ACIP Recommendations for Adult Pneumococcal Immunization – Helping Pharmacists Assess, Recommend, Administer or Refer

Learning Objectives

1. Discuss patient- and system-related barriers to achieving national standards for adult vaccinations
2. Outline recommendations and schedules for pneumococcal vaccination in older and high-risk adults
3. Formulate strategies to address patient questions and concerns about vaccination requirements
4. Describe opportunities to expand the role of pharmacists in the administration of adult vaccines

1. According to 2014 data from the Centers for Disease Control and Prevention (CDC), approximately what percentage of adults aged 65 years and older has received a pneumococcal vaccination?
   A. 35%
   B. 60%
   C. 75%
   D. 90%

   ANSWER: B
   ANSWER RATIONALE: Data from the CDC indicate that 61.3% of adults aged 65 years and older had received a pneumococcal vaccination in 2014 (Williams WW et al. MMWR Surveill Summ. 2016;65(1):1-36). The Healthy People 2020 goal is to increase this percentage to 90%.

2. GM is a patient who comes to the pharmacy a few weeks after turning 65 years of age. After counseling him on pneumococcal vaccines, he is eligible and interested in receiving the vaccine. What vaccine schedule would be MOST appropriate for GM?
   A. A dose of the 23-valent pneumococcal polysaccharide vaccine (PPSV23) during today’s visit followed by a dose of pneumococcal conjugate vaccine (PCV13) one year later
   B. A dose of PCV13 during today’s visit followed by a dose of PPSV23 one year later
   C. A dose of both PPSV23 and PCV13 during today’s visit
   D. A dose of PPSV23 during today’s visit followed by a dose of PCV13 within 6 months

   ANSWER: B
   ANSWER RATIONALE: The CDC’s ACIP recommends a dose of PCV13 at age 65 years for vaccine-naïve patients followed by a dose of PPSV23 one year later (Kobayashi M et al. MMWR Morb Mortal Wkly Rep. 2015;64(34):944-7).

3. Which of the following statements best describes the rationale behind ACIP’s recommendation for the order in which the PCV13 and PPSV23 vaccines are administered?
   A. The tolerability and incidence of adverse events is improved with this sequence
   B. This vaccination sequence follows that for infants and children, reducing confusion
   C. The immune response to this sequence is greater
   D. It was important to have the vaccination schedule follow Medicare coverage for older adults
ANSWER: C
ANSWER RATIONALE: The recommended sequence of PCV13 followed by PPSV23 has been associated with an improved immune response (Kobayashi M et al. MMWR Morb Mortal Wkly Rep. 2015;64(34):944-7).

4. JP, a 66-year old woman who is new to your pharmacy, requests an influenza vaccine. Upon questioning about whether she has ever received a pneumococcal vaccine, she does not recall, and has not been seen by her doctor within the past year. She asks whether she can receive a pneumococcal vaccine during today’s visit as well. How would you counsel JP at this time?
A. She is eligible for a pneumococcal vaccine, but should wait until 6 months after receiving the influenza vaccine
B. She should follow up with her primary care provider to discuss her needs
C. She should confirm whether she was previously vaccinated against pneumococcal disease as there are potential safety concerns with extra doses
D. She can receive the inactivated influenza vaccine and her first dose of the pneumococcal vaccine during this visit

ANSWER: D
ANSWER RATIONALE: It is reasonable to administer the pneumococcal vaccine to patients who do not have documentation of vaccination; extra doses will not cause harm.