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PHPU Newsletter

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[Public Health Protection Unit - HSGGC](#)

Welcome

Welcome to our May edition of the PHPU Newsletter. We hope you find it useful. Feedback is welcome – please email us at phpu@ggc.scot.nhs.uk

Spring has sprung!

Please be aware of ways to stay safe whilst enjoying nature.

New born lambs can carry **Cryptosporidiosis** and other pathogens. Cryptosporidiosis is a parasite that can be passed to humans and most cases occur in children under the age of 15. The disease is commonest in spring and late autumn. To stay safe good hygiene is advised, however, alcohol based hand rubs are not effective against cryptosporidiosis, so hand hygiene needs to be carried out using soap and water. So our advice is:

- Wash hands (with soap and water)
 - After handling animals
 - After changing nappies
 - After visiting the toilet
 - Before preparing, cooking or handling food
 - Before assisting others with eating
- Do not drink raw or untreated water from rivers and streams
- Avoid raw, unpasteurised dairy products

For more on staying safe while enjoying our countryside see [A Guide to Safety Outdoors in Scotland | VisitScotland](#)

Menstrual bleeding adverse event – Moderna (Spikevax)

There has been much discussion about Covid-19 vaccination and its reported impact on menstruation. As of December 2022 heavy menstrual bleeding has been added as an adverse event associated with Moderna (Spikevax) preparations to their respective Summaries of Product Characteristics frequency unknown. This applies to both monovalent and bivalent preparations.

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Spring Booster

The Spring Booster campaign officially kicks off in the clinics on Tuesday 11th of April, however Care Homes and Housebound will start on the 27th of March. The cohort of patients who will be invited will be those aged 75 and over (or who will turn 75 by 30 June 2023), and anyone with a Weakened Immune System over the age of 5.

Using some of the key learnings from previous campaigns has allowed us to look at the way we invite patients. For the spring booster campaign we will only be inviting our 75+ cohort up to 5pm and those aged 12 to 74 who are in the WIS category (Weakened Immune System) will be from 5pm onwards.

Our WIS group patients will be invited into our clinics from week commencing the 24th of April.

All of our clinics will be 10minute appointments.

The 5-11s who fall into the WIS category will be invited separately in the month of June.

Further guidance will be issued in relation to the end of the boosters for healthy 16-49 year olds from 31st of March as well as the end of the primary offer from the end of June.

Shingles and Pneumococcal

Over 15000 Shingles vaccinations have been administered to those aged 70-79 and over 18000 Pneumococcal vaccines were given to those aged 65 and above.

Further Shingles activity for those who require their Shingrix 2nd doses and those who have turned 70 from 1st September 2022 will commence in the clinics on the week of the 3rd of April.

Validation of reaching regional Hepatitis B control targets in the UK& Northern Ireland

The UK has recently been notified that it has achieved WHO Euro regional hepatitis B control targets for elimination of maternal to child transmission. This is a huge achievement and will significantly contribute to goal of eliminating viral hepatitis as a public health threat throughout the WHO European Region. It has been achieved through the many teams and colleagues who deliver vaccination and screening programmes and ensure appropriate follow up and management of infants born to women at high risk of hepatitis B.

Sustaining this; achieving wider hepatitis B control, and eliminating hepatitis C in Scotland will require ongoing efforts to ensure that those at risk have access to vaccines, testing and treatment. Those at potential risk of hepatitis B in GGC can be referred for vaccine by primary care using SCI gateway referral form and by other clinical colleagues using the ad hoc vaccination referral form <https://forms.office.com/r/GGAGSZg1Sz>

There are safe and effective treatments for hepatitis B, hepatitis C and HIV and testing should be offered to anyone with possible risk factors, clinical indicators such as abnormal liver function tests, and/or who requests it.

