

## Pneumococcal Conjugate Vaccine PREVNAR® 13

Supplier: Pfizer Canada Inc.

### INDICATIONS:

- Healthy infants and children 2-59 months of age to start or complete a pneumococcal vaccine series
- Children 2-59 months of age who are at high risk of pneumococcal disease due to: <sup>A</sup>
  - Sickle cell disease and other hemoglobinopathies
  - Immunosuppression related to disease [e.g. malignant neoplasm (including leukemia and lymphoma), HIV, multiple myeloma] or therapy <sup>B</sup> (e.g., high dose, systemic steroids or severe rheumatoid arthritis requiring immunosuppressive therapy)
  - Congenital immunodeficiencies involving any part of the immune system, including B-lymphocyte (humoral) immunity, T-lymphocyte (cell mediated) immunity, complement system (properdin or factor D deficiencies) or phagocytic function
  - Receipt of hematopoietic stem cell transplant (HSCT)
  - Solid organ or islet cell transplant (candidate or recipient)
  - Chronic heart or lung disease (except asthma, unless management involves ongoing high dose oral corticosteroid therapy)
  - Chronic liver disease including cirrhosis, chronic hepatitis B, chronic hepatitis C
  - Chronic kidney disease
  - Diabetes, cystic fibrosis or chronic CSF leak
  - Chronic neurological conditions that may impair clearance of oral secretions
  - Cochlear implant (candidate or recipient)
  - Anatomic or functional asplenia
- Children 5-18 years of age (inclusive) who are at high risk of pneumococcal disease due to:
  - Asplenia (anatomical or functional)
  - Receipt of HSCT
  - HIV infection <sup>B</sup>
  - Malignant neoplasm (including leukemia and lymphoma)
- Adults at high risk of pneumococcal disease due to:
  - Receipt of HSCT
  - HIV infection <sup>B</sup>

### RECOMMENDED BY THE NATIONAL ADVISORY COMMITTEE ON IMMUNIZATION BUT NOT PROVIDED FREE IN BC:

#### Recommended based on Good Evidence:

- Children up to 18 years of age (inclusive) with asthma which required medical attention in the past 12 months.

#### Recommended based on Fair Evidence:

- Adults with:
  - Asplenia (anatomical or functional)
  - Sickle cell disease or other hemoglobinopathies

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<sup>A</sup> High risk children to 59 months of age who have completed a PCV7 or PCV10 vaccine series should receive 1 dose of PCV13 at least 8 weeks after a previous dose of PCV7 or PCV10 (see [Completing a Pneumococcal Conjugate Vaccine Series](#)).

<sup>B</sup> Give vaccine before initiation of immunosuppressive therapy, and early in the course of HIV infection.

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### Recommended based on Fair Evidence (continued):

- Congenital immunodeficiencies involving any part of the immune system, including B-lymphocyte (humoral) immunity, T-lymphocyte (cell) mediated immunity, complement system (properdin or factor D deficiencies), or phagocytic functions
- Immunosuppressive therapy including use of long term corticosteroids, chemotherapy, radiation therapy, post-organ-transplant therapy, biologic and non-biologic immunosuppressive therapies for rheumatologic and other inflammatory diseases.
- Malignant neoplasms including leukemia and lymphoma
- Solid organ or islet cell transplant (candidate or recipient)

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### DOSES AND SCHEDULE: <sup>A, B</sup>

#### Children 2-59 months of age: <sup>C</sup>

- Healthy children: 3 doses given as 0.5 mL **IM** at 2, 4 and 12 months of age.
- Children medically at high risk: <sup>D, E</sup> 4 doses given as 0.5 mL **IM** at 2, 4, 6 and 12 months of age.

#### High risk children 5-18 years of age (inclusive):

- Unimmunized/incompletely immunized with:
  - Asplenia: 1 dose given as 0.5 mL **IM**. <sup>E</sup>
  - HIV Infection: 1 dose given as 0.5 mL **IM**.
- HSCT recipients: see [Part 2 - Immunization of Special Populations, Hematopoietic Stem Cell Transplantation \(HSCT\)](#).
- Malignant neoplasm (including leukemia and lymphoma): see [Part 2 - Immunization of Special Populations, Immunization of Pediatric \(those under 18 years of age\) Oncology Clients who have Completed Treatment, Including Autologous HSCT](#).

#### Adults:

- With HIV infection: 1 dose given as 0.5 mL **IM**.
- HSCT recipients: see [Part 2 - Immunization of Special Populations, Hematopoietic Stem Cell Transplantation \(HSCT\)](#).

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### ADMINISTRATION:

No additional requirements.

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### BOOSTER DOSES:

No booster doses are recommended at this time.

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<sup>A</sup> High risk individuals 2 years of age and older should receive a dose of PPV23 at least 8 weeks after completion of an age appropriate PCV series.

<sup>B</sup> Unimmunized individuals should receive PCV13 vaccine first followed by PPV23 at least 8 weeks later. If PPV23 has already been administered, PCV13 should be administered at least one year later.

<sup>C</sup> See [Part 4 – Biological Products, Completing a Pneumococcal Conjugate Vaccine Series](#) when the basic schedule has been delayed.

<sup>D</sup> Children previously immunized with PCV7 or PCV10 should receive one dose of PCV13 after 12 months of age and at least 8 weeks after a previous dose of PCV7 or PCV10.

<sup>E</sup> Give vaccine at least 14 days prior to elective splenectomy, or, if not possible, 14 days post-splenectomy. If there is concern that the patient may not present later for immunization, give at hospital discharge.

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### SEROLOGICAL TESTING:

Serological testing is not recommended before or after immunization.

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### CONTRAINDICATIONS:

1. History of an anaphylactic reaction to a previous dose of any pneumococcal vaccine or to any component of PREVNAR® 13.

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### PRODUCT COMPONENTS:

Potential allergens: diphtheria CRM<sub>197</sub> toxoid protein, polysorbate 80.

Other components: succinic acid, aluminum phosphate.

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### PRECAUTIONS:

If PPV23 has already been administered, PCV13 should be administered at least one year later.

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### SPECIAL CONSIDERATIONS:

- Health Canada has approved PCV15 for individuals 6 weeks of age and older and PCV20 for individuals 18 years of age and older; however, these vaccines are not publicly funded in BC. [ACIP](#) recommends PCV13 and PCV15 can be used interchangeably within a series. If PCV15 is provided first, there should be a minimum interval of 8 weeks between doses of PCV15 and PPV23. If PPV23 has already been administered, a PCV should be administered at least one year later. [ACIP](#) recommends if PCV20 has been provided, PPV23 is not required.

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### ADVERSE EVENTS:

**Local:** redness, swelling, tenderness.

**Systemic:** fever (and rarely, febrile seizures in young children), headache, irritability, drowsiness, restless sleep, decreased appetite, vomiting, diarrhea, muscle and joint pain, rash.