Department of Health
TE TARI ORA

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30 April 1992

Hilary Butler
25 Harrisville Road
Tuakau
AUCKLAND

Dear Hilary Butler

Thank you for your facsimile letter of 8 April about hepatitis B vaccination of babies born to mothers who are not hepatitis B carriers.

The circular memorandum issued to hospitals and area health boards in 1988 recommended that the first injection should be delayed until shortly before discharge.

In these newborns the minor side-effects of hepatitis B vaccination could mask underlying illness or congenital conditions, delaying diagnosis and appropriate treatment. Ultimately, however, the decision when to administer the vaccine is a clinical one to be made after the informed consent of the parents has been obtained.

The current schedule for hepatitis B vaccination for babies born to mothers who are not hepatitis B carriers requires the first dose to be given at six weeks.

Yours sincerely

Dr Peter Talbot
Manager
Public Health Services

File

1041R

DEPARTMENT OF HEALTH

HEAD OFFICE
MACARTHY TRUST BUILDING
LAMBTON QUAY, WELLINGTON
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REPLY REFERENCE

131/171/4

21 March 1988

DEPARTMENT OF HEALTH CIRCULAR MEMORANDUM
Hospital and Area Health Boards Head Office No. 1988/36

Officer for enquiries: Dr N W Ashworth

Minor side effects from the first H-B-VAX injection in a newborn baby may be confused with more serious ill health and it is recommended that the first injection should be delayed until shortly before discharge home in the case of babies of healthy mothers. (See later for babies of carrier mothers).

Contraindications and Precautions

The vaccine should only be given to healthy and thriving babies.

Any serious active infection is reason for delaying use of H-B-VAX, except when, in the opinion of the physician, withholding the agent entails even greater risk.

Caution and appropriate care should be exercised in administering H-B-VAX to individuals with severely compromised cardiopulmonary status or to others in whom a febrile or systemic reaction could pose a significant risk.

In cases of serious doubt, the first injection may be conveniently delayed until the child's first visit to the general practitioner at the age of six weeks. The second and third injections can then be coincided with subsequent visits at 3 months and 5 months, and the fourth booster dose given at 15 months according to the regular schedule.

DEPARTMENT OF HEALTH

SOUTH AUCKLAND DISTRICT OFFICE
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Reply ref:

# HEPATITIS "B" VACCINE - SEVERE ALLERGIC RESPONSE

We have been advised by Dr Nigel Ashworth, National Coordinator that according to Professor Ralph Edwards, The Medical Assessor for medicines adverse reaction, the potential for severe allergic reaction response to Hepatitis "B" vaccine exists.

Accordingly, on his recommendation, the following policy should be adhered to by all involved with Hepatitis "B" Immunization Programme.

1. Allergic Response: If it included anaphylactic shock, hypotension, bronchospasm or angio-neurotic oedema then any further immunization is absolutely contra-indicated. The onset of symptoms should have been within 12 hours after an injection of Hepatitis "B" vaccine in order to classify the above conditions as vaccine related.

2. Urticaria: Children who developed vaccine related urticaria alone, it is recommended that any subsequent vaccinations to be given in a hospital setting preferably after skin testing. Full support facilities must be available in case the reaction is worse the next time.

Farhat Mahmood
Principal Medical Officer

23 May 1988

HAMILTON ~~DEPARTMENT OF HEALTH~~
(From HEAD OFFICE, WELLINGTON)

FACSIMILE NO: (04) 711-717
TELEPHONE NO: (04) 727-627

FACSIMILE COVER PAGE

DATE: 17 / 5 / 88

The following documentation is for the attention of:

NAME:
SECTION: HEPATITIS B CO-ORDINATORS
DEPARTMENT/COMPANY: DEPARTMENT OF HEALTH -
ALL HEALTH DEVELOPMENT UNITS
ALL AREA HEALTH BOARDS
CITY:
COUNTRY:
FACSIMILE NUMBER:

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FROM: NIGEL ASHWORTH
NATIONAL HEPATITIS B CO-ORDINATOR
SECTION: HEALTH PROTECTION PROGRAMME
DESIGNATION: PRINCIPAL MEDICAL OFFICER

IMPORTANT

TOTAL NUMBER OF PAGES ....1.....(INCLUDING COVER PAGE)

We have received approximately 10 reports of anaphylactoid reactions occurring in children receiving hepatitis B vaccine injections. This is obviously a matter of considerable concern to us and the matter has been discussed with Professor Ralph Edwards, the Medical Assessor for Medicines Adverse Reactions, and others.

He reports that 14 similar reactions have occurred since 1985 in Australia and he feels sure that the potential for severe allergic response exists. Accordingly, on his recommendation, the following policy should be adhered to by all involved with the hepatitis B immunisation programme:

1. For children who have developed vaccine-related URTICARIA ALONE it is recommended that any subsequent vaccinations be given in a hospital setting, preferably after skin testing, but certainly with full support facilities available in case the reaction is worse the next time.
2. If the allergic response includes ANAPHYLACTIC SHOCK, HYPOTENSION BRONCHOSPASM or TRUE ANGIONEUROTIC OEDEMA, then it is considered that any further vaccination is absolutely contraindicated.

It is felt that for the above conditions to be classified as vaccine related, the onset of symptoms should be WITHIN 12 HOURS AFTER AN INJECTION OF HEPATITIS B VACCINE.

* * *

PLEASE ENSURE THAT THIS INFORMATION IS DRAWN TO THE ATTENTION OF ALL CONCERNED. IMMEDIATELY.

17-05-'88 11:50 DEPT OF HEALTH COMM UNIT