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: A
  - Sickle cell disease and other hemoglobinopathies
  - Immunosuppression related to disease [e.g. malignant neoplasm (including leukemia and lymphoma), HIV, multiple myeloma] or therapy B (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 B
  - Malignant neoplasm (including leukemia and lymphoma)
- Adults at high risk of pneumococcal disease due to:
  - Receipt of HSCT
  - HIV infection B

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

---

A 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).

B Give vaccine before initiation of immunosuppressive therapy, and early in the course of HIV infection.
Pneumococcal Conjugate Vaccine  
PREVNAR® 13  
Supplier: Pfizer Canada Inc.

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)

DOSES AND SCHEDULE:  

**Children 2-59 months of age:**
- **Healthy children:** 3 doses given as 0.5 mL IM at 2, 4 and 12 months of age.
- **Children medically at high risk:** 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.
  - 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 neoplasms (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).

**ADMINISTRATION:**
No additional requirements.

**BOOSTER DOSES:**
No booster doses are recommended at this time.

---

A 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.

B 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.

C See Part 4 – Biological Products, Completing a Pneumococcal Conjugate Vaccine Series when the basic schedule has been delayed.

D 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.

E 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.
Pneumococcal Conjugate Vaccine  
PREVNAR® 13  
Supplier: Pfizer Canada Inc.

SEROLOGICAL TESTING:
Serological testing is not recommended before or after immunization.

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

PRODUCT COMPONENTS:

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

SPECIAL CONSIDERATIONS:
Not applicable.

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.