



Centre for Disease Control

NT HEALTH

Immunisation Update

Issued: 26 Feb 2025
Issued to: Vaccine providers

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RSV-Maternal and Infant Protection Program

Respiratory Syncytial Virus RSV is a highly infectious virus that is the most common cause of respiratory infections in children, with almost all children being infected at least once in their first 2 years of life.

RSV is a leading cause of lower respiratory tract disease hospitalisation in infants aged <12 months. [Respiratory syncytial virus \(RSV\) | The Australian Immunisation Handbook](#)

The **RSV Maternal and Infant Protection Program (RSV-MIPP)** commenced 3rd Feb 2025 for eligible pregnant women, infants at birth and young children.

RSV-MIPP is a comprehensive approach that includes **Abrysvo®**, a maternal vaccine and **Beyfortus®** (nirsevimab), an infant monoclonal antibody.

Maternal Vaccine

- RSV vaccine Abrysvo® is recommended for pregnant women to protect their newborn infant. Vaccinating women during pregnancy reduces the risk of severe RSV illness in infants under 6 months of age by around 70%. [Respiratory syncytial virus \(RSV\) FAQs | NCIRS](#)
- Maternal vaccination with Abrysvo® is the recommended approach to infant RSV protection. It should be promoted for pregnant women at 28 - 36 weeks gestation (ideally 2 weeks before delivery).
- Abrysvo® can be **co-administered** with whooping cough (dTpa - diphtheria, tetanus and pertussis) and influenza vaccines if required. [Maternal vaccinations consumer brochure | Australian Government Department of Health and Aged Care](#)
- **Order Abrysvo® vaccine** for your clinic on the NIP vaccine order form found under the **forms and reporting** tab on the [Immunisation program | NT Health](#) website.

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✉ ImmunisationProgram.TEHS@nt.gov.au

Important

- Abrysvo® is the only RSV vaccine approved for use in pregnant women. Abrysvo® is not registered for use in infants and must not be administered to an infant or child.
- Arexvy®, another RSV vaccine, is registered for use in adults aged 60 years and over and should not be given to pregnant women.
- Abrysvo® is also registered for use in individuals 60 years of age and above and is only available in the private market for this age group.

Infant monoclonal antibody

Beyfortus® (nirsevimab) is a **monoclonal antibody** funded by the NT and is available in maternity and paediatric services only, to eligible infants at birth and young children.

Infants eligible to receive Beyfortus® (nirsevimab) are:

- Infants (at birth) of mothers who did not receive Abrysvo® vaccine during pregnancy.
- Infants (at birth) delivered within 2 weeks of maternal Abrysvo® vaccination.
- Infants and young children with conditions associated with increased risk of severe RSV disease.
- [beyfortus-monoclonal-antibody-schedule-.pdf](#)

Important

- Beyfortus® (nirsevimab) is a monoclonal antibody and is only available in maternity and paediatric services.

Please access the NCIRS website for further resources

[NCIRS releases suite of new and updated RSV resources, as infant protection programs launched across Australia | NCIRS](#)



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NT meningococcal B vaccine rollout

Meningococcal B disease is a rare but serious infection that occurs when meningococcal bacteria invades the body from the nose or throat through close prolonged contact. The disease can occur rapidly. Long term effects of meningococcal disease can include limb deformity, skin scarring and brain damage and is fatal in 5-10% of cases.

The **NT meningococcal B vaccine** program commenced at the beginning of January 2025. Previously, meningococcal B vaccine was available to Aboriginal and Torres Strait Islander infants under the National Immunisation program (NIP). The NT government has now expanded the vaccine availability to

- **all infants** 6 weeks to 12 months of age including a **catch-up program** for children up to 2 years of age.
- **all adolescents** in year 9 (14 years) and a **catch-up program** for adolescents aged 15 -19 until December 2026.

Important

- The catch-up program is time limited
- Recall all eligible infants and adolescents to offer catch-up vaccines now

The **meningococcal B** vaccine is now free for eligible groups and available at **Community Care Centres, GP's, Aboriginal Medical Services** and some **Pharmacies** (for adolescents).



MENINGOCOCCAL B VACCINE

The meningococcal B vaccine is now **free** for adolescents aged 14 - 19 years.

Don't wait! Vaccinate.

For more information see

[Meningococcal disease | NT.GOV.AU](https://www.nt.gov.au/health/immunisation/)
[Immunisation program | NT Health](https://www.nt.gov.au/health/immunisation/) or scan the QR code



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Mandatory antenatal indicator reporting to the AIR

How to report vaccines administered during pregnancy to the AIR

- An **antenatal indicator** has been added to the Australian Immunisation Register (AIR).
- The addition of this indicator allows vaccination providers to report to the AIR if a person is pregnant at the time of vaccine administration.
- Legislative changes under the Australian Immunisation Register Act 2015 require **mandatory antenatal reporting from 1 March 2025**.

Updating software

- Vaccination providers can report pregnancy status using software that has been updated to include the **antenatal indicator**.
- Vaccination providers using software that has **not yet been updated** to include the **antenatal indicator** can report pregnancy status using the *Vaccine type* field and selecting 'Antenatal'.

Important

- **Software providers have until October 2025** to update their software to include the **antenatal indicator** field and remove the 'Antenatal' option from the Vaccine type field.
- Contact your software provider for further information and support.

Resources

[AIR Update – 12 February 2025 | NCIRS](#)

Scan below for more of our Immunisation Updates



Website [Immunisation program | NT Health](#)

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