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NHSGGC has guidance on BBV testing, diagnosis and referral which can be found at <https://clinicalguidelines.nhsggc.org.uk/media/2263/bbv-amended.pdf>

Shingles vaccination switchover from Zostavax to Shingrix and cohort update

There are two vaccines licensed and in use against shingles – Zostavax and Shingrix. Zostavax is a live vaccine and this prevents some patients from receiving it such as those who are immunosuppressed. Shingrix is a newer, recombinant adjuvanted vaccine that is non-live which means it can be given to more patients. From September 2023 boards across Scotland will look to move from Zostavax and Shingrix use to only Shingrix, simplifying the programme. Cohorts for shingles vaccination will also widen with the age dropping to 65 and above.

Pharmacy public health would encourage use of as much Zostavax prior to September 2023 as possible to avoid waste. More information will be available in due course.

TB Day March 24

World TB day was celebrated on March 24. This year's theme is "Yes, we can end TB!"

This is a positive and strong message of hope coming from the World Health Organisation. Sadly, many countries across the globe are still struggling with this epidemic. TB remains a leading cause of death worldwide, but this shouldn't be the case in Scotland as we have medical support available. However many of our cases are very vulnerable, coming from marginalised and deprived communities beset by social and economic challenges.

Thus Public Health very much appreciate the care, support and attention that our TB Nurse Specialists, in collaboration with the Respiratory Teams, provide to these patients.

Locally we wish to raise awareness of TB. People should be encouraged to see a GP if they have a cough that lasts more than three weeks or if they cough up blood, with phlegm. Other symptoms also include:

- weight loss and loss of appetite
- high temperature (fever) and night sweats
- excessive tiredness and fatigue
- new swellings that haven't gone away after a few weeks

Initial tests that can be performed in primary care, are a chest x-ray and collection of sputum samples.

The TB Nurse Specialists support all TB patients throughout their treatment journey.

More general information on TB can be found at [Tuberculosis \(TB\) | NHS inform](#)

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Increase in Gonorrhoea and Chlamydia

Communication has been sent out previously regarding an increase in gonorrhoea and chlamydia that has been seen in GGC and across Scotland and the UK.

Key developments since then are as follows:

1. Diagnoses and case positivity rates for gonorrhoea and chlamydia have continued to rise locally and nationally.
2. The increase has become particularly marked amongst heterosexual females, though is also being seen amongst heterosexual males and GBMSM. We have seen a shift in the age distribution of gonorrhoea cases towards the younger (18-24) age group.
3. In response to this, a national IMT has now been convened and planning is underway for a national communications campaign focussing on social media channels and promoting behavioural change to reduce STI transmission risk.

In view of these developments, we would encourage all services to continue with the measures highlighted in previous briefings (see below), and to anticipate a likely increase in demand for services resulting from the national communications campaign when it is launched.

- Maintain and reinforce measures to prevent sexually-transmitted infections in our population, notably the use of condoms and lubricant. Information about NHSGGC's free condom service can be found here: <https://www.freecondoms.scot/>
- Ensure that testing for sexually transmitted infections and blood-borne viruses is offered and encouraged in all situations in which it is indicated.

For further information please contact Daniel Carter (Consultant in Public Health Medicine) on daniel.carter@ggc.scot.nhs.uk

Farewell

At the end of March 2023, NHS GGC said goodbye to Dr Gillian Penrice, after 37 years of service to the NHS. Gillian graduated from the University of Glasgow and qualified as a GP, working in a variety of community medicine roles and as a GP Principle, before joining the Public Health Directorate in 1997 as Clinical Medical Officer, and the public health training scheme in 1998. For 20 years Gillian has been a consultant in the Health Protection team, half of that time as Lead Clinician and Head of Unit. She has decided now is the time to retire and concentrate on other things, like travel, hillwalking and her garden.

Over her career Gillian has led on many topics including port health, public health law, TB, and latterly as Immunisation Coordinator. Gillian will be particularly remembered as our lead trainer. Her direct "hammer -> nail" approach to public health problems leaves a lasting legacy for several generations of public health specialists, whose second question, when faced with a challenge, is "what would Gillian do?"

Their first question, of course, is "what's the postcode?"