Hepatitis B

If a 19 year old healthcare student (nursing and/or premed) who received infant series has a negative Hep BsAB should they complete a new hepatitis B (HBV) series and re-titer at 4-6 weeks?

There are a couple of ways to manage this circumstance which is occurring with increasing frequency as young people who were vaccinated against hepatitis B in infancy now enter the healthcare profession. One way is to give one dose of hepatitis B vaccine and then check the titer about 2 months later. Most will respond with a substantial antibody titer (see Clinical Infectious Diseases 2015; 60:505-513). Others are providing the complete immunization series.

Why are diabetics at a greater risk for HBV?

It is not known exactly why persons with diabetes are at greater risk of HBV than their non-diabetic counterparts. The best current hypothesis is that glucose monitoring in healthcare or communal living environments may be the vehicle for spreading HBV infection.

HPV

For young women vaccinated with the original Gardasil® (quadrivalent) formulation, is it recommended to vaccinate with Gardasil 9®?

The ACIP recently debated this question and did not make a recommendation in June 2015. The question will likely be discussed again during the October 2015 meeting. About 14% of cervical cancers are caused by the 5 HPV types in the 9-valent vaccine that are not in the 4-valent vaccine. Only a very small proportion of cancers in males are caused by those 5 types. If one were to go ahead with a vaccination series with the 9-valent vaccine (really, a re-vaccination for the patient), be aware that medical insurance is unlikely to cover it.

MMR

If an international patient has received 2 doses of measles/rubella and one of mumps, during an outbreak, is a dose of MMR recommended?

For an outbreak of mumps, the answer is yes – give MMR. For measles, the answer is maybe. If the two doses of MMR vaccine are not documented satisfactorily or there is any doubt, just give a dose of MMR.
Pneumococcal Vaccine

How are healthcare professionals (HCPs) choosing to implement the new pneumococcal vaccine recommendations?

Anecdotally, hospitals and clinics are working to introduce the new pneumococcal vaccine recommendations into their electronic provider support systems. This is not always straightforward and persistence is required.

For children now being vaccinated with PCV13 now, will they need a pneumococcal vaccine when they turn 65? If so, will it be only PPSV23?

The universal use of PVC13 among children is having a profound effect on the epidemiology of invasive pneumococcal infections in older populations (the indirect or “herd” effect). Indeed, the ACIP has said that they will re-evaluate the current recommendations as soon as 3 years from now.

Shingles

Will the new zoster vaccine be given to individuals who have already received the current zoster vaccine?

Since the new zoster vaccine is still under investigation and not yet licensed, we do not yet have an answer to that and will have to wait and see.

Tdap

Should a Tdap vaccine only be given once in an individual’s lifetime and not every 10 years (booster)?

Yes, at present Tdap is licensed only as a one-time booster dose. However, the vaccine manufacturer is in the process of submitting data to the Food & Drug Administration (FDA) to support Tdap as an every 10 year booster. Current estimates are that the FDA decision is at least a year away.

For additional information about adult immunization, visit: www.adultvaccination.org

To view related NFID webinars, visit: www.nfid.org/webinars