ensure sufficient vaccine availability prior to the scheduling of immunisation appointments. Holding centres will order vaccines from ImmForm.

9. There is sufficient vaccine stock available for all shingles vaccinations in 2014/15. The expiry date of some of the earliest distributed vaccine stock is 30 September 2014. Subsequent batches of distributed stock have expiry dates ranging between October 2014 and April 2015. **It would be helpful if all stock could be checked to ensure the vaccine with the shortest remaining shelf life is used first.** Any stock that is not used in the first year can be used in the second year of the programme (starting on 1 September 2014).

**Storage**

10. Vaccines should be stored in the original packaging at +2°C to +8°C and protected from light. All vaccines may be sensitive to some extent to heat and cold. Heat speeds up the decline in potency of most vaccines, thus reducing their shelf life. Do not freeze. Freezing may cause increased reactogenicity and loss of potency for some vaccines. It can also cause hairline cracks in the container, leading to contamination of the contents.

**Vaccine Stock Management**

11. Please ensure sufficient fridge space is available for the new vaccine. Each site holding vaccine is asked to review current stocks of all vaccines. No more than 2 to 4 weeks of stock is recommended, and higher stock levels should be reduced to this level. A review of available fridge space will be necessary to ensure adequate storage capacity at the start of the programme.

12. Effective management of vaccines throughout the supply chain is essential to reduce vaccine wastage, including the use of appropriate cool boxes/bags for transporting the vaccine during home/care home visits. Local protocols should be in place to reduce vaccine wastage to a minimum. Even small percentage reductions in vaccine wastage will have a major impact on the financing of vaccine supplies.

**Reporting of Adverse Reactions**

13. Suspected adverse reactions (ADR) to vaccines should be reported via the Yellow Card Scheme (www.mhra.gov.uk/yellowcard). Chapter 9 of the Green Book gives detailed guidance about which ADRs to report and how to do so. Additionally, Chapter 8 of the Green Book provides detailed advice on managing ADRs following immunisation. Information on the side effects of Zostavax® is available in Chapter 28a of the Green Book. These chapters are available at: https://www.gov.uk/government/organisations/public-health-england/series/immunisation-against-infectious-disease-the-green-book.

**Patient Group Directions**


15. A national specimen Patient Group Direction (PGD) for administration of Zostavax® updated for year two of the programme will be available on the Health Protection Scotland website at http://www.hps.scot.nhs.uk/immvax/pgd.aspx.
Monitoring Vaccine Uptake: Data Extraction

16. Health Protection Scotland (HPS) will lead in monitoring vaccine uptake on behalf of the Scottish Government. This will be primarily managed by extracting uptake information from GP systems by age and gender. Estimated vaccine uptake rates will be published on a monthly basis in the HPS shingles report. The data made available will include vaccine uptake by month in the year 2014/15. In future, comparison data will be available to allow NHS Boards to monitor the success of their strategy to increase uptake.

17. The Scottish Clinical Information Management in Practice (SCIMP) website provides very good information and guidance on coding, recording of vaccinations and exceptions (e.g. where a vaccine is contraindicated), as well as links to relevant documents. Colleagues in primary care or within NHS Boards with general queries about data extraction and coding, should refer to the SCIMP website in the first instance: http://www.scimp.scot.nhs.uk/.

18. To accurately measure percentage uptake in the two eligible age groups, is important to ensure that the size of these eligible populations – i.e. the denominators of the population who are to be offered vaccination – is accurately and consistently described and that mechanisms are put in place by general practices to ensure their validity.

19. To this effect, at the end of August 2015, GP practices should send to Practitioner Services Division (PSD): 1) a single figure for the total number of eligible people aged 70 years as of 1 September 2014, and 2) a figure for the total number of eligible people aged 78 and 79 years as of 1 September 2014 within their practice population as part of their immunisation payment claim (Directed Enhanced Service). The denominator figure for percentage uptake calculations will be used for statistical purposes and is important as this information allows HPS to validate the estimated uptake figures collected throughout the year for those eligible to receive shingles vaccine.

20. For further information regarding the HPS vaccine uptake monitoring programme, please contact nss.immunisation@nhs.net

GP Contractual Arrangements

21. A revised DES will be issued to reflect the programme, which will come as a routine vaccination for 70 year olds from September 2014 and a catch-up programme for 78 and 79 year olds in 2014-15. Practitioner Services Division will provide the details of the process for claims for payment which can be made for shingles vaccination. We are happy for GP surgeries to decide, (subject to vaccine availability), on the exact timings of vaccinations throughout the year, and the fee will be £7.67 per course (one dose) for this additional work.

22. As previously notified, SGHSCID is meeting the vaccine purchase costs (including delivery to vaccine holding centres) associated with this programme and Boards are meeting the service delivery costs, including GP costs, from their baseline resources.

23. We ask Boards to ensure that practice attached staff are appropriately engaged in assisting practices to deliver immunisations.

Communications and information for patients and health professionals

24. Further information about the full range of immunisations and vaccines in Scotland is available on the public information website: www.immunisationscotland.org.uk
25. Information leaflets and posters for year 2 (from September 1\textsuperscript{st} 2014) will be made available to GP practices to support this immunisation programme. The general public should also be directed to \url{www.immunisationscotland.org.uk} for up to date information on the vaccine. Any questions in relation to the public information materials should be directed to the Publications Team at NHS Health Scotland on 0131 314 5300 or \texttt{nhs.healthscotland-publications@nhs.net}.

26. The leaflet will also be available in Urdu, Chinese and Polish, and in Easy Read format. NHS Health Scotland is happy to consider requests for other languages and formats. Please contact 0131 314 5300 or email \texttt{nhs.healthscotland-alternativeformats@nhs.net}

27. NHS Education for Scotland in partnership with Health Protection Scotland has produced educational resources for registered healthcare practitioners including training slides and a question and answer resource. Once updated, these will be available at: \url{http://www.nes.scot.nhs.uk/education-and-training/by-theme-initiative/public-health/health-protection/immunisation/shingles.aspx}
