

VACCINATION GUIDELINES

Catch-up vaccination in practice among newly arrived migrants

Examples in case of unknown, incomplete or incompletely known immunisation status

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OBJECTIVES

To decipher catch-up vaccination guidelines and provide healthcare professionals with examples of frequently encountered situations of catch-up vaccination in clinical practice.

IN CHILDREN

Eighteen-month-old child

Eighteen-month-old child, born in Romania, in France for 2 months, cared for in a Roma camp following an investigation into a case of tuberculosis. His mother says that he was vaccinated after birth in Romania and that he has not had a vaccine since the age of 1 year. He does not have a scar compatible with the BCG vaccine. Catch-up vaccination is implemented as follows:

- **D0:** perform HBsAg rapid diagnostic test and administer vaccines within the limit of 4 injections subject to acceptance by the legal representative and the child's tolerance:
 - DTCaPHibHepB then do a tetanus antibody assay and full hepatitis B serology (HBsAg, anti-HBs Ab, anti-HBc Ab), hepatitis A (IgG) and an IGRA test 4 to 8 weeks later if possible;
 - MMR (1);
 - PCV 13 (1);
 - Men C.

NB: if multiple injections are refused, it is advisable to increase the number of consultations, if possible on-site, to implement catch-up as soon as possible.

- **W8:** results of the anti-tetanus Ab tests, of the hepatitis B and hepatitis A serology tests and of the IGRA test and continuation of the vaccinations undertaken:
 - MMR (2);
 - PCV 13 (2) (NB: no third dose because more than 12 months old);
 - Anti-tetanus Ab <0.1 IU/ml: DTCaP (2);
 - HBsAg negative, anti-HBs Ab <10 IU/l, anti-HBc Ab negative: Hep B (2);
 - Anti-Hep A Ab positive;
 - Positive IGRA test: no BCG, referral to CLAT.
- **M8-12:** DTCaP (3) and Hep B (3).
- **Resumption of the vaccination schedule at 6 years:** DTCaP (booster).

Eleven-year-old girl

Eleven-year-old girl of Congolese origin (DRC) arrived in France 1 month ago. Her last vaccinations date back to the age of 2 years. Her mother reports that she has not received vaccines since early childhood. She does not have a scar compatible with the BCG vaccine. Her mother reports that her daughter has had chickenpox.

- **D0:** perform a "migrant health check-up" including hepatitis B serology (HBsAg, anti-HBs Ab, anti-HBc Ab) and hepatitis A serology (IgG) (along with an IGRA test if can be performed immediately); preferably start the following 4 injections subject to acceptance by the legal representative and the adolescent's tolerance:
 - DTcaP (1) and perform a tetanus antibody assay and an IGRA test within 4 to 8 weeks (the IGRA test must be performed at a distance from the MMR if the sample was not collected pre-vaccination);
 - MMR (1);
 - Men C;
 - HPV (1).
- **D7:** Hep B (1) if 3 negative markers with anti-HBs Ab <10 IU/l, and Hepatitis A (1) if negative anti-HAV IgG. Assay anti-HBs Ab within 4 to 8 weeks at the same time as the anti-tetanus Ab assay.
- **W8:**
 - MMR (2);
 - HPV (2);
 - Anti-tetanus Ab = 0.3 IU/ml (i.e. between 0.1 and 1 IU/ml): plan a new dose 6 months later;
 - Anti-HBs Ab = 80 IU/l (i.e. <100 IU/l): administer a second dose of Hep B (2).
- **M6-7:** DTcaP (2), HPV (3), Hep B (3), BCG¹ if IGRA negative (do not administer other vaccines in the same arm for 3 months).
- **M8:** Hep A (2).
- **Resumption of the vaccination schedule at 25 years:** dTcaP (booster).

1. During the supply difficulties, at-risk children under 5 years of age (migrant children born in a country with a high tuberculosis endemicity, or at least one of whose parents originates from one of these countries, or having to stay for 1 month or more in one of these countries, or children in a vulnerable situation), along with children born in Mayotte and Guyana, have priority.

