

### **Reinstatement of the Booster Dose of Hib Vaccine at Ages 12–15 Months**

Beginning in July 2009, sanofi-pasteur will increase the number of doses of Pentacel (DTaP/IPV/Hib) and ActHib available for use in the United States, which will result in the supply being sufficient to reinstate the Hib vaccine booster dose.

The Centers for Disease Control and Prevention is continuing to determine how much Hib containing vaccine Washington and other states can receive. For Washington, the majority of the allocation (2/3) will continue to be in the form of the combination vaccine Pentacel. Only 1/3 of the allocation is in the form of ActHib. All providers will continue to be allowed to order ActHib. However, there is not a sufficient supply of ActHib for providers currently using Pentacel to switch to 100% single component ActHib. Providers currently using Pentacel should continue its use for at least the 3 dose primary series, as well as the 4<sup>th</sup> dose in the DTaP, IPV Hib series.

Local health department immunization coordinators will be given the July allocations for Hib containing vaccines in order to assure that over-ordering of ActHib does not occur. State and local public health will monitor provider vaccine inventory and ordering based on the 4 dose series, to ensure Washington stays within the CDC allowed allocation.

More information regarding child care entry requirements when vaccination for the 4 dose series is completed with Pentacel will be made available soon.

Please see the information below about the return to the four dose Hib series.

**Effective immediately**, CDC, in consultation with ACIP, AAFP, and AAP, is recommending reinstatement of the booster dose of Hib vaccine for children aged 12–15 months who have completed the primary 3-dose series. Although supply is sufficient to reinstate the booster dose and begin catch-up vaccination, supply is **not yet** ample enough to support a mass notification process to contact all children with deferred Hib booster doses.

- Infants should continue to receive the primary Hib vaccine series at ages 2, 4, and 6 months.
- Children aged 12–15 months should receive the booster dose on time.
- Older children for whom the booster dose was deferred should receive their Hib booster dose at the next routinely scheduled visit or medical encounter.

### **Use of Combination Vaccines:**

A mismatch might exist between patient vaccination needs and the available stock of combination products versus single-antigen vaccines in local provider offices.

- Children who need the Hib booster and who already have received 4 doses of DTaP should receive monovalent Hib vaccine (ActHIB) as their Hib booster dose.
- **However,** if DTaP-IPV/Hib is the only Hib-containing vaccine available, this combination product can be used to complete the series of Hib vaccination, even if the child already has received all the necessary doses of DTaP and IPV.
- Providers using DTaP-IPV/Hib (Pentacel) vaccine should monitor their monovalent HepB vaccine to ensure adequate supply is available to complete the HepB vaccine series.

For more information, see the Morbidity and Mortality Weekly Report at:

<http://www.cdc.gov/mmwr/>