

# Nova Scotia Pneumococcal Immunization Program

Information for Health Care Professionals

September 2024

## **Q1. What is pneumococcal disease and why is it important?**

Pneumococcal disease is caused by the bacterium *Streptococcus (S.) pneumoniae*. Pneumococcal infections can range from ear and sinus infection to pneumonia and blood stream infection. Invasive pneumococcal disease (IPD) causes more severe disease and occurs more often among young children, older adults and those with underlying medical or living conditions that place them at higher risk for disease. IPD is a major cause of illness and death worldwide.

## **Q2. What are the vaccines that protect against pneumococcal disease?**

Pneumovax 23 (Pneu-P-23) polysaccharide vaccine in older adults and high-risk individuals. Conjugate vaccines are more effective and offer longer duration of protection against IPD. Vaxneuvance (Pneu-C-15) is a pneumococcal conjugate vaccine replacing the Prevnar 13 (Pneu-C-13) conjugate vaccine in children who are not high-risk. Only one of these conjugate vaccine products should be used, either Prevnar 20 (Pneu-C-20) or Vaxneuvance (Pneu-C-15). See Q.4 and Q.7 below.

Additional information can be found in the [Canadian Immunization Guide](#) and the product monographs: [Prevnar 20 \(Pneu-C-20\)](#) and [Vaxneuvance \(Pneu-C-15\)](#). These two vaccines offer protection against 20 and 15 strains of pneumococcal disease, respectively.

## **Q3. Can pneumococcal vaccines be given at the same time as other vaccines?**

Pneumococcal vaccines may be administered concurrent with other vaccines, with the exception of a different formulation of pneumococcal vaccine (i.e., concurrent use of pneumococcal conjugate and polysaccharide vaccines). For those vaccines which can be co-administered, it's recommended to use a separate injection site. The vaccine should never be mixed with another vaccine in the same syringe.

## **Routine pneumococcal immunization**

### **Q4. Which vaccines are used as part of routine immunization for those not at increased risk of IPD?**

Vaxneuvance (Pneu-C-15) is used for infant and childhood immunization and Prevnar 20 (Pneu-C-20) is used for adults 65 years and older per the [Routine Immunization Schedules for Children, Youth & Adults](#).

### **Q5. For a child who missed part of the routine childhood schedule, should they receive a catch-up schedule with Vaxneuvance (Pneu-C-15)?**

Yes, children should receive catch up vaccination with Vaxneuvance (Pneu-C-15) until their 5th birthday. If a previous pneumococcal conjugate vaccine was administered, the minimum interval before receiving Vaxneuvance (Pneu-C-15) is 8 weeks.

**Q6. If someone finished the routine childhood or adult schedule and is not at increased risk of IPD, should they be re-immunized with the new vaccines?**

Individuals of any age who have previously received pneumococcal vaccine and are at low risk of IPD are not eligible for re-immunization. However, individuals who received pneumococcal vaccine in childhood will be eligible for the universal older adult program when they reach 65 years of age.

**Pneumococcal immunization for high-risk groups**

**Q7. Which vaccine is used for all individuals with high-risk conditions?**

The vaccine used for high-risk individuals of all ages is Prevnar 20(Pneu-C-20) and Vaxneuvance (Pneu-C-15) would not be required. See [Appendix A](#) of the *Publicly Funded Vaccine Eligibility for Individuals at High Risk of Acquiring Vaccine Preventable Disease* policy for eligible conditions.

**Q8. Were any new high-risk conditions added to the eligibility for Prevnar 20 (Pneu-C-20)?**

The eligibility was expanded and now includes the following:

- Adults 50 to 64 years who smoke
- Adults 50 to 64 years who have asthma requiring treatment in the past 12 months
- Children 2 months until their 18th birthday with asthma requiring acute medical care in the past 12 months
- Individuals of any age scheduled to receive cochlear implants
- Individuals living in residential care for children with complex medical needs
- Individuals living in communities or settings experiencing sustained high IPD rates as determined by Public Health

**Q9. Can individuals of any age with high-risk conditions receive Prevnar 20 (Pneu-C-20) if they have not yet completed their immunization schedule?**

An immunization schedule started with Prevnar 13 (Pneu-C-13) or Vaxneuvance (Pneu-C-15) should be completed with Prevnar 20 (Pneu-C-20) at the minimum interval of 8 weeks.

**Q10. Can individuals of any age with high-risk conditions receive Prevnar 20 (Pneu-C-20) if they already completed their immunization schedule?**

Individuals with high-risk conditions who have already received Pneumovax 23 (Pneu-P-23) alone or in combination with Prevnar 13 (Pneu-C-13) are not eligible for re-immunization. Individuals who have received Pneu-P-23 or Pneu-C-13 as part of the high-risk program are eligible for the universal program once they turn 65 years of age as long as it has been at least 5 years from the last dose of a previous pneumococcal vaccine (Pneu-P-23 or Pneu-C-13). If someone who completed their routine schedule develops an eligible high-risk condition, they would then be eligible to receive Pneu-C-20 at the minimum interval.

**Q11. How can eligible individuals obtain the vaccine?**

Public Health offices, primary care practices and community pharmacies offer pneumococcal vaccines. Providers can place their usual orders through [Shopify](#). All providers in Nova Scotia will need to submit a high-risk vaccine request form to their local public health office to request vaccine for patients meeting the high-risk eligibility criteria.

**Q12. Are individuals who come to Nova Scotia from other provinces eligible for the pneumococcal vaccines?**

As per [policy directive 5.2](#), vaccines are not routinely provided through the publicly-funded immunization program to visitors or temporary residents of Nova Scotia. Further details are outlined in section 5.2 of the policy.

**Q13. When should I report an adverse event?**

Vaccine providers are required by law to report adverse events following immunization (AEFIs) to Public Health. AEFIs are any untoward medical occurrence which follows administration of a vaccine and which does not necessarily have a causal relationship with the use of a vaccine. The adverse event may be any unfavorable or unintended sign, abnormal laboratory finding, symptom or disease. See the following for more information: [It's the Law: Report Adverse Events](#).