

# Immunisation Schedule changes 1 November 2023

## Changes to the Shingles (zoster) vaccination program

### General practitioners and Aboriginal medical services

#### Please distribute to all doctors and staff in your practice

1. From 1 November 2023, Shingrix®, a new recombinant zoster vaccine will replace Zostavax® on the National Immunisation Program (NIP).
2. Shingrix® is a **non-live** vaccine and is highly effective in the prevention of herpes zoster and its complications, including post-herpetic neuralgia, in both immunocompetent and immunocompromised people.
3. Shingrix® is funded as a 2-dose course for eligible people.

#### Introduction of Shingrix® to the Immunisation Schedule

- From 1 November 2023, Shingrix® will replace Zostavax® on the National Immunisation Program Schedule.
- Shingrix® is a non-live vaccine and provides strong protection against herpes zoster and its complications, including post-herpetic neuralgia, in both immunocompetent and immunocompromised people.
- Zostavax® vaccine will be removed and no longer provided on the NIP from 1 November 2023. Immunisation providers may continue to order Zostavax® for people aged 70 years old who prefer to receive this vaccine until they expire in 2024. Immunisation providers may discard Zostavax® vaccines if there is no patient demand and report discarded amount in the online vaccine ordering system.

#### Eligibility

- The recommendation for zoster vaccination has changed. A 2-dose course of Shingrix® is free for:
  - Adults aged 65 years and over
  - Aboriginal and Torres Strait Islander adults aged 50 years and over
  - Immunocompromised adults aged 18 years and over with the following medical risk conditions:
    - haemopoietic stem cell transplant
    - solid organ transplant
    - haematological malignancy
    - advanced or untreated HIV
- Eligible people who have received one Shingrix® dose privately can receive their second dose free under the NIP provided they are 65 years of age and over. There is currently no recommendation for booster doses of Shingrix® vaccine.
- If a patient has previously received Zostavax®, they cannot receive Shingrix® for free under the NIP until at least 5 years after the Zostavax® dose. The person will still need to complete the 2-dose schedule of Shingrix.

## Shingrix® ordering

- From 30<sup>th</sup> October 2023, immunisation providers will be able to order supplies of Shingrix® through the [NSW Vaccine Centre online ordering system](#). You can begin administering the vaccine from 1 November 2023.

## Resources

- Resources on the Australian Government and NSW Health webpages will help you prepare for the roll-out of Shingrix®. See Further Information below.
- Immunisation providers will receive a hardcopy of the updated [NSW Immunisation Schedule, NSW Schedule poster](#) (with vaccine images) and fridge basket stickers in the coming weeks. Additional copies can be ordered by completing the NSW Immunisation Resource Order Form available on the NSW Health webpage at [www.health.nsw.gov.au/publications/Pages/order-a-pub.aspx](http://www.health.nsw.gov.au/publications/Pages/order-a-pub.aspx)
- Ensure your practice has access to the Australian Immunisation Register (AIR) and check the patients AIR record prior to administration of the vaccine, either via clinical practice software or the AIR site.
- Immunisation providers are encouraged to have culturally appropriate, supportive conversations with Aboriginal and Torres Strait Islander patients about eligibility for free vaccinations under the NIP. Resources to support conversation about vaccination with Aboriginal and Torres Strait Islander people will be available on the Department's website at [www.health.gov.au/immunisation](http://www.health.gov.au/immunisation)

## Vaccine storage

- The vaccine must be stored at +2°C to +8°C in the original cardboard packaging to protect from light and should not be frozen.
- Report any cold chain breaches to your local public health unit on **1300 066 055**.
- Further information about cold chain breach protocols is available at [www.health.nsw.gov.au/immunisation/Pages/ccb-protocol.aspx](http://www.health.nsw.gov.au/immunisation/Pages/ccb-protocol.aspx).

## Vaccination at Residential Aged Care Facilities

- If you provide immunisation services to residents at Residential Aged Care Facilities, please ensure the vaccines are packed and stored at +2°C and +8°C during transport and administration at the facility.

## Other important information on Shingrix®

- Shingrix® is a 2-dose vaccination schedule given 2–6 months apart, or 1–2 months apart in people who are immunocompromised or shortly expected to be immunocompromised.
- Shingrix® must not be used for prevention of primary varicella infection (chickenpox) or for the treatment of acute herpes zoster illness or post-herpetic neuralgia.
- Shingrix® must be reconstituted and administered via intramuscular injection, preferably in the deltoid muscle.
- Shingrix® can be co-administered with other inactivated vaccines such as tetanus-containing vaccines, pneumococcal vaccines, influenza vaccines and COVID-19 vaccines. However, it is preferable that Shingrix® be given by itself where possible as there is potential for increased adverse events when more than one vaccine is given at the same time.
- For further information refer to the TGA Product Information at <https://www.tga.gov.au/resources/artg/289257>

## Vaccine safety

- Shingrix® is a non-live vaccine and is safe for use in both immunocompetent and immunocompromised people.

- Local injection site reactions such as pain, redness and swelling are common. Patients may also experience tiredness, muscle aches, headaches, and fever. Rates of local and systemic reactions appear to be slightly higher for Shingrix® than Zostavax®.
- There is a very rare risk of Guillain–Barré syndrome (GBS) occurring in individuals who have received the Shingrix vaccine. However, GBS has also been reported following shingles disease and the overall benefits of vaccination outweigh the risks of GBS.
- Before vaccination, immunisation providers should advise their patients of expected reactions and the importance of completing the two-dose schedule for an adequate level and duration of protection.
- Shingrix® does not contain latex or preservatives.
- Adverse events following immunisation (AEFI) are notifiable under the NSW Public Health Act. To report an AEFI, please download the National AEFI Reporting Form at the TGA website at [www.tga.gov.au/resources/resource/forms/national-adverse-events-following-immunisation-aefi-reporting-form#aefi-form](http://www.tga.gov.au/resources/resource/forms/national-adverse-events-following-immunisation-aefi-reporting-form#aefi-form) and contact your local public health unit on **1300 066 055**.

## Further information

- NSW Health Immunisation Schedule Change webpage and frequently asked questions at <https://www.health.nsw.gov.au/immunisation/Pages/schedule-changes-november-2023.aspx>
- NSW Immunisation Schedule <https://www.health.nsw.gov.au/immunisation/Publications/nsw-immunisation-schedule.pdf>
- NSW Schedule poster (with vaccine images) <https://www.health.nsw.gov.au/immunisation/Publications/a3-childhood-schedule.pdf>
- Australian Immunisation Handbook <https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/zoster-herpes-zoster>
- ‘Shingrix®’ website, operated by GlaxoSmithKline for health professionals at <https://au.gsk.com/en-au/home/>
- NSW Health Adverse event following immunisation (AEFI) <https://www.health.nsw.gov.au/immunisation/Pages/aeфи.aspx>
- Contact your local Public Health Unit on **1300 066 055**