Health New Zealand
Te Whatu Ora

9 June 2025

Medicines Classification Committee Secretary Medsafe PO Box 5013 Wellington 6145

via email: <a href="mailto:committees@health.govt.nz">committees@health.govt.nz</a>

## Re: Proposed medicine classification amendment for your consideration

Dear Medicines Classification Committee,

Thank you for the opportunity to submit our recommendation for a proposed medicine classification amendment for liquid paracetamol, for your consideration.

The National Public Health Service (NPHS) is a business unit within Health New Zealand | Te Whatu Ora (Health NZ) that works to protect and promote the public health of Aotearoa. We provide clinical and operational guidance on immunisation delivery and support the upskilling of the workforce to ensure equitable access to immunisations.

Expansion of vaccinator roles and services beyond the general practice landscape has highlighted challenges by non-GP providers in accessing prescribers to sign-off on Standing Orders for liquid paracetamol.

NPHS would like to formally submit the following recommendation to address barriers for non-prescribing vaccinators to administer liquid paracetamol suspension, indicated to prevent and treat fever in children under two with Bexsero vaccination.

## Paracetamol suspension – proposal to include provision by vaccinators under certain conditions.

Paracetamol oral suspension is currently a pharmacy-only medicine. It is routinely used and clinically recommended alongside Bexsero vaccination to prevent and reduce the risk of high fever in children aged under two. Bexsero is part of the National Immunisation Schedule and administered at the 3-month, 5-month, and 12-month immunisation events.

Bexsero has a higher risk of causing fever than other scheduled vaccines. When coadministered with other scheduled vaccines, the risk of fever >38°C nearly doubles. Consequently, the use of prophylactic paracetamol is a national best practice recommendation for every Bexsero dose in children under two.

Currently, three paracetamol doses (15 mg/kg) are recommended at 4-to-6-hour intervals. The first dose may be given 30 minutes before or at the time of Bexsero vaccination. However, provision by vaccinators currently requires a Standing Order or prescription, presenting

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logistical challenges, especially for vaccinators not working alongside a prescriber and families that are unable to have an appointment with a prescriber.

Authorised vaccinators are trained and competent in safe medication administration, including weight-based dosing. Paracetamol can be sourced under a Bulk Supply Order (BSO), and resources from IMAC and Health New Zealand support consistent caregiver education and documentation.

Reclassifying liquid paracetamol to allow direct administration by vaccinators would:

- remove the need for a Standing Order or prescription
- improve adherence to best practice
- enable timely and equitable access for whānau
- enhance operational efficiency in immunisation clinics

This amendment would address a significant barrier for the estimated 1,708 vaccinators who immunise children under two years old outside of general practice settings.

## **Recommendation:**

That liquid paracetamol suspension classification is amended to include the following words or similar:

"except when administered by vaccinators, registered pharmacists, or registered intern pharmacists who have successfully completed the Vaccinator Foundation Course (or any equivalent training course approved by the Ministry of Health) and who comply with the immunisation standards of the Immunisation Handbook, to a child under the age of two with the administration of Bexsero vaccine to prevent and treat fever."

These proposed amendment supports safe, equitable, and efficient immunisation delivery in New Zealand. I ask the Committee to consider this recommendation to ensure vaccinators are best supported to meet the needs of the communities they serve, without unnecessary legal or logistical barriers.

I would be happy to discuss any aspect of this further if required.

Ngā mihi nui,

CAMCQuarr

Dr Caroline McElnay

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National Public Health Service

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