



BC Centre for Disease Control  
Provincial Health Services Authority

Communicable Diseases and Immunization Service  
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Date: January 30, 2020

Administrative Circular: 2020:01

ATTN: Medical Health Officers and Branch Offices  
Public Health Nursing Administrators and Assistant Administrators  
Holders of Communicable Disease Control Manuals

**Re: Update to Communicable Disease Control Manual, Chapter 2: Immunization,  
Part 2 – Immunization of Special Populations**

## **Part 2 – Immunization of Special Populations**

### **Specific Immunocompromising Conditions**

#### **Hematopoietic Stem Cell Transplantation (HSCT)**

- Content added indicating that pre-vaccination serology is no longer recommended for HSCT recipients prior to vaccination. If an individual has been tested prior to vaccination and has evidence of immunity for a respective disease, they should be vaccinated regardless of these results. This is due to the decline in antibody levels 1-4 years after HSCT if the recipient is not re-immunized.
- Content added indicating that patients receiving B-cell depleting agents (e.g. rituximab) should wait until 6 months after their last dose prior to vaccine initiation.
- Content added indicating that live vaccines should not be administered until 24 months post-HSCT and then only if there is no ongoing anticancer therapy, immunosuppression, IVIg or subcutaneous Ig, or active graft-versus-host disease (GVHD). *Active* GVHD has been specified to differentiate from *sequelae* of GVHD in the eyes and mouth which is not active but the symptoms can persist for life. Such individuals may no longer be receiving immunosuppressive therapy and may receive live vaccines.
- Table 1 footnotes have been revised as follows:
  - Footnote I: A link to Part 4 – Biological Products, Gardasil®9 has been added for information on eligibility indications.
  - Footnote J:
    - Content related to the receipt of live vaccines has been revised as above.
    - Serological testing is no longer recommended after the first dose of MMR vaccine. Provide 2 doses of MMR vaccine separated by 2 months and measure measles and rubella IgG 1 month after the 2<sup>nd</sup> dose.
  - Footnote L:
    - Content related to the receipt of live vaccines has been revised as above.

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- Serological testing is no longer recommended prior to the first dose of varicella vaccine. Provide 2 doses of varicella vaccine separated by 2 months, and measure varicella IgG 1 month after the 2<sup>nd</sup> dose.
- Table 2 footnotes have been revised as follows:
  - Footnote I: Content related to the receipt of live vaccines has been revised as above.
  - Footnote J: Serological testing is no longer recommended after the first dose of MMR vaccine. Provide 2 doses of MMR vaccine separated by 2 months and measure measles and rubella IgG 1 month after the 2<sup>nd</sup> dose.
  - Footnote K: Serological testing is no longer recommended prior to the first dose of varicella vaccine. Provide 2 doses separated by 3 months, and measure varicella IgG 1 month after the 2<sup>nd</sup> dose.

**Please remove page numbers:** 1-6 dated October 2019  
**Please add new page numbers:** 1-7 dated January 2020

If you have any questions or concerns, please contact Christine Halpert, Senior Practice Leader, BCCDC (telephone: 604-707-2555 / email: [christine.halpert@bccdc.ca](mailto:christine.halpert@bccdc.ca)) or Stephanie Meier, Public Health Resource Nurse, BCCDC (telephone: 604-707-2577 / email: [stephanie.meier@bccdc.ca](mailto:stephanie.meier@bccdc.ca)).

Sincerely,



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Communicable Diseases & Immunization Service  
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pc:

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