PNEUMOCOCCAL CONJUGATE VACCINE

WHAT YOU NEED TO KNOW

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis.

1. Pneumococcal disease

Infection with *Streptococcus pneumoniae* bacteria can make children very sick.

It causes blood infections, pneumonia, and bacterial meningitis, mostly in young children. (Meningitis is an infection of the covering of the brain.) Pneumococcal meningitis kills about 3 people in 10 who get it.

Pneumococcal meningitis can also lead to other health problems, including deafness and brain damage.

Before there was a vaccine, pneumococcal infection caused:

- over 700 cases of meningitis,
- 13,000 blood infections,
- about 5 million ear infections, and
- about 200 deaths

every year in the United States in children under five.

Children younger than 2 years of age are at highest risk for serious disease.

Pneumococcal bacteria are spread from person to person through close contact.

Pneumococcal infections can be hard to treat because some strains of the bacteria have become resistant to the drugs that have been used to treat them. This makes prevention of pneumococcal infections, through vaccination, even more important.

2. Pneumococcal conjugate vaccine (PCV)

There are 91 strains of pneumococcal bacteria. Pneumococcal conjugate vaccine (PCV) protects against 7 of them. These 7 strains are responsible for most severe pneumococcal infections among children. Since PCV came into use, severe pneumococcal disease has dropped by nearly 80% among children under 5.

PCV can also prevent some cases of pneumonia and some ear infections. But pneumonia and ear infections have many causes, and PCV only works against those caused by pneumococcal bacteria.

PCV is given to infants and toddlers . . . to protect them when they are at greatest risk for serious diseases caused by pneumococcal bacteria.

Older children and adults with certain chronic illnesses may get a different vaccine called pneumococcal polysaccharide vaccine. There is a separate Vaccine Information Statement for that vaccine.

3. Who should get PCV and when?

Infants and Children Under 2 Years of Age

PCV is routinely given as a series of 4 doses, one dose at each of these ages:

- 2 months - 6 months
- 4 months - 12-15 months

Children who miss their shots at these ages should still get the vaccine. The number of doses and the intervals between doses will depend on the child’s age. Ask your health care provider for details.

Children 2 through 4 Years of Age

- Healthy children between their 2nd and 5th birthdays who have not completed the PCV series should get 1 dose.

- Children with medical conditions such as:
  - sickle cell disease,
  - a damaged spleen or no spleen,
  - cochlear implants,
  - HIV/AIDS or other diseases that affect the immune system (such as diabetes, cancer, or liver disease), or
  - chronic heart or lung disease . . .

  or children who take medications that affect the immune system, such as chemotherapy or steroids . . .
should get 1 or 2 doses of PCV, if they have not already completed the 4-dose series. Ask your health care provider for details.

PCV may be given at the same time as other vaccines.

**Some children should not get PCV or should wait**

Children should not get pneumococcal conjugate vaccine if they had a serious (life-threatening) allergic reaction to a previous dose of this vaccine, or if they have a severe allergy to any vaccine component. Tell your health-care provider if your child has ever had a severe reaction to any vaccine, or has any severe allergies.

Children with minor illnesses, such as a cold, may be vaccinated. But children who are moderately or severely ill should usually wait until they recover before getting the vaccine.

**What are the risks from PCV?**

Any medicine, including a vaccine, could possibly cause a serious problem, such as a severe allergic reaction. However, the risk of any vaccine causing serious harm, or death, is extremely small.

In studies (nearly 60,000 doses), pneumococcal conjugate vaccine was associated with only mild reactions:

- Up to about 1 infant out of 4 had redness, tenderness, or swelling where the shot was given.
- Up to about 1 out of 3 had a fever greater than 100.4°F, and up to about 1 in 50 had a higher fever (over 102.2°F).
- Some children also became fussy or drowsy, or had a loss of appetite.

No serious reactions have been associated with this vaccine.

Life-threatening allergic reactions from vaccines are very rare. If they do occur, it would be within a few minutes to a few hours after the vaccination.

**What if there is a severe reaction?**

**What should I look for?**

Any unusual condition, such as a high fever or behavior changes. Signs of a severe allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

**What should I do?**

- Call a doctor, or get the person to a doctor right away.
- Tell the doctor what happened, the date and time it happened, and when the vaccination was given.
- Ask your provider to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form.
  
  Or you can file this report through the VAERS website at [www.vaers.hhs.gov](http://www.vaers.hhs.gov), or by calling 1-800-822-7967.

VAERS does not provide medical advice.

**The National Vaccine Injury Compensation Program**

A federal program exists to help pay for the care of anyone who has a serious reaction to a vaccine.

For more information about the National Vaccine Injury Compensation Program, call 1-800-338-2382 or visit their website at [www.hrsa.gov/vaccinecompensation](http://www.hrsa.gov/vaccinecompensation).

**How can I learn more?**

- Ask your provider. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
  - Call 1-800-232-4636 (1-800-CDC-INFO) or
  - Visit CDC’s website at [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines).