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Bulletin No. 2
February 14, 2002
Vaccine Shortage Requires Temporary Change to Recommendations
for Use of Varicella Vaccine

Currently several vaccines are in short supply throughout the United States. No single cause is responsible for this problem. The shortages are the result of business decisions on the part of different manufacturers, adherence to "good manufacturing practices" as outlined by the Food and Drug Administration, and thimerosal-related vaccine changes.

In general, the Section of Epidemiology has been able to maintain a steady vaccine supply for Alaska immunization providers. The notable exceptions have resulted in revised prioritization of vaccine use for adult tetanus/diphtheria (*Epidemiology Bulletin* No. 7, July 2, 2001), influenza (*Epidemiology Bulletin* No. 11, September 12, 2001 and *Epidemiology Bulletin* No. 12, September 13, 2001), and pneumococcal conjugate vaccines (*Epidemiology Bulletin* No. 13, October 3, 2001). Varicella vaccine is now in short supply. Therefore, the Section of Epidemiology issues the following new recommendation for varicella use.

**VARICELLA** - Because this fragile vaccine is shipped on dry ice directly to providers from the manufacturer, no reserve supply has been maintained in the State's central vaccine depot in Anchorage. Currently, Merck Vaccine Co. is filling varicella vaccine orders that they received at the beginning of December. Merck anticipates this vaccine shortage will be alleviated by mid-April.

The Section of Epidemiology places high emphasis on maintenance of the state's new varicella requirement for children enrolled in licensed child care facilities. Epidemiologically, these children are at greater risk of coming into contact with the varicella virus.

To assure vaccine is available for these children, the Section of Epidemiology requests voluntary cooperation from providers and families to use available varicella vaccine ONLY for children needing the vaccine to meet the child care facility entry requirement. Children who do not attend daycare should have their varicella immunization deferred until an adequate vaccine supply is available. (An announcement will be made through an *Epidemiology Bulletin* when the shortage is over.)

**DTaP** - Although DTaP supplies are extremely tight throughout the country, to date the Section of Epidemiology has been able to maintain DTaP supplies with minimal delays. Therefore, at this time we continue to support the standard recommendations for routine use of DTaP for any indicated dose. Should the supply become more restricted, the Section will issue new recommendations for temporary deferral of certain doses of vaccine.

**Projected Vaccine Supply** - The following chart outlines national vaccine shortage projections. However, the impact of these shortages on Alaska providers may be imperceptible or result only in short-term backorders.

## National Vaccine Supply Outlook for Selected Vaccines and Current Alaska Recommendations

Vaccines with Supply Shortages Or Delays	Projected NATIONAL Return to "Normal" Inventory	CURRENT Alaska Recommendations for Use
DTaP	Late summer or early fall	Follow routine recommendations.
Hep B/Hib (Comvax®)	Late spring	Follow routine recommendations.
Hib (PedVaxHib®)	Delays through March-April	Follow routine recommendations.
MMR	Currently OK	Follow routine recommendations.
PCV7 (Prevnar®)	Late spring	Use only for children <24 months of age and children 24-59 months of age who are medically high risk. (See Epidemiology Bulletin No. 13, Oct. 3, 2001.)
Td	Late spring	Use only for prophylaxis in wound management or for adults needing to complete 3 dose series. Do NOT use for routine adult/adolescent boosters. (See Epidemiology Bulletin No. 7, July 2, 2001.)
Varicella	Mid-April	Use only for children requiring vaccine for entry into an Alaska child care facility.

As vaccine shortages continue, the Section of Epidemiology will make every effort to maintain a steady supply of all vaccines for Alaska providers. Facilities experiencing severe shortages of needed vaccines should contact the Immunization Program (269-8000) to receive updates on vaccine availability. Highest priority will be given to assuring availability of vaccines required for school or child care attendance.