

# Guide to Contraindications and Precautions to Commonly Used Vaccines in Adults<sup>1,\*</sup>

Vaccine	Contraindications <sup>1</sup>	Precautions <sup>1</sup>
<b>Influenza, inactivated (IIV)<sup>2,3</sup></b> <b>Influenza, recombinant (RIV)<sup>2,3</sup></b>	<ul style="list-style-type: none"> <li>Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component</li> </ul>	<ul style="list-style-type: none"> <li>Moderate or severe acute illness with or without fever</li> <li>History of Guillain-Barré Syndrome (GBS) within 6 weeks of previous influenza vaccination</li> <li>For IIV vaccine only: Egg allergy other than hives (e.g., angioedema, respiratory distress, lightheadedness, or recurrent emesis); or required epinephrine or another emergency medical intervention (IIV may be administered in a medical setting, under the supervision of a healthcare provider who is able to recognize and manage severe allergic conditions)</li> </ul>
<b>Tetanus, diphtheria, pertussis (Tdap)</b> <b>Tetanus, diphtheria (Td)</b>	<ul style="list-style-type: none"> <li>Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component</li> <li>For pertussis-containing vaccines: encephalopathy (e.g., coma, decreased level of consciousness, or prolonged seizures) not attributable to another identifiable cause within 7 days of administration of a previous dose of a vaccine containing tetanus or diphtheria toxoid or acellular pertussis.</li> </ul>	<ul style="list-style-type: none"> <li>Moderate or severe acute illness with or without fever</li> <li>GBS within 6 weeks after a previous dose of tetanus toxoid-containing vaccine</li> <li>History of Arthus-type hypersensitivity reactions after a previous dose of tetanus or diphtheria toxoid-containing vaccine; defer vaccination until at least 10 years have elapsed since the last tetanus toxoid-containing vaccine</li> <li>For Tdap only: progressive or unstable neurologic disorder, uncontrolled seizures, or progressive encephalopathy; defer until a treatment regimen has been established and the condition has stabilized</li> </ul>
<b>Varicella (Var)<sup>3</sup></b>	<ul style="list-style-type: none"> <li>Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component</li> <li>Severe immunodeficiency (e.g., hematologic and solid tumors, chemotherapy, congenital immunodeficiency, or long-term immunosuppressive therapy<sup>4</sup>), or persons with human immunodeficiency virus [HIV] infection who are severely immunocompromised</li> <li>Family history of congenital or hereditary immunodeficiency in first-degree relatives (e.g., parents and siblings), unless the immune competence of the potential vaccine recipient has been substantiated clinically or verified by a laboratory test</li> <li>Pregnancy</li> </ul>	<ul style="list-style-type: none"> <li>Moderate or severe acute illness with or without fever</li> <li>Recent (within 11 months) receipt of antibody-containing blood product (specific interval depends on product)<sup>6</sup></li> <li>Receipt of specific antivirals (i.e., acyclovir, famciclovir, or valacyclovir) 24 hours before vaccination; avoid use of these antiviral drugs for 14 days after vaccination</li> </ul>
<b>Human papillomavirus (HPV)</b>	<ul style="list-style-type: none"> <li>Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component</li> </ul>	<ul style="list-style-type: none"> <li>Moderate or severe acute illness with or without fever</li> <li>Pregnancy</li> </ul>
<b>Recombinant zoster vaccine (RZV)</b> <b>Zoster vaccine live (ZVL)<sup>4</sup></b>	<ul style="list-style-type: none"> <li>Severe allergic reaction (e.g., anaphylaxis) to a vaccine component</li> <li>For ZVL only: Severe immunodeficiency (e.g., from hematologic and solid tumors, receipt of chemotherapy, or long-term immunosuppressive therapy<sup>4</sup>), or persons with HIV infection who are severely immunocompromised</li> <li>For ZVL only: Pregnancy</li> </ul>	<ul style="list-style-type: none"> <li>Moderate or severe acute illness with or without fever</li> <li>For ZVL only: Receipt of specific antivirals (i.e., acyclovir, famciclovir, or valacyclovir) 24 hours before vaccination; avoid use of these antiviral drugs for 14 days after vaccination</li> <li>For RZV only: Pregnancy and lactation</li> </ul>
<b>Measles, mumps, rubella (MMR)<sup>4</sup></b>	<ul style="list-style-type: none"> <li>Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component</li> <li>Severe immunodeficiency (e.g., hematologic and solid tumors, chemotherapy, congenital immunodeficiency, or long-term immunosuppressive therapy<sup>3</sup>), or persons with HIV infection who are severely immunocompromised</li> <li>Family history of congenital or hereditary immunodeficiency in first-degree relatives (e.g., parents and siblings), unless the immune competence of the potential vaccine recipient has been substantiated clinically or verified by a laboratory test</li> <li>Pregnancy</li> </ul>	<ul style="list-style-type: none"> <li>Moderate or severe acute illness with or without fever</li> <li>Recent (within 11 months) receipt of antibody-containing blood product (specific interval depends on product)<sup>6</sup></li> <li>History of thrombocytopenia or thrombocytopenic purpura</li> <li>Need for tuberculin skin testing<sup>7</sup></li> </ul>
<b>Pneumococcal conjugate (PCV13), polysaccharide (PPSV23)</b>	<ul style="list-style-type: none"> <li>Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component (including, for PCV13, to any vaccine containing diphtheria toxoid)</li> </ul>	<ul style="list-style-type: none"> <li>Moderate or severe acute illness with or without fever</li> </ul>
<b>Hepatitis A (HepA)</b>	<ul style="list-style-type: none"> <li>Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component</li> </ul>	<ul style="list-style-type: none"> <li>Moderate or severe acute illness with or without fever</li> </ul>
<b>Hepatitis B (HepB)</b>	<ul style="list-style-type: none"> <li>Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component</li> <li>Hypersensitivity to yeast</li> </ul>	<ul style="list-style-type: none"> <li>Moderate or severe acute illness with or without fever</li> </ul>
<b>Meningococcal (MenACWY; MenB)</b>	<ul style="list-style-type: none"> <li>Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component</li> </ul>	<ul style="list-style-type: none"> <li>Moderate or severe acute illness with or without fever</li> </ul>
<b>Haemophilus influenzae type b (Hib)</b>	<ul style="list-style-type: none"> <li>Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component</li> </ul>	<ul style="list-style-type: none"> <li>Moderate or severe acute illness with or without fever</li> </ul>

