



MEMO

TO: Prevention Partnership Providers and
Local Public Health Units

FROM: Molly Howell, MPH *MH*
Immunization Program Manager

RE: Pentacel[®] Supply Update

DATE: September 28, 2012

The North Dakota Department of Health (NDDoH) Immunization Program was notified by the Centers for Disease Control and Prevention (CDC) on September 28, 2012 that the Pentacel[®] (DTaP/IPV-Hib) shortage will continue into March, 2013. Also, starting October 1, 2012, monthly federal allocations of Pentacel[®] to the state will be reduced to less than 150 doses per month for all providers in the state for Vaccines for Children (VFC) eligible children. Therefore, the NDDoH Immunization Program has decided to discontinue supplying Pentacel[®] to all North Dakota providers until the shortage is over. Providers should immediately begin ordering Pediarix[®] (DTaP-HBV-IPV) and single antigen *Haemophilus influenzae* type B (Hib) vaccine (PedvaxHIB[®] or ActHIB[®]) instead of Pentacel[®] for use in VFC eligible children. All orders for Pentacel[®] will be supplied as Pediarix[®] effective immediately.

The difference between Pediarix[®] and Pentacel[®] is that Pediarix[®] contains hepatitis B instead of Hib, so separate single antigen Hib vaccine must be administered along with Pediarix[®] doses at 2, 4, and 6 months of age (the 6-month dose of Hib may not be needed if using PedvaxHIB[®]). Single antigen DTaP and single antigen Hib vaccines should be administered at 12 – 18 months of age, as Pediarix[®] is not licensed for the fourth dose in the DTaP series. All newborns are recommended to receive the birth dose of hepatitis B vaccine and should continue to do so. The Advisory Committee on Immunization Practices (ACIP) also states that it is appropriate to administer three doses of Pediarix[®] at 2, 4, and 6 months of age, so these children will receive a total of four doses of hepatitis B. The 4-month dose will be invalid, which is appropriate.

Sanofi Pasteur is maintaining order restrictions on their private orders for both Pentacel[®] and DTaP vaccines.

Providers should not defer any doses until the shortage is over. Either Pediarix[®] or single antigen vaccines should be used to ensure all children are up-to-date.

Attached is the NDDoH Pediarix[®] schedule and a table from CDC to assist providers in transitioning from Pentacel[®] to Pediarix[®].

The NDDoH Immunization Program will notify providers when the Pentacel[®] shortage is over.

Please feel free to contact the NDDoH Immunization Program with any questions or concerns at 701.328.3386 or toll-free at 800.472.2180.