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Packaging Changes to Act-HIB®

The Act-HIB® Haemophilus influenzae b Conjugate (Tetanus Protein-Conjugate) Vaccine manufactured by sanofi pasteur has changed its diluent container from an ampoule to a vial format. The vaccine stopper of the new diluent vial is latex-free. Please note that the formulation of the vaccine has not been changed in any way. As with the previous ampoule format, the new vial contains enough diluent (0.5ml) to reconstitute a single dose of freeze-dried Act-HIB®.

There are no changes to the way the vaccine should be administered.

New Imovax® Polio, Inactivated Poliovirus Vaccine (IPV)

Sanofi pasteur has replaced their old IPV with the new IPV Imovax® Polio (IPV-vero cell origin). This new vaccine is not to be confused with another sanofi pasteur vaccine called Imovax® Rabies (Rabies vaccine inactivated). Imovax® Polio vaccine is now packaged as 1 box containing 10 single dose needleless syringes, each individually packaged. Please note, there are no changes in the way the vaccine should be administered. The syringe is preservative free and all components of the syringe are latex free.

To order these two vaccines please call the Vaccine Order Desk at **(905) 791-7800 ext. 6404**.

These vaccines cannot be ordered from Peel Public Health via fax or online order form.

Adacel Eligibility in Adolescents

The Ministry of Health and Long-Term Care (MOHLTC) now states all individuals who are due for their adolescent booster are eligible to receive one dose of provincially funded Adacel® (Diphtheria, Tetanus, and Pertussis vaccine) regardless of prior doses of acellular Pertussis vaccine in early childhood.

Previously, the Ministry of Health and Long-Term Care (MOHLTC) had limited eligibility to Adacel® to adolescents who had not received Pertussis protection in their childhood immunizations (e.g. Quadracel® or Pentacel®).

Storage and Handling of Diluents¹

- Diluents do not have to be stored between +2° and +8° Celsius.
- To protect vaccine from thermal shock when reconstituting, diluents should be pre-cooled for at least 24 hours.
- Diluents must not be frozen because the ampoule or vial may freeze and crack, leaving the diluent exposed to contamination.
- Diluents are not interchangeable between vaccines. The diluent that is provided with the vaccine should only be used to reconstitute that specific vaccine.
- Sterile water should not be used to replace diluent, and diluent should not be used as sterile water.
- Ensure that the volume of diluent used to reconstitute the powdered vaccine is correct, so the correct number of doses per vial and correct dilution is created per vial.

¹**Reference:** World Health Organization. Proper handling and reconstitution of vaccines avoids program errors. *Vaccines and Biologicals Update*: December 2000; 34.

Mumps Outbreak in Maritime Provinces

Nova Scotia, New Brunswick and Prince Edward Island are experiencing an ongoing mumps outbreak in university aged students (median age 22). Many of the cases received a single dose of MMR at 1 year of age and the single antigen measles vaccine during the 1996 catch-up campaign.

Students from these provinces may be returning home for the summer. If any such client presents experiencing related symptoms, please consider that they may have been in contact with a mumps case.

Clinical Presentation of Mumps

Mumps is a contagious viral illness characterized by the acute onset of unilateral or bilateral tender, self-limited swelling of the parotid or other salivary glands lasting 2 or more days without another apparent cause.

Diagnostic Testing for Suspect Cases

Specimens for both virus isolation and serologic testing should be obtained early in the course of illness to confirm mumps infection.

Virus isolation by culture:

Obtain up to 9 days after symptom onset by either:

- buccal swab (first choice)
- throat swab, and/or
- urine sample - clean catch

Serology

Acute Serology:

- A blood test for mumps IgM and IgG taken 3 to 5 days after the onset of symptoms.
- Detection of IgM confirms the diagnosis of mumps.

Convalescent serology:

- A second test obtained 14 days or more after symptom onset
- Seroconversion or a significant rise in IgG is indicative of recent infection.

Note: If the acute serology results show low, indeterminate or negative IgM and IgG, repeat both tests in 1 to 2 weeks.

The laboratory requisition should:

- Include the reason for testing;
- Include relevant clinical information (e.g. suspect mumps, recent vaccination history, date of onset of parotitis, and recent travel);
- Be marked "STAT"; and
- Be forwarded to Central Public Health Laboratory.

If you have any questions, please call Peel Public Health at (905) 799-7700.