Immunization for Protection Against Avian Influenza

Table of Contents_

Description of Avian Influenza Vaccine

The vaccine available for protection against avian influenza is AREPANRIX™ H5N1. AREPANRIX™ H5N1 vaccine is a monovalent AS03-adjuvanted H5N1 vaccine for use in individuals aged 6 months and older. It has not previously been used within Canada.

AREPANRIX™ H5N1 vaccine protects against a specific strain of the influenza A virus like the seasonal influenza vaccine. It protects against the A/American wigeon clade, which is genetically similar to the clade detected in human cases in the US.

Additional information:

- Search product monograph on Drug Product Database online query (canada.ca)
- See Canadian Immunization Guide Content of Immunizing Agents Available for Use in Canada for product content information.

Vaccine Administration

Dose:	0.25ml for individuals 6 months to 17 years of age. 0.5 ml for individuals 18 years of age and older
Route:	Intramuscular (IM)
Site:	Deltoid muscle is the preferred injection site for eligible individuals. Vastus Lateralus muscle is recommended for eligible individuals under 12 months of age.

Vaccine Series Completion

AREPANRIX™ H5N1 vaccine is a 2-dose vaccine series given at a recommended interval of 8 weeks apart.

Concurrent Administration:

AREPANRIX™ H5N1 vaccine **should not be given** concurrently with other vaccines. An interval of 6 weeks pre and post administration of AREPANRIX™ H5N1 vaccine should be utilized. This interval can be shortened if other vaccines are urgently needed, based on clinical discretion.

Storage and Handling:

AREPANRIX™ H5N1 vaccine should be stored at 2°C to 8°C and be protected from light and not frozen. The adjuvant and antigen are supplied in separate vials and should be mixed before administration. After mixing, the vaccine should be stored in a refrigerator (2°C to 8°C) or at room temperature (up to 30°C). If the mixed vaccine is stored in the refrigerator, it should be allowed to reach room temperature before each withdrawal (allow a minimum of 15 minutes).

Mixed vaccine should be used within 24 hours. The mixed final product for administration is an emulsion with enough vaccine for 10 doses.

Refer to Storage and Handling of Immunizing Agents for more information on the storage of AREPANRIX™ H5N1 vaccine.

Avian Influenza Vaccine Eligibility Policy

The provincial immunization program provides vaccine for protection against avian influenza free of charge based on the following eligibility criteria:

1. Personnel working with live avian influenza A(H5N1) virus (culture, isolation, manipulation) in laboratory settings

2. People with ongoing exposure to sick or dead birds or mammals with suspected or confirmed avian influenza A(H5N1) infections or their environments (e.g., conservation staff, wildlife researchers, wildlife rehabilitators, veterinarians / veterinary technicians routinely involved in the response to confirmed/suspected avian influenza A(H5N1), including those performing necropsies).

3. Those routinely involved in poultry culling and related operations (e.g., cleaning, disinfection) in the context of suspected/confirmed avian influenza A(H5N1).

Screening Guidelines

See section 1.5 of the Provincial Immunization manual for additional screening information.

Screening Questions

- **Has the individual had an anaphylactic reaction to a previous dose of the vaccine?**
  Yes: Determine the nature and severity of the reaction. AREPANRIX™ H5N1 vaccine is contraindicated in persons with a history of anaphylaxis after previous administration of the vaccine and in persons with proven immediate or anaphylactic hypersensitivity to any component of the vaccine. If required defer immunization and complete an AEFI report for MOH/designate consult

- **Is the individual allergic to any component of the vaccine, as listed in the product monograph?**
  Yes: Defer immunization and consult with the MOH/designate as needed. It may be necessary to immunize in a controlled setting.

- **Does the individual have a moderate to severe illness, with or without a fever?**
  Yes: Defer immunization with vaccine until the individual is well.

- **Are there additional considerations for individuals that are immunocompromised, pregnant or breastfeeding?**
  There is no available clinical data for the use of this vaccine in pregnant or breastfeeding individuals, though seasonal influenza vaccine is considered safe in these populations. Individuals who are immunocompromised may have a diminished or insufficient immune response. See the product monograph and Canadian Immunization Guide: Part 3. Vaccination of specific populations for more information. Provider discretion is advised and informed consent should include any special considerations for these populations.

- **Are there alternate vaccine schedules that can be utilized to complete the 2-dose series?**
  Ideally, two doses of AREPANRIX™ H5N1 vaccine should be administered 8 weeks apart. AREPANRIX™ H5N1 vaccine should also be administered with an interval of 6 weeks from other vaccines. This timeframe can be shortened if another vaccine is needed urgently, based on clinical discretion.

Not Contraindications

- Mild illness
- Individuals is taking an antibiotic
- Coagulation disorder (use appropriate gauge needle and apply firm pressure for at least two minutes post administration of immunization)
- Egg allergy history

Contraindications

- Anaphylaxis to a previous dose of AREPANRIX™ H5N1 vaccine or to any of the components of the vaccine
- Acute moderate to severe illness with or without a fever