

Pneumococcal Polysaccharide Vaccination Pocket Guide

Indications

Vaccination with pneumococcal polysaccharide vaccine (PPV) is recommended for **all** persons who meet any of the criteria below:

- Age 65 yrs or older
- Age 2 to 64 yrs with any of the following conditions:
 - a. functional or anatomic asplenia (e.g., sickle cell disease, splenectomy)
 - b. immunocompromising conditions (e.g., HIV infection, leukemia, congenital immunodeficiency, Hodgkin's disease, lymphoma, multiple myeloma, generalized malignancy) or on immunosuppressive chemotherapy
 - c. organ or bone marrow transplantation
 - d. chronic renal failure or nephrotic syndrome
 - e. chronic cardiovascular disease (e.g., congestive heart failure, cardiomyopathies)
 - f. chronic pulmonary disease (not asthma)
 - g. cerebrospinal fluid leak
 - h. diabetes mellitus
 - i. alcoholism or cirrhosis
 - j. candidate for or recipient of cochlear implant

Who needs a second dose of PPV?

A second PPV is indicated for persons who are:

- Age 65 years or older and previously vaccinated with PPV before age 65 years (if 5 years have elapsed since first dose).
- At highest risk of serious pneumococcal disease or likely to have a rapid decline in pneumococcal antibody levels (categories a–d above).

Intervals Between Doses

- Children 2 years and older in need of a first dose of PPV who previously received pneumococcal conjugate vaccine (PCV) should wait at least 8 weeks following PCV before receiving PPV.
- Persons 10 years of age and older in need of a second PPV should wait at least 5 years following their first PPV dose.
- Children younger than age 10 years should wait at least 3 years following their first PPV dose before receiving their second dose.

Contraindications and Precautions

- Do not give PPV to patients who have a history of a serious reaction (e.g., anaphylaxis) after a previous dose of PPV or to a PPV component.
- Minor illnesses with or without fever do not contraindicate use of PPV vaccine.

Vaccine Dosing and Administration

Administer 0.5 mL PPV either intramuscularly in the deltoid (22–25g; needle length according to the patient's age/body mass [7/8"–1½"]), or subcutaneously in the upper-outer triceps area of the arm (23–25g, 5/8" needle).

Side Effects

Most common side effects from PPV are soreness and redness at the injection site, lasting 1–2 days.

Talking Points with Patients

- *Streptococcus pneumoniae* bacteria (i.e., pneumococci) are commonly found in the upper respiratory tract of most persons.
- Pneumococcal disease most often occurs in older persons as well as persons with a predisposing condition (e.g., pulmonary disease, asplenia).
- Pneumococcal disease most commonly presents as a serious infection in the lungs (pneumonia), blood (bacteremia), or brain (meningitis). It kills more people in the U.S. each year than all other vaccine-preventable diseases combined.
- PPV is 60–70% effective in preventing serious pneumococcal disease; it does not provide substantial protection against all types of pneumonia (viral and bacterial). It is not a "pneumonia" vaccine.
- PPV is usually given once in a lifetime; however, some people (see other side) need 2 doses.
- PPV can be given at any time during the year and can be given concurrently with all other vaccines, including influenza vaccine.
- Patients who can't remember if they've ever had PPV should get vaccinated now rather than postponing it.
- Medicare covers the cost of PPV and its administration for all Medicare beneficiaries.
- High risk children younger than age 5 years need both PPV and PCV.

To order additional pocket guides, go to www.immunize.org/ppvguide.
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