Sixteen-year-old boy

Sixteen-year-old boy, "unaccompanied minor" of Malian origin, arrived in France 6 months ago and recently taken into care by child welfare services, coming to the vaccination centre accompanied by his educator. He does not remember having had vaccines since early childhood. He has a scar compatible with BCG vaccination. He does not remember having had chickenpox.

- **D0:** perform a "migrant health check-up" comprising hepatitis B serology (HBsAg, anti-HBs Ab, anti-HBc Ab), chickenpox and hepatitis A serology (IgG) (along with an IGRA test a sample can be taken immediately) and preferably start the following 4 injections:
 - dTcaP and perform a tetanus antibody assay and an IGRA test within 4 to 8 weeks (the IGRA test must be performed at a distance from the MMR if the sample was not collected pre-vaccination);
 - MMR (1);
 - Men C.
- **D7:** Hep B (1) if 3 negative markers with anti-HBs Ab <10 IU/l and risk of exposure, Chickenpox (1) if negative serology, Hep A (1) if anti-HAV IgG negative
- **W8:**
 - MMR (2);
 - Chickenpox (2);
 - Anti-tetanus Ab = 1.2 IU/ml (i.e. >1 IU/ml): STOP, resumption of the vaccination calendar;
 - Anti-HBs Ab = 150 IU/l (i.e. 100 IU/l): STOP hepatitis B vaccination;
 - Negative IGRA test: vaccination no longer indicated after 15 years.
- **M6:** Hep A (2)
- **Resumption of the vaccination schedule at 25 years:** dTcaP (booster).

Twenty four-year-old man with no health record

Twenty-four-year-old Syrian male asylum seeker without proof of vaccination and declaring having received vaccines before the age of 2. He has a scar compatible with BCG vaccination. He does not remember having had chickenpox when shown a photo of skin vesicles.

- **D0:** perform a "migrant health check-up" including chickenpox and hepatitis B serology (HBsAg, anti-HBs Ab, anti-HBc Ab) or perform an HBsAg early identification and screening test if biology is not accessible and preferably start the 3 following injections:
 - dTcaP and perform an anti-tetanus antibody assay within 4 to 8 weeks;
 - MMR (1);
 - Men C.
- **D7:** Hep B (1) if 3 negative markers and risk factors, along with Chickenpox (1) if negative serology.
- **W8:**
 - MMR (2);
 - Anti-tetanus Ab = 0.7 IU/ml: schedule a new dose 6 months later;
 - Anti-HBs Ab = 30 IU/l (i.e. <100 IU/l): Hep B (2);
 - Chickenpox (2).
- **M8:** perform planned dose: dTP (2) (no ca because last ca <5 years), Hep B (3).
- **Resumption of the vaccination schedule at age 45:** dTP (booster).

Seventy three-year-old woman

Seventy three-year-old woman of Algerian origin, without proof of vaccination and declaring that she has not received vaccines since childhood. She is hypertensive with type 2 diabetes and receiving oral treatment.

- **D0:** perform a "migrant health check-up" including hepatitis B serology (HBsAg, anti-HBs Ab, anti-HBc Ab) and preferably start the following 4 injections:
 - dTcaP (1) and anti-tetanus antibody assay within 4 to 8 weeks;
 - PCV 13;
 - Shingles vaccine;
 - Influenza vaccine.
- **D7:** HBsAg negative, anti-HBs Ab negative, anti-HBc Ab positive: isolated anti-HBc antibody, likely acquired immunity, no indication of Hep B vaccine.
- **W8:** Anti-tetanus Ab = 0.5 IU/ml (i.e. between 0.1 and 1 IU/ml): plan a new dose 6 months later; PPV23.
- **M8:** dTP (2).
- **Resumption of the vaccination schedule:** Annual influenza vaccination and at the age of 85: dTP (booster).