

Yukon Immunization Program Manual

Section 8 - Biological Products

Pneumococcal Vaccines





SECTION 8 – BIOLOGICAL PRODUCTS

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	2019 August
Pneumococcal Conjugate Vaccine (Prevnar®13)	
, , , , , , , , , , , , , , , , , , ,	Supplier: Pfizer Canada Inc.
INDICATIONS	INITIAL SERIES
(1) Healthy infants and children 8 weeks to 59 months of	(1) Healthy children:
age - to start or complete a pneumococcal conjugate vaccine	
series	Dose 1: 8 weeks of age: 0.5 mL IM
	Dose 2: 16 weeks of age: 0.5 mL IM
	Dose 3: ≥ 12 months of age: 0.5 mL IM
	(at least 8 weeks after second dose).
(2) Children 8 weeks to 59 months of age who are at high	(2) Children medically at high risk:
risk of pneumococcal disease due to: 000	
Sickle cell disease and other hemoglobinopathies	Dose 1: 8 weeks of age: 0.5 mL IM
Immunosuppression related to disease [e.g., malignant	Dose 2: 16 weeks of age: 0.5 mL IM
neoplasm (including leukemia and lymphoma); HIV;	Dose 3: 24 weeks of age: 0.5 mL IM
multiple myeloma] or therapy (e.g., high dose, systemic	Dose 4: ≥ 12 months of age: 0.5 mL IM Output Dose 4: ≥ 12 months of age: 0.5 mL IM Dose 5: Dose
steroids or severe rheumatoid arthritis requiring	(at least 8 weeks after third dose)
immunosuppressive therapy)	
 Congenital immunodeficiencies involving any part of the immune system, including B-lymphocyte (humoral) 	
immunity, T-lymphocyte (cell-mediated) immunity,	
complement system (properdin or factor D deficiencies)	
or phagocytic function.	
Receipt of hematopoietic stem cell transplant (HSCT)	
Solid organ or islet cell transplant (candidate or recipient)	
Chronic heart or lung disease (except asthma, unless	
management involves ongoing high dose oral	
corticosteroid therapy)	
Chronic liver disease including cirrhosis, chronic hepatitis	
B, chronic hepatitis C	
Chronic kidney disease	
Diabetes, cystic fibrosis or chronic CSF leak	
Chronic neurological conditions that may impair	
clearance of oral secretions	
Cochlear implant (candidate or recipient)	
Anatomic or functional asplenia (children up to and including 10 years of ana).	
including 18 years of age) 2	(2) 0 1 05 1 14 11 12 1 2
(3) All children to 59 months of age and asplenics ≤ 18	(3) One dose 0.5 mL IM at least 8 weeks after a
years of age who have completed a PVC 7 or PCV 10 vaccine series	previous PCV7 or PCV10 dose
	(4) One does 0 E militar A
(4) All individuals ≥60 months with HIV infection not been	(4) One dose 0.5 ml IM ⑤
previously immunized with PCV 13 \varTheta 😉	



		2019 August	
Pneumococcal Conjugate Vac	cine (Prevnar®13)		
		Supplier: Pfizer Canada Inc.	
INDICATIONS		INITIAL SERIES	
(5) RECOMMENDED BY THE NAT COMMITTEE ON IMMUNIZATION:			
Recommended based on authorize	ation from Specialist		
and/or CMOH:			
 Children up to 18 years of age (inclusive) with asthma which required medical attention in the past 12 months. 		(5) One dose 0.5 mL IM	
Recommended based on authorization and/or CMOH:	ation from Specialist		
-		(5) One dose 0.5 mL IM	
CONTRAINDICATIONS	History of an anaphylactic reaction to a previous dose of any pneumococcal		
DDECALITIONS	vaccine, or to any component of Prevnar®13.		
PRECAUTIONS	If PPV23 has already been administered, PCV13 should be administered at least one year later.		
VACCINE COMPONENTS	Potential allergens: diphtheria CRM197 toxoid protein, polysorbate 80.		
VACCINE COM ONEMIS	Other components: succinic acid, aluminum phosphate		
ADVERSE EVENTS	Local: Redness, swelling, tenderness at injection site; Systemic: fever (and rarely, febrile seizures in young children) headache, irritability, drowsiness, restless sleep, decreased appetite, vomiting, diarrhea, muscle and joint pain, rash.		



