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GUIDE TO CONTRAINDICATIONS (VALID AND INVALID) TO CHILDHOOD VACCINATIONS

Parents are often blamed for poor immunization levels among children under age two; however, evidence suggests that the health care system must assume substantial responsibility for missed opportunities to vaccinate children. Missed opportunities occur when a child brought to a clinic for immunization is not vaccinated because of inappropriate contraindications such as a minor illness. Several conditions or circumstances that are often inappropriately considered contraindications to vaccination are listed in the table above, along with the conditions that constitute valid contraindications for each vaccine. This table incorporates the most recent information on contraindications for DTP vaccine. Four conditions previously considered absolute contraindications are now considered "precautions" by the Immunization Practices Advisory Council (ACIP).

Vaccine	Valid Contraindications	Invalid Contraindications
General For All Vaccines: DTP TOPV IPV MMR Hib HBV	An immediate anaphylactic reaction following vaccine	Local reaction (soreness, redness, swelling) following a dose of DTP or MMR vaccine
	Moderate or severe febrile illnesses	Mild acute illness with or without low-grade fever
		Mild diarrheal illness or gastrointestinal tract disturbance in otherwise well child
		Current antimicrobial therapy
		Convalescent phase of illness
		Prematurity: Same dosage and indications as normal, full-term infants
		Recent exposure to an infectious disease
		A history of penicillin or other nonspecific allergies or relatives with such allergies
DTP	Encephalopathy occurring within 7 days of immunization	Temperature of <40.5 C (105 F) following a previous dose of DTP
	Precautions*	Fever of ≥ 40.5 C (105F) within 48 hours of vaccination
		Collapse or shock-like state (hypotonic-hyporesponsive episode) within 48 hours
		Seizures within 3 days
		Family history of convulsions
		Family history of sudden infant death syndrome
		Family history of an adverse event following DTP immunization
TOPV	Infection with HIV	Breastfeeding
	Pregnancy	
	Known altered immunodeficiency (hematologic and solid tumors; congenital immunodeficiency, and chronic immunosuppressive therapy)	
	Immunodeficient household contact	
IPV	Anaphylactic reaction to NEOMYCIN or STREPTOMYCIN	
MMR	Anaphylactic reaction following egg ingestion or to NEOMYCIN	Tuberculosis or Positive PPD
	Pregnancy	Pregnancy in mother of recipient
	Known altered immunodeficiency (hematologic and solid tumors; congenital immunodeficiency; and chronic immunosuppressive therapy)	Breastfeeding
		Immunodeficient family member
	Recent (within 3 months) IG administration	Infection with HIV
	Non-anaphylactic reactions to eggs or neomycin	

*The events listed as precautions, while not contraindications, should be carefully reviewed. The benefits and risks of administering a specific vaccine to an individual under existing circumstances should be considered. If the risks to the individual are believed to outweigh the benefits, the immunization should be withheld. If the benefits are believed to outweigh the risks (for example, during an outbreak), the immunization should be given.