

Significant events in Japanese encephalitis vaccination practice in Australia

Year	Month	Intervention
~1987		Inactivated mouse brain-derived Japanese encephalitis (JE) vaccine available under the Individual Patient Use Scheme
1991		Use of inactivated mouse brain-derived JE vaccine under the Individual Patient Use Scheme suspended due to reports of severe hypersensitivity reactions
~1993		Inactivated mouse brain-derived JE vaccine registered for use in individuals aged ≥1 year, but availability restricted by distributor
1994		Consideration of inactivated mouse brain-derived JE vaccine recommended for individuals aged ≥1 year travelling to countries where JE prevalent, depending on nature and timing of travel and length of stay; 3-dose schedule (0, 7 and 28 days) with consideration of booster after 1–2 years
1995–1996		Vaccination with inactivated mouse brain-derived JE vaccine funded for all residents of outer Torres Strait islands aged ≥1 year
		Integrated into routine vaccination schedule for children resident on the outer islands with 1st dose given at 12 months of age
1997		Recommendation for booster dose changed to consideration after 3 years
1998		Funded booster vaccination campaign for all residents of outer Torres Strait islands vaccinated in 1995/96, using inactivated mouse brain-derived JE vaccine
2000		Vaccination using inactivated mouse brain-derived JE vaccine (3-dose schedule) recommended for: individuals aged ≥1 year travelling to countries where JE prevalent, depending on nature and timing of travel and length of stay; all residents aged ≥1 year of outer Torres Strait islands and non-residents living or working there for 30 days or more during the wet season; and laboratory workers with potential for exposure. Booster doses of inactivated mouse brain-derived JE vaccine recommended at 3-yearly intervals.
~2005		Production of inactivated mouse brain-derived JE vaccine discontinued. Use in Torres Strait restricted to those islands at highest risk to conserve remaining supplies.
2009	January	Inactivated Vero cell-derived JE vaccine registered for individuals aged ≥18 years in a 2-dose schedule (0 and 28 days)
2010	August	Use of inactivated mouse brain-derived JE vaccine in Torres Strait ceased
	August	Live attenuated JE vaccine registered for individuals aged ≥1 year as a single dose
2013	March	Recommendation that inactivated Vero cell-derived JE vaccine can be administered to individuals aged ≥1 year where an alternative is not available or is contraindicated
	August	Funded vaccination program reintroduced for residents aged ≥1 year of outer Torres Strait islands, and non-residents living or working there for 30 days or more during the wet season, using live attenuated JE vaccine (inactivated Vero cell-derived JE vaccine used for immunocompromised people and pregnant and breastfeeding women)

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Year	Month	Intervention
2015	March	Lower age for which live attenuated JE vaccine registered for use in children extended to 9 months
	June	Recommendation that inactivated Vero cell-derived JE vaccine can be administered to individuals aged 2–11 months where an alternative is not available or is contraindicated
	June	Booster dose of inactivated Vero cell-derived JE vaccine recommended 1–2 years after primary vaccination in adults who were aged ≥18 years at primary vaccination
	June	Booster dose of live attenuated JE vaccine recommended 1–2 years after primary vaccination in children who were aged <18 years at primary vaccination
2022	March	Because of changes in the epidemiology of JE in Australia, JE vaccination recommended in individuals aged ≥2 months in high-risk settings (as advised by the jurisdictional public health authorities).
	September	Booster dose (of either Imojev or JEspect) recommended for individuals at risk of JE virus infection (and more than 1 year has passed since their primary JE vaccine course). Booster dose not required for people having evidence they received a dose of live attenuated JE vaccine (Imojev) when they were aged ≥18 years.

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