



Bulletin No. 10

May 6, 1994

Pneumococcal Vaccine Program Expanded--Routine Booster Added in Alaska

Because pneumococcal disease has been shown to be a greater problem among Alaska Natives⁽¹⁾, the State of Alaska has adopted a more aggressive pneumococcal vaccination policy. In 1990, the age for giving vaccine to healthy adults was lowered to 55⁽²⁾. This bulletin announces a new recommendation--administration of a routine 6-year booster dose for all Alaskans who receive pneumococcal vaccine.

WHO SHOULD RECEIVE PNEUMOCOCCAL VACCINE?

Adults

1. All adults aged 55 years and older and adults of all ages with previous serious pneumococcal infections such as meningitis or sepsis (infection in the blood) or with long-term illnesses that are associated with a high risk of getting pneumo-coccal disease, including those with heart or lung diseases, diabetes, alcoholism, cirrhosis, or leaks of cerebrospinal fluid (CS).
2. Adults with diseases that lower the body's resistance to infections or who are taking drugs that lower the body's resistance to infections, including those with abnormal function or removal of the spleen, Hodgkin's disease, lymphoma, multiple myeloma, kidney failure, nephrotic syndrome, or conditions such as organ transplantation.
3. Adults with and without symptoms who are infected with the AIDS virus (HIV infection).

Children

1. Children 2 years-of-age and older with previous serious pneumococcal infections such as meningitis or sepsis (infection in the blood) or with long-term illnesses that are associated with a high risk of getting serious pneumococcal infections. This includes children with abnormal function or removal of the spleen, as well as those who have sickle cell disease, nephrotic syndrome, or CSF leaks, or who have the diseases that lower the body's resistance to infections or are taking drugs that lower the body's resistance to infections.
2. Children 2 years of age and older infected with AIDS virus, both with and without symptoms.

(Note-Frequent diseases of the upper respiratory system, including infections of the ear or sinuses, in children who are otherwise healthy, are not reasons to use this vaccine.)

If there is a doubt as to whether or not a person for whom vaccine is indicated has previously received pneumococcal vaccine, administration of vaccine is recommended.

REVACCINATION: The Alaska Division of Public Health recommends that all Alaskans who receive a pneumococcal vaccination should be revaccinated every six years. Revaccination after 3-5 years should be considered for children with nephrotic syndrome, asplenia, or sickle cell anemia who would be ≤ 10 years old at revaccination.

SIMULTANEOUS ADMINISTRATION: Pneumococcal vaccine may be given at the same time as any other vaccine. All health care providers should view every visit as an opportunity to assess the patient for all needed immunizations. In adults, this includes a 10-year Td booster and an annual influenza vaccination. Annual fall influenza vaccination campaigns should include an assessment of the need for pneumococcal and Td vaccines for adults and all childhood vaccines for children. Reduction of missed opportunities to vaccinate will prevent unnecessary morbidity and mortality from vaccine preventable diseases.

PREGNANCY: The safety of pneumococcal vaccine for pregnant women has not been studied. It should not be given to healthy pregnant women.

REACTIONS: If the person who received the vaccine gets sick and visits a doctor, hospital, or clinic during the 4 weeks after receiving the vaccine, please report to the Immunization Program, 561-4406.

References:

1. Davidson, Michael: Invasive pneumococcal disease in an Alaska Native population, 1980 through 1986. *JAMA* 1989; 261: 715-718.
2. Middaugh, J. (ed): Pneumococcal vaccine-new opportunities for prevention. *Epidemiology Bulletin*, No. 17, August 22, 1990.

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