



Florida/Caribbean AIDS Education and Training Center

HIV CareLink

A Newsletter for HIV/AIDS Primary Care Providers

ABOUT US

The Florida/Caribbean AIDS Education and Training Center provides state-of-the-art HIV education, consultation, and resource materials to health care providers in Florida, Puerto Rico and the US Virgin Islands.

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Adult Immunization Update: 2009

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In this edition of *HIV CareLink* we will summarize the latest updates and changes in the adult immunization schedule and point out important issues related to HIV infected adults. Every year, usually in October, the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC) reviews the adult immunization schedule and recommends updates or changes. In addition, the immunization schedule is updated anytime a new vaccine or new important information about a vaccine becomes available. These recommendations do not become official until published in the Morbidity and Mortality Weekly Report (MMWR). The current adult immunization schedule was published in the MMWR on January 9, 2009. This Schedule is co-endorsed by the American College of Physicians, American Academy of Family Physicians and the American College of Obstetricians and Gynecologists.

Changes in the Schedule/Important Points:

- All adults are recommended to receive two doses of varicella vaccine. Any adult who has previously received one dose of varicella vaccine should be given the second dose. For HIV infected individuals there are special considerations (see below)
- The use of polysaccharide pneumococcal vaccine (PPS) in the Native American populations has been clarified. Cigarette smoking and asthma have been added as indications for PPS vaccination
- For individuals with HIV infection, nephrotic syndrome, chronic renal failure, asplenia (anatomic or functional), or other immunocompromising conditions, a second dose of PPS is recommended five years after the first dose
- A second dose of PPS is recommended for persons ≥ 65 years of age immunized with PPS before 65 years of age and a five-year lapse since the previous PPS immunization
- If previously vaccinated with the polysaccharide meningococcal vaccine, repeat immunization with the conjugated meningococcal vaccine may be necessary after a five-year interval if the individual remains at high risk for meningococcal diseases
- Although healthcare workers are not at an increased occupational risk for HPV, they should be vaccinated with the human papillomavirus vaccine per age based recommendations

- HPV vaccination may begin at age nine
- Children <5 years of age are at highest risk for *Haemophilus influenzae* type b (Hib) disease. However, consideration of use of Hib conjugate vaccine should also be given in some high-risk adult population.
- Combination vaccine should be considered if all the components of the vaccine are indicated and safe in adults. An example: where safety of vaccine use in adults is not proven is the combination vaccines containing childhood type pertussis vaccine. These vaccines should not be used in adults. On the other hand, in a patient in whom diphtheria, tetanus and pertussis immunization history is uncertain or they have not been immunized, a primary series of three doses of Td is recommended and any one of the three doses can be replaced with Tdap to provide potential protection against pertussis.

AUTHOR NOTE: Although not yet published in MMWR, in its February meeting ACIP recommended that hepatitis A vaccine be given to all contacts of internationally adopted children

Specific for HIV Infected Individuals

- Two doses of varicella vaccine are recommended if indicated based on the immune status of the individual. This is a new recommendation and anyone who has received only one dose of varicella vaccine, and is still eligible for the vaccine should be given the second dose if $CD4 > 200$ cells/mm³.

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AUTHOR NOTE: Because of the potentially higher risk of complications in HIV infected individuals, the author recommends a second dose of the varicella vaccine for this population.

- PPS is safe in HIV infected individuals, and they should be revaccinated once five years after the first dose
- *Haemophilus influenzae* type b vaccine should be considered. This vaccine is safe in the HIV infected individuals.
- Although the new schedule does not specifically recommend double the usually recommended dose of hepatitis B vaccine in HIV infected Individuals, it does recommend consideration for use of the double dose in immunocompromised patients. Author recommends double the dose of hepatitis B vaccine in HIV infected individuals. For the immunocompromised individuals CDC recommends 1 dose of 40 µg/mL (Recombivax HB[®]) administered on a 3-dose schedule or 2 doses of 20 µg/mL (Engerix-B[®]) administered simultaneously on a 4-dose schedule at 0,1, 2 and 6 months.
- Hepatitis A vaccine should be considered in all HIV infected individuals in addition to those who are at increased risk of complications because of co-morbidities.

AUTHOR NOTE: Although there is no affirmative recommendation to give hepatitis A vaccine routinely to all HIV infected individuals author believes there is a permissive recommendation. The complete hepatitis A vaccine recommendations are available at the following link:

http://www.immunize.org/acip/acipvax_hepa.asp

Helpful Aid to Keep Your Patients up to Date on Their Immunizations

- In order to determine if your patient needs any immunizations, the Immunization Action Coalition maintains on its website a document entitled "Do I need any vaccinations today?" This is a helpful tool and can be accessed on the IAC website at the following link:

<http://www.immunize.org/catg.d/p4036.pdf>

- Vaccine information statements (VIS) for the various vaccines are useful resource for patients and can be accessed at the following CDC website link:

<http://www.cdc.gov/vaccines/pubs/vis/default.htm>

- The latest adult immunization schedule in English can be accessed at the following CDC website link:

<http://www.cdc.gov/vaccines/recs/schedules/downloads/adult/2009/adult-schedule-11x17.pdf>

- The latest adult immunization schedule in Spanish can be accessed at the following CDC website link:

<http://www.cdc.gov/vaccines/recs/schedules/downloads/adult/2009/adult-schedule-sp.pdf>

- The latest adolescent immunization schedule can be accessed at the following CDC website link:

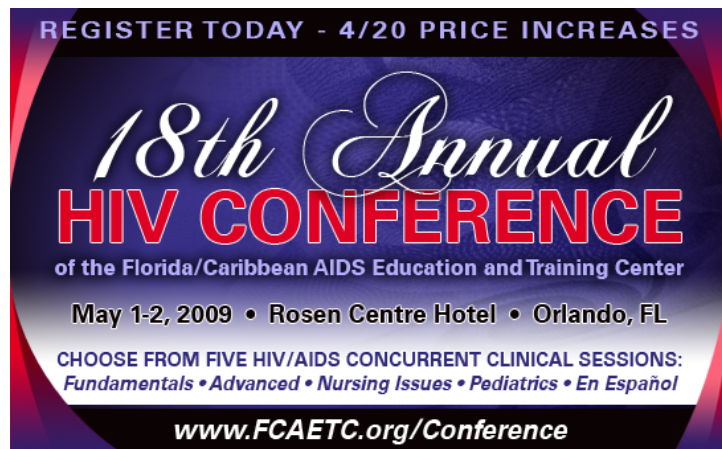
http://www.cdc.gov/vaccines/recs/schedules/downloads/child/2009/09_7-18yrs_schedule_pr.pdf

Still Contraindicated in HIV infected Individuals

- Zoster vaccine
- Intranasal influenza vaccine
- Oral polio vaccine
- Varicella vaccine if CD4 lymphocyte count is < 200 cells/mm³
- Measles-Mumps-Rubella vaccine if CD4 lymphocyte count is < 200cells/mm³

Summary

- To protect our patients it is critical to keep abreast of the latest immunization recommendations
- The CDC website provides wealth of information on immunizations
- Immunization status should be evaluated at every visit
- Recommendations for immunizations in the HIV infected individual may be different than those for the general adult population



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