Commonwealth CMO Prof Jim Bishop has advised the Government that, as a precaution, seasonal flu vaccination for healthy children under five should continue to be suspended. His advice followed his considering of the results to date of a comprehensive investigation into the safety of the seasonal flu vaccine for young children.

Since the first reports of a higher than usual occurrence of fever with convulsions in young children following seasonal flu vaccination in WA in April, investigations nationally had confirmed that a small number of children aged under five across the country had experienced fever with convulsions in the 24 hours after vaccination with the 2010 seasonal influenza vaccine, Prof Bishop said.

These reactions had been associated mainly with Fluvax, manufactured by CSL.

Epidemiological analyses had pointed to a rate of febrile convulsions in children under five following 2010 seasonal influenza vaccination of about 9 per 1000 children vaccinated, while the expected rate was less than 1 per 1000.

The interim findings of the investigation plus recommendations are summarised on Australian Medicine Online.

The investigation was conducted by the Therapeutic Goods Administration (TGA), in association with the Australian Technical Advisory Group on Immunisation (ATAGI) and the National Centre for Immunisation Research and Surveillance. It had identified no apparent clinical, biological or epidemiological factors that would explain the higher than expected observed rates of fever with convulsions. Prof Bishop said. Laboratory testing of the vaccine by the TGA and an audit of the CSL manufacturing plant had also revealed no abnormalities to explain this event.

“However this investigation is continuing.”

Although putting forward his recommendation, Prof Bishop said that where children under five had medical risk factors that would cause serious health effects for them if they got the flu, parents should discuss with their doctor whether or not, on clinical evaluation of the risks and benefits, a seasonal flu vaccination would be the best option.

“Doctors should note that, while a higher rate of febrile convulsions has been identified using Fluvax, insufficient doses of this season’s Influvac and Vaxigrip vaccines have been used in children in this age group to determine accurately the rates for these vaccines,” he said. “In addition, as the cause of the increase in febrile convulsions is not yet known, caution should be exercised.”

Prof Bishop added that the swine flu vaccine Panvax was an alternative for both healthy children and those with risk factors. It had been shown to be safe and effective in young children and was freely available.

The TGA would continue to work with overseas regulators and the US Centers for Disease Control and Prevention “to ascertain the scientific reason for this phenomenon”, he said.

More information is available on the Immunise Australia Hotline at 1800 671 811.

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