

It's time to get **serious** about chickenpox

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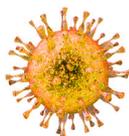
At the 15-month visit from 1 July 2017.¹ See below to find out if your child is eligible.

Because chickenpox can become more **serious** than you think²

60,000 New Zealanders get chickenpox each year and several hundred of them are hospitalised due to complications^{3*}

What is **chickenpox**?

Chickenpox, sometimes called varicella, is very easy to catch and it mainly affects children.² It often starts with a fever or headache and then an itchy red rash appears on the face and head before spreading and forming fluid-filled blisters.^{2,4}



These usually take 7-10 days to completely dry up and on average 250-500 blisters will cover the entire body.⁵

Chickenpox is spread by breathing in droplets from an infected person, or through contact with a weeping chickenpox blister.²

A child can be infected for 2-3 weeks before showing any symptoms.²

Chickenpox is a **serious** illness

- **Currently, 90% of children** are likely to get chickenpox before they become teenagers²
- **The children who go to hospital** are often previously healthy²
- **Chickenpox** can cause a range of complications, often nasty bacterial infections, occasionally pneumonia or swelling of the brain^{7,8}
- **About 1 in 20 people** will develop a bacterial skin infection that requires antibiotic treatment⁴
- **Scarring from chickenpox** occurs in about 20% of children, and in around 40% of cases this occurs on the face⁵
- **1-2 cases per year** will result in a long-term disability or death²
- **Chickenpox can also often disrupt family life.**² Parents may take time away from work or need unpaid leave which can be stressful.



Māori and Pacific Island children are 3 to 4 times more likely to end up in hospital than other children.⁹ Make sure your children and tamariki get vaccinated.

Chickenpox is a **serious** illness | Talk to your doctor or healthcare professional about *Varilrix* to ensure your child is protected.



Chickenpox vaccination will be **fully funded** from 1 July 2017.¹

Will my child qualify for **funded vaccination**?



- **All children born on or after April 1 2016** will be vaccinated with one dose of *Varilrix*[®] at their 15-month visit.¹
- **For previously unvaccinated children** turning 11 years old on or after 1 July 2017, who have not previously had a varicella infection, one catch-up dose is available from your GP.¹
- ***Varilrix*** is also funded for certain high-risk groups and their contacts.²
- **One dose is 86-94% effective** against the more severe cases of chickenpox meaning children are very unlikely to end up in hospital but some may get a very mild case of the disease.¹⁰
- **For optimal protection**, you can purchase a second dose, which gives 97-100% protection against moderate - severe cases as well as improved protection against mild disease.¹⁰
- ***Varilrix* can be given from 9 months of age**, either before or after the funded dose so long as there is at least a 6 week interval between doses.¹⁰

If **your child** doesn't qualify for the funded vaccine you can still protect them with *Varilrix*



If your child was born before April 2016 (i.e. they are older than 15 months on 1 July 2017), they won't qualify for funded vaccination until they are 11 years old by which time they will have probably already had chickenpox. For children that don't qualify, *Varilrix* can be purchased from your doctor.^{1,2,10}

Choosing to vaccinate means your child will avoid potential:

- **Isolation**, itching, blisters and discomfort⁴
- **Long-term scarring** of the body from chickenpox blisters⁵
- **Hospitalisation.**²

Chickenpox vaccines are well established being available in over 95 countries and in use for over 30 years.¹¹



*Approximate numbers prior to introduction of *Varilrix*[®] on National Immunisation Schedule, July 2017.

1.Pharmaceutical Management Agency New Zealand. Proposal to amend listings in the National Immunisation Schedule. Available at <https://www.pharmac.govt.nz/news/consultation-2016-12-09-nis/Accessed 21 December 2016> **2.**Ministry of Health; *Immunisation Handbook* 2014 (3rd edn). Wellington: Ministry of Health. Available at <https://www.immunisation.book.health.govt.nz/Accessed 21 February 2017> **3.**Ministry of Health; 2017 Draft Immunisation Handbook wording; Personal correspondence. Wellington: Ministry of Health. **4.**Immunisation Advisory Centre (IMAC). *Chickenpox (Varicella) Fact Sheet for Parents and Caregivers*. Available at: <http://www.immune.org.nz/sites/default/files/resources/DiseaseVaricellamac20151218V02Final.pdf>. Accessed 11 March 2017 **5.**Leung AK, et al. *Pediatr Dermatol*. 2001;18:378-80 **6.**Wen SC, et al. *J Paed Child Health*. 2014;51:280-285 **7.**Heininger U, et al. *Lancet*. 2006;368:1365-76 **8.**Plotkin SA, et al. *Vaccines*. 5th Edition ed. 2008. Offit PA; Elsevier **9.**Wen SC, et al. *J Paed Child Health*. 2015;51:1078-1083 **10.**GlaxoSmithKline. *Varilrix*[®] Data Sheet. GSK NZ; 2016. Available at <http://www.medsafe.govt.nz/profs/datasheet/v/Varilrixinj.pdf>. Accessed 21 February 2017 **2016** **11.**Kreth HW, et al. *BioDrugs*. 2008;22:387-402

***Varilrix*[®] (live attenuated varicella vaccine)** is available as an injection. *Varilrix* is a private-purchase prescription medicine for immunisation and prophylaxis against varicella (chickenpox) in adults and children older than 9 months. You will need to pay for this medicine. *Varilrix* is funded for certain high-risk groups and their contacts. From July 2017, one dose of *Varilrix* will be fully funded on the National Immunisation Schedule at 15 months of age and for previously unvaccinated children turning 11 years old who have not previously had a varicella infection. Children aged 13 years and older need two doses with an interval between doses of at least 6 weeks. Two doses at least 6 weeks apart are also recommended for children aged between 9 months and 12 years, to provide optimal protection. Use strictly as directed. **Do not have a *Varilrix* injection if you** are allergic to *Varilrix* or to the antibiotic neomycin, if you have a high fever, if you have a condition that causes lack of immunocompetence, or if you are pregnant. Pregnancy should be avoided for 3 months after vaccination. *Varilrix* has risks and benefits. **Tell your doctor before you have the vaccine** if you have a lowered resistance to disease or have a severe chronic disease. **Common side effects:** mild rash, fever or pain, redness and swelling at the injection site. Uncommon side effects include headache, nausea, vomiting, cough, sleepiness, swollen lymph nodes, a chicken-pox-like rash and joint pain. If you have any side effects, see your doctor, pharmacist, or health professional. Additional Consumer Medicine Information for *Varilrix* is available at www.medsafe.govt.nz. Prices for *Varilrix* may vary across doctor's clinics. Normal doctor's office visit fees apply. Ask your doctor if *Varilrix* is right for you. *Varilrix* is a registered trade mark of the GlaxoSmithKline group of companies. Marketed by GlaxoSmithKline NZ Limited, Auckland. **Adverse events involving GlaxoSmithKline products should be reported to GSK Medical Information on 0800 808 500.** TAPS NA9184/17MY/NAR/0007. GSK00449