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Date: April 27, 2016

To: Wisconsin Physicians, Physician Assistants, Nurse Practitioners, Pharmacists, Long Term Care Facility Directors, Local Health Departments and Tribal Health Clinics

From: Jeffrey P. Davis, M.D., Chief Medical Officer and State Epidemiologist for Communicable Diseases

Re: PCV13 and PPSV23 recommendations for adults aged 65 years and older

During 2014, the Centers for Disease Control and Prevention (CDC) published the recommendations of the Advisory Committee on Immunization Practices (ACIP) pertaining to pneumococcal vaccination of immunocompetent adults aged ≥ 65 years: a subsequent clarification of the interval between doses was published during 2015. Accordingly, the current ACIP recommendation is that adults aged ≥ 65 years now receive the pneumococcal conjugate vaccine (PCV13, Prevnar-13[®]) followed by the pneumococcal polysaccharide vaccine (PPSV23, Pneumovax[®]23) ≥ 1 year later. Following are specific details pertaining to this recommendation.

Recommendation for immunocompetent adults:

- Adults aged ≥ 65 years who have not previously received pneumococcal vaccine or whose previous vaccination history is unknown should receive a dose of PCV13 first, followed by a dose of PPSV23 ideally ≥ 1 year later.
 - If PPSV23 cannot be given according to this schedule, the dose of PPSV23 should be given during the next clinic visit.
 - The minimum interval between administration of PCV13 and PPSV23 is 8 weeks, although it is preferred that the doses are separated by ≥ 1 year.
- Adults aged ≥ 65 years who have previously received ≥ 1 dose of PPSV23 also should receive a dose of PCV13 if they have not yet received it. A dose of PCV13 should be given ≥ 1 year after receipt of the most recent dose of PPSV23.
- For adults who previously received PPSV23 when aged < 65 years and for whom an additional dose of PPSV23 is indicated when aged ≥ 65 years, this subsequent PPSV23 dose should be given ≥ 1 year after PCV13 and ≥ 5 years after the most recent dose of PPSV23.
- Recommended intervals between PCV13 and PPSV23 for persons aged ≥ 2 years with medical indications to receive both vaccines remain unchanged.
- PCV13 and PPSV23 should not be co-administered. If a dose of PPSV23 is inadvertently given earlier than the recommended interval, the dose need not be repeated.
- Adults who received PCV13 at a younger age do not need any additional doses of PCV13.
- If an adult has previously received a dose of pneumococcal vaccine prior to December 2011 but does not know what type, it is reasonable to assume that it was PPSV23 because PCV13 was licensed by FDA during December 2011.

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- The recommendation for routine PCV13 use among adults aged ≥ 65 years will be reevaluated during 2018 and revised as needed.

Coverage rates among adults, estimated using doses recorded in the Wisconsin Immunization Registry (WIR) and population estimates from the WIR, have increased since the 2014 ACIP recommendation. Rates for PPSV23 receipt among persons aged ≥ 65 years have decreased from 52.8% (2014) to 51.5% (2015) and rates for PCV13 have increased from 2.1% (2014) to 35.6% (2015). Please continue to administer both PCV13 and PPSV23 according to the 2014 ACIP recommendation. These two vaccines provide significant protection against pneumococcal disease, and vaccination with both of these vaccines is the standard of care. Most adults are not aware that they need vaccines (e.g., influenza, Tdap, PCV13 and PPSV23), and your strong recommendation is critical to ensuring they have the best protection against serious diseases like pneumococcal disease.

Providers should take the following four steps to encourage their adult patients to receive all of the recommended vaccines:

1. Screen adult patients for their vaccination status during each visit.
2. Recommend the needed vaccines to their patients during each visit.
3. Administer the needed vaccines, or refer the patient to a provider who is able to vaccinate.
4. Document the vaccination in the patient's medical record and submit this information to the WIR.

If you would like assistance with the forecasting feature of WIR or your facility would like to begin using WIR, please contact the WIR Help Desk at 608-266-9691 or dhswirhelp@wisconsin.gov.

The full recommendations, including the original statement published on September 19, 2014, and the subsequent clarification of the interval between the two doses published on September 4, 2015, are available (respectively) at: <http://www.cdc.gov/mmwr/pdf/wk/mm6337.pdf> and <http://www.cdc.gov/mmwr/pdf/wk/mm6434.pdf>

If you have questions or need additional assistance, please contact Stephanie Borchardt at 608-266-9923 or Stephanie.Borchardt@wi.gov.

Your efforts in improving the health of Wisconsin's residents are greatly appreciated. Please make adult immunization a priority even if you do not provide vaccination services in your office.