



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH IMMUNIZATION PROGRAM

**PLEASE COPY THIS FOR ALL HEALTH CARE PROVIDERS
IN YOUR PRACTICE**

TO: All Users of State Supplied Vaccines

FROM: Vincent Sacco, MS *VS*
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DATE: November 29, 2011

SUBJECT: Invasive pneumococcal disease and 13-Valent Pneumococcal Conjugate Vaccine (PCV13) booster dose recommendations

The primary purpose of this communication is to remind providers that all children 14 through 59 months of age in your practice who have received an age-appropriate series of PCV7 should be given a single supplemental dose of 13-Valent Pneumococcal Conjugate Vaccine (PCV13).

The recommendations for PCV13 are provided in more detail in the attached October 21st issue of Breaking News from the American Academy of Pediatrics (AAP) entitled *Ensure eligible patients have received supplemental dose of PCV13*.

This and the AAP reminder were prompted by a recent publication on invasive pneumococcal disease in the Morbidity and Mortality Weekly Report, *Invasive Pneumococcal Disease and 13-Valent Pneumococcal Conjugate Vaccine (PCV13) Coverage Among Children Aged ≤59 Months — Selected U.S. Regions, 2010–2011* which is available at http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6043a2.htm?s_cid=mm6043a2_w.

If you have any questions, please contact the Immunization Program at 860-509-7929.

Ensure eligible patients have received supplemental dose of PCV13

by **Larry K. Pickering, M.D., FAAP**

Each year, more than 4,000 children in the United States are diagnosed with invasive pneumococcal disease (IPD). Fortunately, the 13-valent pneumococcal conjugate vaccine (PCV13, Wyeth Pharmaceuticals Inc., marketed by Pfizer Inc.) provides protection against the most common pneumococcal serotypes.

In 2010, recommendations for use of PCV13, which replaced the 7-valent pneumococcal conjugate vaccine (PCV7), were made by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention (CDC), the AAP Committee on Infectious Diseases and the American Academy of Family Physicians.

The recommendations call for a dose of PCV13 to be given at 2, 4, 6 and 12 through 15 months of age. In addition, all children 14 through 59 months of age who have received an age-appropriate series of PCV7 should be given a single supplemental dose of PCV13 since they remain at risk for IPD caused by the six serotypes unique to PCV13.

However, some eligible children still have not received the supplemental dose of PCV13 vaccine.

The CDC recently reviewed data from its ongoing PCV13 vaccine effectiveness evaluation* to determine if children had developed IPD due to a pneumococcal serotype unique to PCV13 (i.e., the six serotypes in PCV13 but not in PCV7) since the vaccine became available. Preliminary analysis indicates that more than 60 cases have occurred among children younger than 5 years of age. The majority of these children had completed a full series of PCV7 vaccinations but had not received the recommended supplemental dose of PCV13.



Review the immunization history of all children 14 to 59 months old who come to the office to determine eligibility for the supplemental dose of PCV13. Use only that vaccine.

Additional preliminary data on vaccination coverage from five Immunization Information System Sentinel Sites indicate that around half of children 12 through 23 months of age received a supplemental dose of PCV13, while only one-quarter of children 24 through 59 months of age received the supplemental dose. This means there are many children who should receive the supplemental dose of PCV13.

Health care professionals are reminded to:

- Review the immunization history of all children 14 through 59 months of age who come to the office for any reason to determine if they are eligible for the supplemental dose of PCV13. If they have not received the supplemental dose, they should be immunized with PCV13.
- Use only PCV13 vaccine. Any use of PCV7 vaccine should be discontinued even if the vaccine has not yet expired.

Pfizer's policy allows for the return of PCV7 vaccine for credit if it is in full packages and is within six months of expiry or 12 months post-expiry. Most remaining doses of PCV7 should be eligible for return under the normal return policy. Contact Pfizer at 484-865-1117 for more information.

*CDC's PCV13 vaccine effectiveness evaluation includes an active laboratory- and population-based system for tracking IPD. Twelve areas across the United States are participating in the evaluation, representing 3.2 million children younger than 5 years of age.

RESOURCES

- For helpful tables on transitioning to PCV13, see the AAP policy statement from the Committee on Infectious Diseases: *Recommendations for the Prevention of Streptococcus Pneumoniae Infections in Infants and Children: Use of 13-Valent Pneumococcal Conjugate Vaccine (PCV13) and Pneumococcal Polysaccharide Vaccine (PPSV23)*. *Pediatrics*. 2010;126:186-192, <http://pediatrics.aappublications.org/content/126/1/186.full>.
- Prevention of Pneumococcal Disease Among Infants and Children — Use of 13-Valent Pneumococcal Conjugate Vaccine and 23-Valent Pneumococcal Polysaccharide Vaccine. *MMWR*. 2010;59(RR11):1-18, www.cdc.gov/mmwr/preview/mmwrhtml/rr5911a1.htm
- For comprehensive immunization information from the Academy, visit www.aap.org/immunization/.
- For comprehensive immunization information from the CDC, visit www.cdc.gov/vaccines/recs/acip/



Dr. Pickering is editor of the AAP Red Book.