

IMMUNOBIOLOGICS

IMMUNOBIOLOGIC	PRIMARY IMMUNIZATION SCHEDULE	BOOSTER SCHEDULE	COMMENTS AND CONTRAINDICATIONS	
<p><i>Haemophilus influenzae</i> Type b Conjugate Vaccine (Hib)</p> <p>HbOC HibTITER® Wyeth</p> <p>PRP-T ActHIB™ Sanofi pasteur</p> <p>PRP-OMPC PedvaxHIB Merck</p>	<p>Age at First Dose: (Months)</p> <p>HbOC 2-6 7-11 12-14 15-59</p> <p>PRP-T 2-6 7-11 12-14 15-59</p> <p>PRP-OMPC 2-6 7-11 12-14 15-59</p> <p>The optimal interval between doses is 2 months, with a minimum interval of 4 weeks.</p> <p>* This schedule may only be used when PedvaxHIB is used for both doses for infants 2-6 months.</p>	<p>Dosing Schedule 0.5 mL IM</p> <p>3 doses, 2 months apart 2 doses, 2 months apart 1 dose 1 dose</p> <p>3 doses, 2 months apart* 2 doses, 2 months apart 1 dose 1 dose</p> <p>2 doses, 2 months apart 2 doses, 2 months apart 1 dose 1 dose</p>	<p>Dose: 0.5 mL IM</p> <p>12-15 months of age 12-15 months of age 2 months after first dose None needed</p> <p>12-15 months of age[§] 12-15 months of age[§] 2 months after first dose None needed</p> <p>12-15 months of age[§] 12-15 months of age[§] 2 months after first dose None needed</p> <p>[§] At least 2 months after previous dose</p>	<p>Data suggest that if Hib conjugate vaccine is given before 6 weeks of age it may induce immunologic tolerance to additional doses of Hib vaccine. A dose given before 6 weeks of age may reduce the response to subsequent doses. As a result, Hib vaccine should never be given to a child younger than 6 weeks of age.</p> <p>All 3 conjugate Hib vaccines are interchangeable. If it is necessary to change vaccine type (or if type of vaccine previously used is unknown), 3 doses of any combination constitute the primary series. Any licensed conjugate vaccine may be used for the booster dose regardless of which vaccine was administered in the primary series</p> <p>Hib vaccine is recommended for persons of any age who are at increased risk for invasive Hib disease including persons with functional or anatomic asplenia (e.g., sickle cell disease, post-splenectomy), immunodeficiency (particularly persons with IgG2 subclass deficiency), immunosuppression from cancer chemotherapy, or infection with HIV). Previously unvaccinated persons >59 months of age at increased risk for invasive Hib disease should receive at least one pediatric dose of any Hib conjugate vaccine.</p> <p>Children <24 months of age who have had invasive Hib disease should still receive Hib vaccine, since many children of that age fail to develop immunity following natural disease. The vaccine series can be initiated (or continued) at the time of hospital discharge.</p> <p>Adverse Reactions: Injection site erythema, induration, and/or pain occur in 5-30% of recipients and usually resolves within 12-24 hours. Systemic reactions such as fever and irritability are infrequent.</p> <p>Contraindications: Anaphylaxis following a prior dose of Hib vaccine; delay vaccination in children with moderate or severe acute illness until improved; Hib vaccines contraindicated in children <6 weeks of age.</p>