Press Release

For Immediate Release
July 8, 2004`

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Health Groups Reinstate Recommendation for Third Dose of Pediatric Pneumococcal Conjugate Vaccine (Prevnar®)

Public health and physician groups today recommended that healthcare providers increase the number of doses of pneumococcal conjugate vaccine (PCV7, trade name Prevnar®) administered to healthy children from two to three. Production problems earlier this year caused shortages of the vaccine and prompted the Centers for Disease Control and Prevention (CDC) to reduce the recommended four doses to two to most effectively use the limited available doses.

The CDC, the Advisory Committee on Immunization Practices, American Academy of Family Physicians, and the American Academy of Pediatrics also recommended that providers continue to administer the full four-dose series of the vaccine to children up to 15 months of age with health conditions such as sickle cell anemia or immune system disorders, who are at increased risk of severe disease. The groups said providers should defer the fourth dose of the vaccine for healthy children until production and supply data convincingly demonstrate supplies of the vaccine are adequate for routine administration of the four-dose series.

“CDC has worked closely with the manufacturer to assess the situation and manage limited supplies of the vaccine. Supplies are now adequate to reinstate the third dose,” said Dr. Steve Cochi, acting director of the CDC National Immunization Program. “We will continue to closely monitor supplies and will make additional recommendations if the supply situation changes.”

The vaccine can help prevent serious pneumococcal diseases, such as meningitis and blood infections. Pneumococcal infection can cause serious illness and even death. Invasive pneumococcal disease is the leading cause of bacterial meningitis in the United States. Children under two years of age are at highest risk. Before a vaccine was available, each year pneumococcal infection caused more than 700 cases of meningitis, 13,000 blood infections and about 5 million ear infections.

In February 2004, CDC recommended suspension of the fourth dose of PCV7 when it learned the manufacturer, Wyeth Vaccines (Collegeville, PA), would not be able to produce enough vaccine to meet demand. In March, when it became clear that production would be curtailed for several months, CDC recommended the third dose also be withheld.

The vaccine is normally recommended for young children in a four-dose schedule: one dose each at 2 months, 4 months, and 6 months of age, and one dose between 12 and 15 months of age. This recommendation reinstates the third dose usually administered at 6 months for healthy children. PCV7 is not routinely recommended for children older than two years.

The public health and medical groups today also recommended a catch-up schedule for children who missed the third dose. The highest priority for catch-up vaccination is children at high risk for invasive pneumococcal disease. Second priority is vaccination of healthy children younger than 24 months who have not received any doses of pneumococcal conjugate vaccine. The third priority is vaccination of healthy children younger than 12 months of age who have not yet received 3 doses.

Because of the frequency of health-care provider visits for children during their first 18 months, catch-up vaccination might occur at regularly scheduled visits for most children who receive vaccines from their primary-care provider. Providers who administer vaccinations but do not see children routinely for other reasons should consider a notification process to contact parents of under-vaccinated children.

More information about these recommendations and PCV7 (Prevnar®) is available at: http://www.cdc.gov/nip/news/shortages/.