

IMMUNOBIOLOGICS

| IMMUNOBIOLOGIC | PRIMARY IMMUNIZATION SCHEDULE | BOOSTER SCHEDULE | COMMENTS AND CONTRAINDICATIONS |
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| <p>Zoster Vaccine Live</p> <p>ZOSTAVAX® Merck</p> | <p>Persons aged 60 years and older:</p> <p>First: 0.65-mL SC*</p> <p>* To reconstitute the vaccine: Withdraw the entire contents of the diluent vial into a syringe. Inject all of the diluent in the syringe into the vial of lyophilized vaccine and gently agitate to mix thoroughly. Withdraw the entire contents into a syringe and inject the total volume of reconstituted vaccine subcutaneously, preferably in the upper arm.</p> | <p>Not established</p> | <p>ACIP recommends routine vaccination of all persons aged >60 years with 1 dose of zoster vaccine. Persons who report a previous episode of zoster and persons with chronic medical conditions (e.g., chronic renal failure, diabetes mellitus, rheumatoid arthritis, and chronic pulmonary disease) can be vaccinated unless those conditions are contraindications or precautions. Zoster vaccination is not indicated to treat acute zoster, to prevent persons with acute zoster from developing PHN, or to treat ongoing PHN. Before routine administration of zoster vaccine, it is not necessary to ask patients about their history of varicella (chickenpox) or to conduct serologic testing for varicella immunity. Zoster vaccination is not recommended for persons of any age who have received varicella vaccine. However, health-care providers do not need to inquire about varicella vaccination history before administering zoster vaccine because virtually all persons currently or soon to be in the recommended age group have not received varicella vaccine. The vaccine is not licensed for persons aged < 60 years, and no recommendation exists for routine vaccination of persons aged < 60 years.</p> <p>Zoster vaccine can be administered to persons at any time before, concurrent with, or after receiving blood or other antibody-containing blood.</p> <p>Antiviral agents might interfere with replication of the live, VZV-based zoster vaccine. Persons taking chronic acyclovir, famciclovir, or valacyclovir should discontinue these medications at least 24 hours before administration of zoster vaccine, if possible. These medications should not be used for at least 14 days after vaccination.</p> <p>Adverse Reactions:</p> <ul style="list-style-type: none"> • Redness, soreness, swelling, or itching at the site of the injection (about 1 person in 3). • Headache (about 1 person in 70) • No serious problems have been identified with shingles vaccine <p>Precautions:</p> <ul style="list-style-type: none"> • Postpone vaccination of persons with moderate or severe acute illnesses until the condition has improved • Zoster vaccine is not a substitute for varicella vaccine [Varicella Virus Vaccine Live (Oka/Merck)] and should not be used in children <p>Contraindications:</p> <ul style="list-style-type: none"> • History of anaphylactic/anaphylactoid reaction to gelatin, neomycin, or any other component of the vaccine • History of primary or acquired immunodeficiency states including leukemia; lymphomas of any type, or other malignant neoplasms affecting the bone marrow or lymphatic system; or AIDS or other clinical manifestations of infection with human immunodeficiency viruses • On immunosuppressive therapy, including high-dose corticosteroids. • Active untreated tuberculosis • Pregnancy (There is a registry to report inadvertent vaccination of a pregnant woman or a woman who became pregnant within 3 months of vaccination [800-986-8999].) |