2019 Augu				2019 August	
C	Completing a Pneumococcal Co	onjugate Va	ccine Series		
	Completion of series requires			AND	
Age at presentation for immunization	History of prior doses of PCV7, PCV10 or PCV13 given	Healthy Infant	High Risk Infant ②	Booster dose Healthy and High Risk 2	
12 weeks to 44 weeks	0 doses	2 doses 3	3 doses 3	One dose at ≥12 months of age 4	
	1 dose	1 dose 3	2 doses 3	One dose at ≥12 months of age ④	
	2 doses	0 doses	1 dose 4	One dose at ≥12 months of age 4	
12 to 23 months	0 doses	2 doses 6	2 doses 6		
	1 dose < 12 months	2 doses 6	2 doses 6		
	1 dose ≥ 12 months	1 dose 6	1 dose 6		
	2 doses < 12 mos.	1 dose 4	2 doses 6		
	1 dose < 12 mos. & 1 dose ≥ 12 mos	1 dose 6	1 doses 5	No booster dose	
24 to 59 months	0 doses	1 dose	1 dose		
	Any age- appropriate series incomplete by 24 months 6	1 dose 6	1 dose 5		
	Complete PCV7 or PCV10 series 6	1 doses 6	1 dose 5		

- When an infant has received one or two doses of vaccine, and is subsequently diagnosed with a high risk medical condition, use the table to complete the immunizations as "high risk." When a high risk condition is diagnosed after an infant has completed the 3 dose schedule for healthy children, further immunization will be determined on a case-by-case basis.
- 2 High risk children should receive one dose of pneumococcal polysaccharide vaccine at 2 years of age, and at least 8 weeks after their final pneumococcal conjugate vaccine dose.
- When there is a delay in initiating or completing the vaccine series, use the minimum interval of 4 weeks between vaccine doses given in infancy. See Section 3 Immunization Schedules, 3.0 Minimum Intervals between Vaccine Doses.
- 4 At least 8 weeks after the previous dose.
- **6** 8 weeks between doses.
- **6** A complete series is:
 - Two (PCV7) or three (PCV7 [high risk] or PCV10) primary doses given at appropriate intervals and a 3rd or 4th dose given on or after 12 months of age and at least 8 weeks after previous dose, or
 - A delayed or interrupted schedule that has been completed at a later age according to the information in this table.
- If an infant has a history of receiving their last dose before 12 months of age, give an additional dose at \geq 12 months of age with a minimum interval of 8 weeks from last dose.



2019 August

Recommendations for Pneumococcal Immunization with 13-Valent Pneumococcal Conjugate Vaccine (PCV 13) and 23-Valent Pneumococcal Polysaccharide Vaccine (PPV 23) for Children at High Risk of Pneumococcal Disease (except those with HIV infection).

Age at presentation:	Previous doses PCV 13	Recommendations: 00
≤ 23 months	None	PCV 13 as per primary high risk series schedule
24 to 59 months	None	2 doses of PCV 13, followed by one dose of PPV 23, 8 weeks after the dose of PCV 13. 3 Once-only revaccination with PPV 23, 5 years after the first dose of PPV 23 5 6
	≤ 2 doses PCV13 before 24 months	2 doses of PCV 13, followed by one dose of PPV 23, 8 weeks after the dose of PCV 13. Once-only revaccination with PPV 23, 5 years after the first dose of PPV 23 6
	before 24 months	One dose of PPV 23 at 24 months of age, ① Once-only revaccination with PPV 23, 5 years after the first dose of PPV 23 ⑤ ⑥
	One dose of PPV 23	Two doses of PCV 13, 8 weeks apart, and 1 year after the administration of PPV 23. Once-only revaccination with PPV 23, 5 years after the first dose of PPV 23 6

