Minutes

Massachusetts Department of Public Health Massachusetts Vaccine Purchasing Advisory Council (MVPAC) Meeting*

*Note – A quorum was never attained during the course of this scheduled meeting therefore what is reflected below are not formal meeting minutes but a summary of what was informally discussed by the members of the Council who were in attendance

Date: Thursday, March 9, 2017

Time: 4-6 PM

Location: Massachusetts Medical Society, 860 Winter Street, Waltham, MA 02451

Council Member Attendees:

Kevin Cranston, MDiv
Raj Hazarika, MD, SM
Susan Lett, MD, MPH
Marissa Woltman

David Norton, MD
Ron Samuels, MD, MPH
Marissa Woltman

Additional Attendees:

Richard Aceto Leigh O'Mara, PhD Sue DeRemer Vitali Pool, MD

Beth English, MPH Corey Robertson, MD, MPH

Michael Goldstein Sherry Schilb Josh Harrell Jessica Sokola

Cynthia McReynolds Pejman Talebian, MA, MPH

DPH Updates

Mr. Cranston opened the meeting.

The meeting participants introduced themselves.

Mr. Cranston reviewed the open meeting laws and quorum requirements. He noted that there currently was not a Council quorum, but added that the opening section of the meeting could proceed without a quorum.

Mr. Talebian reported that he did not have any specific DPH updates.

Ms. English provided a Massachusetts Immunization Information System (MIIS) update. Currently, over 2,000 sites are reporting data to the MIIS. More than 40 million immunizations have been entered, representing approximately 6 million unique patients. 70 new sites have started reporting data in the past month.

Mr. Cranston provided a report from the Massachusetts Public Health Council. On March 8, 2017, the Public Health Council approved a change to 105 CMR 700.000 (implementation of Massachusetts General Law (M.G.L.) c. 94C). The change will allow pharmacists to administer

vaccines to children aged 9 and older. The change will take effect when the updated regulations are published.

Dr. Lett reviewed highlights from the 2017 childhood immunization schedule.

She discussed the vaccines for which there were revised footnotes and also the new bar which addresses vaccine indications for children ages 0 through 18 who have a specific medical indication.

Dr. Lett noted that an updated ACIP recommendation for hepatitis B vaccination is expected in June 2017. DPH manages approximately 300 to 400 mothers with hepatitis B vaccine infection and their infants each year.

Additional resources, including the *Morbidity and Mortality Weekly Report (MMWR)* article discussing the ACIP childhood immunization schedule recommendations were included in meeting handouts.

Dr. Lett also reviewed the updated ACIP recommendations regarding a 2-dose schedule for human papillomavirus (HPV) vaccination. She noted additional clinician HPV resources.

A break was taken.

Planned deliberation regarding addition of QuadracelTM (DTaP-IPV) vaccine

A determination was made that because the Council did not have a quorum, deliberation on whether to recommend that Quadracel (DTaP-IPV) vaccine be added to DPH's formulary could not be completed at this meeting.

In the absence of a quorum, Dr. Robertson graciously offered to present information on Quadracel vaccine to Council members in attendance.

Dr. Robertson reviewed the Quadracel vaccine indication. He reviewed the antigen components of the DTaP₅-containing vaccines manufactured by Sanofi Pasteur.

A Hib-containing component is in Pentacel[®] vaccine, but not in Quadracel vaccine (Quadracel vaccine is essentially the liquid component of Pentacel vaccine).

The pivotal clinical trial, M5102, which assessed the safety and immunogenicity of Quadracel vaccine, was summarized.

Quadracel vaccine induced higher immune responses, as assessed by geometric mean concentrations, for all pertussis antigens compared to separately administered DTaP (Daptacel® vaccine) and IPV (IPOL® vaccine). Quadracel vaccine met pre-specified non-inferiority criteria for all antigens. Booster responses for all antigens also met non-inferiority.

The safety data were reviewed. The vaccine was safe when administered to children 4 through 6 years of age.

ACIP guidance regarding use of Quadracel vaccine was noted. ACIP recommends that, whenever feasible, the same manufacturer's DTaP vaccines should be used for each dose in the series.

Quadracel vaccine is indicated for use as a booster dose in children aged 4 through 6 years who received Pentacel and/or Daptacel vaccine as the first 4 doses.

Quadracel vaccine is supplied in a single-dose vial. The packaging is different from the Pentacel vaccine packaging.

Quadracel vaccine is manufactured in Canada.

Discussion

In the event of a shortage, it is better to have more options.

It is important to emphasize the use of a single brand as best as possible, except in the event of a vaccine shortage.

No concerns were voiced.

Noting that there was not a quorum, DPH will take this discussion into consideration when making its own recommendation to Commissioner Bharel. The Commissioner may approve or disapprove based on this recommendation, or request that the Council re-visit this discussion at its next meeting.

Discussion regarding future topics for consideration

The next Council meeting will be held on June 8, 2017, beginning at 4:00 p.m. Discussion ensued about possible agenda items for the Council meeting.

Mr. Talebian noted that Council members should send agenda items for the June meeting to him.

The meeting was adjourned.

Future Meeting Dates:

June 8, 2017 October 12, 2017 March 8, 2018 June 14, 2018 October, 11 2018

 $\frac{MVPAC\ webpage:}{\underline{http://www.mass.gov/eohhs/gov/departments/dph/programs/id/immunization/mvpac.html}}$