

National Health and Medical Research Council recommendations on pneumococcal vaccination¹

Pneumococcal vaccine should be given to the following:

- all individuals over the age of 65 years;
- Aboriginal and Torres Strait Islander people over 50 years of age;
- individuals with asplenia, either functional or anatomical, including sickle cell disease in persons more than two years of age; where possible, the vaccine should be given at least 14 days before splenectomy;
- immunocompromised patients at increased risk of pneumococcal disease (e.g. patients with HIV infection before the development of AIDS, nephrotic syndrome, multiple myeloma, lymphoma, Hodgkin's disease and organ transplantation);
- immunocompetent persons at increased risk of complication from pneumococcal disease because of chronic illness (e.g. chronic cardiac, renal or

pulmonary disease, diabetes and alcoholism);

- patients with CSF leaks.

Pneumococcal vaccine is strongly recommended for Aboriginal and Torres Strait Islander adults. In some remote parts of Australia, concern about high pneumococcal attack rates in Aboriginal people has already led to the introduction of a program of pneumococcal vaccination.

The vaccine should be given as a single dose of 0.5 mL, either deep subcutaneously or intramuscularly (preferably into the deltoid muscle or lateral mid-thigh). Intravenous or intradermal injections may cause severe reactions and should be avoided.

Revaccination

Revaccination with pneumococcal vaccine is recommended for those at risk (see above). It should be noted that this recommendation is in conflict with approved product information for

pneumococcal vaccine (Pneumovax 23) in Australia, which recommends against revaccination of adults with this vaccine. The product information recommendation in this case is considered to be out of date and out of step with contemporary practice.

Revaccination within three years of a previous dose is not recommended. Those at highest risk of fatal pneumococcal infection, including those with anatomical or functional asplenia, sickle cell disease, and the nephrotic syndrome of childhood, should be revaccinated every five years. Aboriginal and Torres Strait Islander adults over 50 years of age and other adults over 65 years of age should also be revaccinated every five years.

1. National Health and Medical Research Council. *The Australian Immunisation Handbook*. Sixth edition. Canberra: Australian Government Publishing Service, 1997.