- For list of children at high-risk for pneumococcal disease, see Pneumococcal Conjugate Vaccine (Prevnar®13)
- **2** PPV 23 is provided free for high risk children.
- 3 Children who have completed a PCV13 vaccine series before they are 2 years of age, and who are among the high risk groups for pneumococcal disease, should receive one dose of pneumococcal polysaccharide vaccine at 2 years of age, no sooner than 8 weeks after the last dose of PCV 13.
- If high risk children ≥ 2 years of age received pneumococcal polysaccharide vaccine first, offer pneumococcal conjugate vaccine at least 1 year after the polysaccharide vaccine.
- For list of high-risk conditions for which revaccination with PPV23 is recommended, see Pneumococcal Polysaccharide Vaccine (Pneumovax® 23).
- **6** A complete series is:
 - two PVC13 [healthy] or three PCV13 [high risk]) primary doses given at appropriate intervals and a 3rd (healthy) or 4th (high risk) dose given on or after 12 months of age and at least 8 weeks after previous dose, or
 - a delayed or interrupted schedule that has been completed at a later age



2019 August

Recommendations for Pneumococcal Immunization With 13-Valent Pneumococcal Conjugate Vaccine (PCV 13) and 23-Valent Pneumococcal Polysaccharide Vaccine (PPV 23) for HIV infected individuals.

Age at presentation:	Previous doses PCV 13 &/or PPV23	Recommendations: 0
≥ 60 months up to 120 months (5-10 years)	0 doses of PPV23 0 doses of PCV13	1 dose PCV13 followed by 1 dose PPV23 8 weeks later Once only revaccination with PPV23, 5 years after the first dose of PPV23
	1 dose of PPV23 0 doses of PCV13	1 dose of PCV13 one year post previous dose of PPV23 Once only revaccination with PPV23, 5 years after the first dose of PPV23
	2 doses PPV23 0 doses of PCV13	1 dose PCV13 at least 1 year post last dose of PPV23
	PCV13 series completed 0 doses of PPV23	One dose of PPV 23 at 24 months of age Once-only revaccination with PPV 23, 5 years after the first dose of PPV 23 2
All individuals >10 years of age	0 doses of PPV23 0 doses of PCV13	1 dose of PCV13 followed by 1 dose PPV23 8 weeks later Once only revaccination of PPV23, 5 years after the first dose of PPV23
	1 dose of PPV23 0 doses of PCV13	1 dose of PCV13 at least one year post last dose of PPV23 Once only revaccination of PPV23, 5 years after the first dose of PPV23 and at least 8 weeks post PCV13
	2 doses PPV23 0 doses of PCV13	1 dose PCV13 at least 1 year post last dose of PPV23

- PPV 23 & PCV13 is provided free for HIV infected individuals.
- **2** A complete series is:
 - two PVC13 [healthy] or three PCV13 [high risk]) primary doses given at appropriate intervals and a 3rd (healthy) or 4th (high risk) dose given on or after 12 months of age and at least 8 weeks after previous dose, **or**
 - a delayed or interrupted schedule that has been completed at a later age



		2021 January
Pneumococca	l Polysaccharide Vaccine (Pneumovax® 23)	
		Supplier: Merck Canada Inc.
INDICATIONS		INITIAL SERIES
Recommended a	and provided free to:	1 dose:
 All perso 	ns ≥ 65 years of age	0.5 ml SC or IM
• All reside	ents of Extended or Intermediate Care Facilities	
Recommended a	and provided free to:	2 doses 7 0 1 :
 All perso 	ns ≥ 2 years of age with:	0.5mL SC or IM
o D	Diabetes	+ booster of 0.5mL, to ensure they
o A	Alcoholism	receive at least one dose after age
	Cystic fibrosis	65.
。 C	Chronic CSF leak	
。 C	Chronic liver disease including cirrhosis, chronic	
F	lepatitis B, Hepatitis C	
。 C	Chronic heart or lung disease 3	
	Cochlear implant (candidate or recipient)	
o F	lomelessness❹ and/or illicit drug use❺	
。 C	igarette smokers	
	and provided free to:	2 doses����₽:
•	ns ≥ 2 years of age with:	0.5mL SC or IM + booster of
	natomic or functional asplenia 🛈	0.5mL 5 years later.
o S	iickle cell disease	
o Ir	mmunosuppression related to disease (e.g., malignant	A 3 rd dose may be administered
n	eoplasm (including leukemia and lymphoma); HIV 9 ;	after age 65 to these clients, if 2 nd
	nultiple myeloma) ② or therapy (e.g., high dose, systemic	dose was given prior to this age.
S	teroids or severe rheumatoid arthritis requiring	
ir	mmunosuppressive therapy)	
。 C	Congenital immunodeficiency states (e.g., complement,	
р	roperdin or factor D deficiency)	
	Chronic kidney disease	
0 F	Receipt of hematopoietic stem cell transplant (HSCT) 6	
o S	folid organ or islet cell transplant (candidate or recipient)	



