

# Vaccine Highlights

## Recommendations, schedules, and more

*Editor's note: The information in Vaccine Highlights is current as of December 9, 2016.*

### Next ACIP meetings

The Advisory Committee on Immunization Practices (ACIP) is comprised of 15 national experts who advise CDC on the appropriate use of vaccines.

ACIP meets three times a year in Atlanta; meetings are open to the public and viewable online via live webcast. The next meetings will be held on Feb. 22–23 and June 21–22, 2017. For more information, visit [www.cdc.gov/vaccines/acip](http://www.cdc.gov/vaccines/acip).

ACIP periodically issues recommendations on the use of vaccines; they are published and readily available in the *Morbidity and Mortality Weekly Report (MMWR)*. Clinicians who vaccinate should have a current set for reference. Here are sources:

- Download from IAC's website: [www.immunize.org/acip](http://www.immunize.org/acip)
- Download from CDC's website: [www.cdc.gov/vaccines/hcp/acip-recs](http://www.cdc.gov/vaccines/hcp/acip-recs)

In addition, extensive information on ACIP meetings is available at [www.cdc.gov/vaccines/acip/meetings/index.html](http://www.cdc.gov/vaccines/acip/meetings/index.html).

### HPV vaccine news

On October 7, the Food and Drug Administration approved a 2-dose schedule for Gardasil 9 HPV vaccine (Merck) for people 9 through 14 years of age. The approval was based on a clinical trial that demonstrated a non-inferior response to 2 doses of Gardasil 9 among girls and boys 9 through 14 years of age compared to a 3-dose schedule among women 16 through 26 years of age. The revised package insert and Summary Basis for Regulatory Action is available on the FDA website at [www.fda.gov/BiologicsBloodVaccines/Vaccines/Approved-Products/ucm426445.htm](http://www.fda.gov/BiologicsBloodVaccines/Vaccines/Approved-Products/ucm426445.htm)

On December 2, CDC released an updated human papillomavirus (HPV) vaccine VIS. It is similar to the previous 9-valent HPV vaccine VIS, except that it contains information about the recently approved 2-dose schedule. Providers are encouraged to begin using the new VIS now but may use up stocks of the previous version, especially for patients still using the 3-dose schedule.

The new VIS no longer has “Gardasil-9” in the title because the other two HPV vaccines (Cervarix and quadrivalent Gardasil) are no longer distributed in the U.S. The last doses of Cervarix have already expired, and the last doses of Gardasil will expire in May 2017. At that point Gardasil-9 will be the only HPV vaccine available in the U.S. and this will be

the only VIS. The new VIS is available on the on the IAC VIS website at [www.immunize.org/vis/vis\\_hpv\\_gardasil.asp](http://www.immunize.org/vis/vis_hpv_gardasil.asp). Translations of the HPV9 VIS are acceptable to use until new translations become available.

### Influenza vaccine news

On November 18, the Food and Drug Administration approved an extension of the age range of quadrivalent FluLaval (inactivated influenza vaccine, GSK) to include children 6 through 35 months of age. FluLaval was previously approved for people 3 years of age and older. The dosage approved for children 6 through 35 months of age is 0.5 mL – the same dosage as for people 3 years of age and older. ACIP has not yet issued a recommendation regarding the use of FluLaval in children age 6 through 35 months. However, clinicians are free to use this and other vaccines in a manner consistent with their labeling. The revised package insert and Summary Basis for Regulatory Action is available on the FDA website at [www.fda.gov/BiologicsBloodVaccines/Vaccines/Approved-Products/ucm112845.htm](http://www.fda.gov/BiologicsBloodVaccines/Vaccines/Approved-Products/ucm112845.htm).

### MenACWY vaccine news

On November 4, CDC published “Recommendations for Use of Meningococcal Conjugate Vaccines in HIV-Infected Persons – ACIP, 2016” in *MMWR*. The document is available at [www.cdc.gov/mmwr/volumes/65/wr/pdfs/mm6543.pdf](http://www.cdc.gov/mmwr/volumes/65/wr/pdfs/mm6543.pdf), pages 1189–94. Routine meningococcal conjugate (MenACWY) vaccination is now recommended for all HIV-infected people age 2 months and older. Children 2 months and older should receive an age-appropriate series. People 2 years and older should receive 2 doses of MenACWY separated by 8 weeks. All HIV-infected people should receive booster doses of MenACWY throughout their life. ACIP previously recommended that children at increased risk of meningococcal disease not receive the Menactra brand of MenACWY until age 2 years. The new guidance clarifies that Menactra MenACWY may be given to children younger than age 2 years as long as it is given at least 4 weeks after completion of the PCV13 vaccine series. ACIP also clarified that Menactra MenACWY may be given before or at the same visit as DTaP but should not be given until at least 4 weeks after a dose of DTaP because of evidence of interference with the response to Menactra. The Menveo brand of MenACWY may be given any time before or after a dose of DTaP or PCV13.

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### Hepatitis B vaccine news

On October 19, ACIP voted to approve a single guidance document that consolidated previously published hepatitis B vaccination recommendations into a comprehensive statement. ACIP re-emphasized the importance of the hepatitis B birth dose as a safety net against chronic HBV infection by recommending that all infants of HBsAg-negative (hepatitis B surface antigen-negative) mothers should receive hepatitis B vaccine within 24 hours of birth. This removes previous policy language that allowed for a delay in administering the birth dose in certain rare circumstances and on a case-by-case basis. The new comprehensive hepatitis B ACIP statement is being prepared for publication. ♦

### Current VIS dates

Check the dates on your supply of Vaccine Information Statements (VISs). If they are out of date, obtain the most up-to-date versions as well as VIS translations in more than 30 languages at [www.immunize.org/vis](http://www.immunize.org/vis).

Adenovirus.....	6/11/14	MMRV.....	5/21/10
Anthrax.....	3/10/10	Multi-vaccine.....	11/5/15
Chickenpox.....	3/13/08	PCV13.....	11/5/15
DTaP.....	5/17/07	PPSV.....	4/24/15
Hib.....	4/2/15	Polio.....	7/20/16
Hepatitis A.....	7/20/16	Rabies.....	10/6/09
Hepatitis B.....	7/20/16	Rotavirus.....	4/15/15
HPV.....	12/2/16	Shingles.....	10/6/09
Influenza.....	8/7/15	Td.....	2/24/15
Japanese enceph.../1/24/14		Tdap.....	2/24/15
MCV4/MPSV4.....	3/31/16	Typhoid.....	5/29/12
MenB.....	8/9/16	Yellow fever.....	3/30/11
MMR.....	4/20/12		

For a ready-to-print version of this table for posting in your practice, go to [www.immunize.org/catg.d/p2029.pdf](http://www.immunize.org/catg.d/p2029.pdf).