

Philadelphia Immunization Program

SPECIAL DELIVERY

The Philadelphia Department of Public Health Division of Disease Control

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- Broadened Recommendations for Tdap
- Updated Recommendations for MCV4

Broadened Recommendations for Use of Tetanus Toxoid, Reduced Diphtheria Toxoid and Acellular Pertussis (Tdap) Vaccine

In response to an increased incidence of pertussis in the U.S., the Advisory Committee on Immunization Practices (ACIP) voted on October 27, 2010 to change the recommendations for the use of Tdap. The broadened ACIP recommendations are as follows:

- Administer a single dose of Tdap to children ages 7 through 10 years who are not fully vaccinated against pertussis.
- Administer a single dose of Tdap to adolescents and adults ages 11 through 64 who have not received Tdap, or who have unknown pertussis status.
- Administer a single dose of Tdap to adults 65 years and older who have, or who anticipate having, close contact with an infant less than 12 months of age and who have not previously received Tdap. For other adults 65 years and older, a single dose of Tdap may be considered for those who have not yet received Tdap.

For those indicated above, Tdap can be administered regardless of the interval since the last tetanus- or diphtheria-toxoid containing vaccine.

As with all vaccines, do not administer Tdap to those persons with a valid contraindication to the vaccine. Currently, only a single dose of Tdap is recommended across all age groups. If additional doses of tetanus- or diphtheria-toxoid containing vaccines are needed, Td toxoid should be given subsequent to Tdap, which is the preferred first dose.

Updated Meningococcal Conjugate Vaccine (MCV4) Recommendations

Post-licensure studies of MCV4 vaccine have demonstrated waning immunity by 5 years after vaccination with a single dose. Therefore, persons immunized at age 11 or 12 years might have decreased protective immunity by ages 16 through 21 years, when their risk for disease is increased. Post-licensure studies also indicate that certain persons with decreased immune response need primary vaccination with 2 doses of MCV4, in addition to booster doses. In order to better protect those at high risk, the new ACIP recommendations are as follows:

- Routine vaccination of persons with quadrivalent meningococcal conjugate vaccine at age 11 or 12 years, with a booster dose at age 16 years.
- For adolescents who receive the first dose at age 13 through 15 years, a one-time booster dose should be administered, preferably at age 16 through 18 years, before the peak in increased risk, and a minimum interval of 8 weeks between doses.
- For adolescents who receive their first dose of meningococcal conjugate vaccine at or after age 16 years, a booster dose is not needed.
- For adolescents 11 through 18 years with HIV infection, a 2-dose primary series should be administered 8 weeks apart, with a one-time booster dose (i.e., 3rd dose) as indicated above.
- Routine vaccination of healthy persons who are not at increased risk for exposure to, or infection with, *N. meningitidis* is not recommended after age 21 years.
- Persons aged 2 through 55 years with persistent complement component deficiencies (e.g., C5–C9, properdin, factor H, or factor D) or functional or anatomic asplenia should receive a 2-dose primary series administered 8 weeks apart, and receive subsequent booster doses every 5 years through age 55.
- Persons aged 2 through 55 years with complement component deficiency or asplenia, who have previously received a single dose of meningococcal conjugate vaccine, should receive their booster dose at the earliest opportunity and receive subsequent booster doses every 5 years through age 55.
- All others at increased risk for meningococcal disease (e.g., microbiologists or travelers to an epidemic or highly endemic country) should receive a single primary dose. As long as the individual remains at increased risk, the single primary dose should be followed by a booster dose after 3 years (for children 2-6 years at primary vaccination), or after 5 years (for persons 7 years and older at primary vaccination).

The MCV4 vaccine, Menveo by Novartis, is now FDA-approved for individuals 2-55 years of age. Both MCV4 vaccines, Menactra by sanofi pasteur, and Menveo, can now be administered to individuals 2-55 years of age.