	2021 January		
Pneumococcal Polysac	Pneumococcal Polysaccharide Vaccine (Pneumovax® 23)		
	Supplier: Merck Canada Inc.		
REINFORCEMENTS	Booster doses should be administered as above, with all doses 5 years apart.		
	Client may receive 1, 2, or 3 doses. See bullets below.		
CONTRAINDICATIONS	History of an anaphylactic reaction to a previous dose of a pneumococcal vaccine or		
	to any component of Pneumovax® 23 vaccine		
VACCINE	Potential allergens: none.		
COMPONENTS	Other components: phenol.		
PRECAUTIONS 8	Adverse reaction may intensify if revaccination occurs within 2 years		
	Pneumococcal vaccination should be administered at least two weeks prior to the		
	initiation of immunosuppressive therapy.		
ADVERSE EVENTS	Local: Soreness and erythema; rarely severe arthus reaction (rarely)		
	Systemic: Fever		

- Give vaccine at least 14 days before splenectomy, or, if not possible 14 days post-splenectomy. If there is concern that the patient may not present later for immunization, give at hospital discharge.
- Give vaccine before initiation of immunosuppression therapy, and early in the course of HIV infection. See Recommendations for PCV13 and PPV23 for individuals with HIV infection p.49 for intervals between PCV13 and PPV23 immunizations. Contact YCDC for most recent CD4 counts prior to immunization.
- Except hypertension and asthma, unless management involves ongoing high dose oral corticosteroids
- Homelessness to be defined by local jurisdiction.
- Crack cocaine smokers have been shown to be at increased risk of invasive pneumococcal disease.
- $oldsymbol{\Theta}$ HSCT recipients ≥ 2 years of age: must follow re-immunization schedule specific to province in which treatment was given, and contact Immunization Program Manager.
- Ohildren who are among the high risk groups for pneumococcal disease and who have completed the PCV vaccine series before they are 2 years of age, should receive one dose of pneumococcal polysaccharide vaccine at 2 years of age, no sooner than 8 weeks after the last dose of PCV. If high risk children ≥ 2 years of age received pneumococcal polysaccharide vaccine first, offer pneumococcal conjugate vaccine at least 1 year after the polysaccharide vaccine.
- **9** PNEUMOVAX® 23 can be given simultaneously with varicella zoster vaccine, influenza, Hib, and meningococcal vaccines, using separate syringes/needles at separate sites.
- See pg 49 for PCV13 & PPV23 for more detail on vaccine series for HIV infected children and adults.
- If both pneumococcal conjugate vaccine (PCV) and PPV23 are recommended, the age appropriate PCV series should be administered first, followed at least 8 weeks later by PPV23. If PPV23 has already been administered, PCV should be administered at least one year later.
- These clients should receive one dose before age 65 and one dose after age 65. All doses must be administered 5 years apart.
- Specific clients, as listed above, may receive a 3rd dose if indicated. If under age 60 at time of first dose, they should receive their first dose, 2nd dose 5 years later, 3rd dose after age 65 AND at least 5 years later. If second dose is after age 65, a 3rd dose will not be needed.