ADULT TETANUS VACCINATION LEVEL SURVEY 1996, SOUTH AUSTRALIA

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Tetanus still occurs across Australia despite a safe and effective vaccine being available since 1953. In South Australia, no cases of tetanus were notified in 1995. However, in 1994, six cases and two deaths were recorded. Tetanus costs about $100,000 per case to treat.

The Health Omnibus Survey conducted in the spring of 1995 by Harrison Health Research included the question for persons over the age of 15 years, 'Have you had a tetanus booster in the last 10 years?' The survey format was by personal interviews at home, based on Australian Bureau of Statistics collector districts and was a multi-stage, clustered, self-weighting, systematic area sample.

Overall, two-thirds (67.1%) of the respondents said they had had a booster in the last ten years (61.5% in 1990). Of the remainder, 28.7% stated that they had not had a booster and 4.1% did not know (Table 1).

Older people were less likely to have had a booster for tetanus. In the 15-24 year age group, 82.5% said yes while only 47.4% of those over 65 reported having had a booster.

An ongoing (minor) tetanus vaccination promotion commenced in 1991.

Between 1980 and 1995, 42 cases of tetanus were notified in South Australia.

Comments

Although the tetanus vaccination cover has increased from 20% to 53.9% in five years (1990-95) in the over-50s age group, more rapid improvement is needed to prevent this disease (Table 2).

Tetanus vaccination levels should be increased in all age groups, especially adults and particularly those over 55 years of age, and Year 10 school students.

NHMRC recommendations for tetanus vaccination

Primary immunisation

Tetanus immunisation is part of the standard childhood vaccination schedule. Doses of diphtheria-tetanus-pertussis vaccine (DTP) are given at two, four, six and 18 months, and at four-five years, with a dose of adult tetanus vaccine (ADT) at 15-19 years. Primary immunisation for children who have not reached their eighth birthday is achieved with three doses of DTP (or CDT if there is a genuine contraindication to pertussis vaccine) at two monthly intervals. Primary immunisation of children who have passed their eighth birthday can be achieved with three doses of ADT at two monthly intervals.

Booster doses

Although immunity following complete vaccination is long lasting, maintenance of immunity with booster doses at ten-year intervals is recommended. Booster doses can be given either as tetanus toxoid vaccine or as ADT; the latter is preferred.

In the event of a tetanus-prone injury, a booster dose of tetanus vaccine (ADT or tetanus toxoid) should be given if five or more years have elapsed since the previous dose.

Table 2. Tetanus vaccination cover in South Australia, 1990 and 1995 for adults >15 years and >50 years

Year	Age group	Percentage cover (%)
1990	15+	61.5
	50+	20
1995	15+	67.1
	50+	53.9

Table 1. Percentage of survey respondents who had received a tetanus booster in the past 10 years, by age group

	Age group in years						
	15-24	25-34	35-44	45-54	55-64	65+	Total
Sample size	418	571	562	450	366	649	3,016
Yes	82.5	72.9	70.3	67.0	56.6	47.4	67.1
No	13.7	23.3	26.5	27.1	37.6	49.2	28.7
Don't know	3.7	3.9	3.2	5.9	5.8	3.4	4.1

Note: all results reported as a percentage.