

## Health Alerts

### **Health Advisory #192 - ROUTINE Tdap VACCINATION FOR ADOLESCENTS & ADULTS - 01/08/2007**

In 2005, Tdap (tetanus toxoid, reduced diphtheria toxoid and acellular pertussis vaccine, adsorbed) was licensed for use in the United States. The availability of Tdap for adolescents and adults offers an opportunity to reduce the burden of pertussis in the United States. In 2005, over 25,000 cases of pertussis were reported; data from the 24,857 reported cases in 2004 showed that more than 2/3 occurred in adolescents and adults. The primary objective of adolescent and adult Tdap vaccination is to protect that vaccinee from pertussis infection.

The highest rates of hospitalization and death, however, are in infants with pertussis. The secondary objective of adolescent and adult Tdap vaccination is to reduce the reservoir of pertussis in the population at large, and thereby potentially 1) decrease exposure of persons at increase risk for complicated infection (e.g., infants), and 2) reduce the cost and disruption of pertussis in health care facilities, schools, and other institutional settings.

There are 2 Tdap products: BOOSTRIX (GlaxoSmithKline Biologicals) which is licensed for adolescents aged 10 - 18 years, and ADACEL (sanofi pasteur) which is licensed for adolescents and adults aged 11 - 64 years. The Advisory Committee on Immunization Practices (ACIP) now recommends that:

- Adolescents aged 11 - 18 years should receive a single dose of Tdap for booster immunization if they have completed the recommended childhood DTP or DTaP vaccination series and have not received Tdap; 11 - 12 years is the preferred age for the adolescent Tdap dose.
- Adults aged 19 - 64 years should receive a single dose of Tdap to replace tetanus and diphtheria toxoids vaccine (Td) for booster immunization if they received their last dose of Td > 10 years earlier and have not previously received Tdap.
- Intervals shorter than 10 years since the last Td may be used for booster protection against pertussis.
- Tdap may be used for wound prophylaxis, if the patient has not previously received a dose of Tdap, and > 2 years since the last Td.
- Adults who have or anticipate having close contact with an infant < 12 months (e.g., parents, grandparents < 65 years of age, child-care providers, and health care personnel) should receive a single dose of Tdap to reduce the risk of transmitting pertussis. An interval as short of 2 years from the last Td is suggested; shorter intervals can be used.
- Health care personnel who work in ambulatory care and/or hospital settings and have direct patient contact should receive a single dose of Tdap as soon as feasible if they have not previously received Tdap. These recommendations for the use of Tdap in health care personnel are supported by the Healthcare Infection Control Practices Advisory Committee (HICPAC).

The infrastructure for screening, administering, and tracking vaccinations exists at infection prevention and control, and occupational health departments at most hospitals. Implementation

of a Tdap program, which has been shown to be cost-effective, can be incorporated into existing standards for immunizations such as hepatitis B and influenza vaccines.

Source: MMWR, December 15, 2006/55(RR17);1-33

**ADDITIONAL INFORMATION**

For further information, please call the Erie County Department of Health at (716) 858-7697 or the NYSDOH Immunization Program at (518) 473-4437.

Additional information can be obtained at the following websites:

[http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5517a1.htm?s\\_cid=rr5517a1\\_e](http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5517a1.htm?s_cid=rr5517a1_e)

<http://www.cdc.gov/nip/publications/acip-list.htm>