

● SIDE-EFFECTS

- ▶ **Common or very common**
 - ▶ With oral use Gastrointestinal discomfort · influenza like illness
 - ▶ **Rare or very rare**
 - ▶ With oral use Asthenia · back pain · chills · flatulence · paraesthesia
 - ▶ **Frequency not known**
 - ▶ With parenteral use Abdominal pain · asthma · shock · syncope
- **DIRECTIONS FOR ADMINISTRATION** Capsule should be taken one hour before a meal. Swallow as soon as possible after placing in mouth with a cold or lukewarm drink.
- **HANDLING AND STORAGE** It is important to store capsules in a refrigerator.
- **PATIENT AND CARER ADVICE** Patients or carers should be given advice on how to administer and store typhoid vaccine capsules.

- **MEDICINAL FORMS** There can be variation in the licensing of different medicines containing the same drug.

Solution for injection

▶ Typhim Vi (Sanofi Pasteur)

Salmonella typhi Vi capsular polysaccharide 50 microgram per 1 ml Typhim Vi 25micrograms/0.5ml vaccine solution for injection pre-filled syringes | 1 pre-filled disposable injection [PoM] £11.16 DT = £11.16 | 10 pre-filled disposable injection [PoM] £111.60 DT = £111.60

Gastro-resistant capsule

CAUTIONARY AND ADVISORY LABELS 25

▶ Vivotif (PaxVax Ltd)

Vivotif vaccine gastro-resistant capsules | 3 capsule [PoM] £14.77 DT = £14.77

Combinations available: *Hepatitis A with typhoid vaccine*, p. 822.

VACCINES > VIRAL VACCINES

Hepatitis A and B vaccine

The properties listed below are those particular to the combination only. For the properties of the components please consider, hepatitis A vaccine below, hepatitis B vaccine p. 822.

● INDICATIONS AND DOSE

AMBIRIX[®]

Immunisation against hepatitis A and hepatitis B infection (primary course)

▶ BY INTRAMUSCULAR INJECTION

- ▶ Child 1–15 years: Initially 1 mL for 1 dose, then 1 mL after 6–12 months for 1 dose, the deltoid region is the preferred site of injection in older children; anterolateral thigh is the preferred site in infants; not to be injected into the buttock (vaccine efficacy reduced), subcutaneous route used for patients with bleeding disorders (but immune response may be reduced)

TWINRIX[®] ADULT

Immunisation against hepatitis A and hepatitis B infection (primary course)

▶ BY INTRAMUSCULAR INJECTION

- ▶ Child 16–17 years: Initially 1 mL every month for 2 doses, then 1 mL after 5 months for 1 dose, the deltoid region is the preferred site of injection; not to be injected into the buttock (vaccine efficacy reduced), subcutaneous route used for patients with bleeding disorders (but immune response may be reduced)

Immunisation against hepatitis A and hepatitis B infection—accelerated schedule for travellers departing within 1 month

▶ BY INTRAMUSCULAR INJECTION

- ▶ Child 16–17 years: Initially 1 mL for 1 dose, then 1 mL after 7 days for 1 dose, then 1 mL after 14 days for 1 dose, then 1 mL for 1 dose given 12 months after the first dose, the deltoid region is the preferred site of injection; not to be injected into the buttock (vaccine efficacy reduced), subcutaneous route used for patients with bleeding disorders (but immune response may be reduced)

TWINRIX[®] PAEDIATRIC

Immunisation against hepatitis A and hepatitis B infection (primary course)

▶ BY INTRAMUSCULAR INJECTION

- ▶ Child 1–15 years: Initially 0.5 mL every month for 2 doses, then 0.5 mL after 5 months for 1 dose, the deltoid region is the preferred site of injection in older children; anterolateral thigh is the preferred site in infants; not to be injected into the buttock (vaccine efficacy reduced), subcutaneous route used for patients with bleeding disorders (but immune response may be reduced)

IMPORTANT SAFETY INFORMATION

Ambirix[®] and *Twinrix[®]* are not recommended for post-exposure prophylaxis following percutaneous (needle-stick), ocular, or mucous membrane exposure to hepatitis B virus.

● PRESCRIBING AND DISPENSING INFORMATION

TWINRIX[®] PAEDIATRIC Primary course should be completed with *Twinrix[®]* (single component vaccines given at appropriate intervals may be used for booster dose).

TWINRIX[®] ADULT Primary course should be completed with *Twinrix[®]* (single component vaccines given at appropriate intervals may be used for booster dose).

AMBIRIX[®] Primary course should be completed with *Ambirix[®]* (single component vaccines given at appropriate intervals may be used for booster dose).

- **MEDICINAL FORMS** There can be variation in the licensing of different medicines containing the same drug.

Suspension for injection

EXCIPIENTS: May contain Neomycin

▶ *Ambirix* (GlaxoSmithKline UK Ltd)

Ambirix vaccine suspension for injection 1ml pre-filled syringes | 1 pre-filled disposable injection [PoM] £31.18 DT = £31.18

▶ *Twinrix* (GlaxoSmithKline UK Ltd)

Twinrix Paediatric vaccine suspension for injection 0.5ml pre-filled syringes | 1 pre-filled disposable injection [PoM] £20.79 DT = £20.79
Twinrix Adult vaccine suspension for injection 1ml pre-filled syringes | 1 pre-filled disposable injection [PoM] £33.31 DT = £31.18 | 10 pre-filled disposable injection [PoM] £333.13

Hepatitis A vaccine

● INDICATIONS AND DOSE

AVAXIM[®]

Immunisation against hepatitis A infection

▶ BY INTRAMUSCULAR INJECTION

- ▶ Child 16–17 years: Initially 0.5 mL for 1 dose, then 0.5 mL after 6–12 months, dose given as booster; booster dose may be delayed by up to 3 years if not given after recommended interval following primary dose, the deltoid region is the preferred site of injection. The subcutaneous route may be continued →