## FOOTNOTES

1. The Advisory Committee on Immunization Practices (ACIP) recommendations and package inserts for vaccines provide information on contraindications and precautions related to vaccines. Contraindications are conditions that increase chances of a serious adverse reaction in vaccine recipients and the vaccine should not be administered when a contraindication is present. Precautions should be reviewed for potential risks and benefits for vaccine recipient. For a person with a severe allergy to latex (e.g., anaphylaxis), vaccines supplied in vials or syringes that contain natural rubber latex should not be administered unless the benefit of vaccination clearly outweighs the risk for a potential allergic reaction. For latex allergies other than anaphylaxis, vaccines supplied in vials or syringes that contain dry, natural rubber or natural rubber latex may be administered.

2. Live attenuated influenza vaccine (LAIV) should not be used during the 2017–2018 influenza season.

3. For additional information on use of influenza vaccines among persons with egg allergy, see CDC. “Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices (ACIP) – United States, 2017–18 Influenza Season. *MMWR* 2017; 66(2):1–20 available at [www.cdc.gov/mmwr/volumes/66/rr/r6602a1.htm](http://www.cdc.gov/mmwr/volumes/66/rr/r6602a1.htm).

4. MMR may be administered with VAR or ZVL on the same day. If not administered on the same day, separate live vaccines by at least 28 days.

5. Immunosuppressive steroid dose is considered to be 20 mg or more prednisone or equivalent for two or more weeks. Vaccination should be deferred for at least 1 month after discontinuation of immunosuppressive steroid therapy. Providers should consult ACIP recommendations for complete information on the use of specific live vaccines among persons on immune-suppressing medications or with immune suppression because of other reasons.

6. Vaccine should be deferred for the appropriate interval if replacement immune globulin products are being administered (see Table 3-5 “Best Practices Guidance of the Advisory Committee on Immunization Practices [ACIP],” available at [www.cdc.gov/vaccines/hcp/acip-recs/general-recs/index.html](http://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/index.html)).

7. Measles vaccination may temporarily suppress tuberculin reactivity temporarily. Measles-containing vaccine may be administered on the same day as tuberculin skin testing, or should be postponed for at least 4 weeks after the vaccination.

\* Adapted from CDC. “Table 4-1. Contraindications and Precautions to Commonly Used Vaccines” found in: CDC. “Best Practices Guidance of the Advisory Committee on Immunization Practices [ACIP],” available at [www.cdc.gov/vaccines/hcp/acip-recs/general-recs/index.html](http://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/index.html).

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