**National Immunisation Program**

**Pneumococcal vaccination schedule from 1 July 2020**

**Clinical advice for vaccination providers**

From 1 July 2020, there are changes to the pneumococcal vaccination schedule under the National Immunisation Program (NIP).

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| The new recommendations from 1 July 2020 are: |
| * Children and adults with conditions that increase the risk of pneumococcal disease:   + Individuals aged >12 months with risk conditions for pneumococcal disease are recommended to receive 1 dose of 13vPCV and 2 lifetime doses of 23vPPV.   + Children diagnosed with risk conditions for pneumococcal disease at ≤12 months of age who have received 4 doses of 13vPCV according to the existing recommendations do not require an additional 13vPCV dose. |
| * Aboriginal and Torres Strait Islander children who reside in NT, Qld, SA and WA are already recommended to receive an extra dose of 13vPCV. In addition, they should now receive two doses of 23vPPV. This is because a considerable proportion of invasive pneumococcal disease in these children is caused by serotypes that are present in 23vPPV but not in 13vPCV. |
| * All Aboriginal and Torres Strait Islander adults ≥50 years of age are recommended to receive 13vPCV and two doses of 23vPPV. |
| * Older Australians without risk conditions for pneumococcal disease should receive a single dose of 13vPCV at age ≥70 years. This age of receiving a dose of pneumococcal vaccination for older Australians has been moved to age ≥70 years from ≥65 years because pneumococcal disease is much more common in people over 70 years of age than in people aged 65–69 years.   Vaccination from 70 years of age will provide better protection as people move into older age groups with increasing pneumococcal disease risk. |

# Pneumococcal vaccination

From 1 July 2020, the NIP funded pneumococcal vaccination schedule will change to reflect the current best clinical evidence in preventing pneumococcal disease in adults and in people with conditions that increase their risk of disease.

The changes seek to simplify vaccination advice by making it easier to understand who should get vaccinated, when and which vaccine they should get.

## **There are no changes to the routine infant schedule for 13-valent conjugate pneumococcal vaccine (13vPCV)**.

All children are recommended to receive three doses of 13vPCV at ages 2, 4 and 12 months. The exception to this is Aboriginal and Torres Strait Islander children living in NT, Qld, SA and WA and children with risk conditions who are recommended to have an additional dose of 13vPCV at

6 months of age.

The NIP funded pneumococcal vaccine eligibility from 1 July 2020 is set out in more detail in **Table 1**.

These changes are further represented in the *NIP pneumococcal vaccination schedule decision tree from 1 July 2020*.

The revised recommendations are also published in the [**Australian Immunisation Handbook**](https://immunisationhandbook.health.gov.au/).

# Children and adults with conditions that increase the risk of pneumococcal disease

In addition to changes to the recommendations for the pneumococcal vaccine, the list of conditions that increase the risk of pneumococcal disease has also been revised and simplified to a single list of risk conditions.

The pneumococcal vaccines recommended for many of those with risk conditions are now funded under the NIP for children and adults. However, for other risk conditions, where the rate of disease is not sufficiently high enough to be cost-effective, people will not be eligible to receive the recommended pneumococcal vaccines under the NIP.

The list of risk conditions for pneumococcal disease both funded and not funded under the NIP is set out in Table 1 of the *NIP pneumococcal vaccination schedule decision tree from 1 July 2020*.

It should be noted that individuals with functional or anatomical asplenia, including sickle cell disease or other haemoglobinopathies, and congenital or acquired asplenia, who are now eligible for NIP funded pneumococcal vaccination are now also eligible to receive meningococcal B, meningococcal ACWY and *Haemophilus influenzae* type b (Hib) vaccinations through the NIP.

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| Table 1. NIP funded pneumococcal vaccination schedule from 1 July 2020 |
| **Universal childhood schedule**   * All non-Indigenous children to receive 1 dose of 13vPCV at ages 2, 4, and 12 months (3 doses in total). * All Aboriginal and Torres Strait Islander children living in ACT, NSW, Tas and Vic to receive 1 dose of 13vPCV at ages 2, 4 and 12 months (3 doses in total). |
| **People with medical risk conditions**   * Children, adolescents and adults aged >12 months with identified risk conditions to receive 1 dose of 13vPCV and 2 doses of 23vPPV. * Children diagnosed with certain risk conditions at ≤12 months of age to receive 1 dose of 13vPCV at ages, 2, 4, 6 and 12 months (4 doses in total) and 23vPPV first dose at age 4 years and another dose at least 5 years later (2 doses in total). These children do not require any further doses of 13vPCV and 23vPPV. |
| **Aboriginal and Torres Strait Islander people**   * Aboriginal and Torres Strait Islander children living in NT, Qld, SA and WA to receive 1 dose of 13vPCV at ages 2, 4, 6 and 12 months (4 doses in total) and 23vPPV first dose at age 4 years and another dose at least 5 years later (2 doses in total). * Aboriginal and Torres Strait Islander adults aged ≥50 years without conditions associated with an increased risk of pneumococcal disease to receive 1 dose of 13vPCV and 2 doses of 23vPPV. |
| **Non-Indigenous older adults with no risk conditions**   * All non-Indigenous adults who do not have conditions associated with an increased risk of pneumococcal disease turning 70 years of age on or after 1 July 2020 to receive 1 dose of 13vPCV regardless of whether the person has previously received a NIP-funded dose of 23vPPV. * Those who are already 70 years of age or older on 1 July 2020 are also eligible for a single NIP-funded dose of 13vPCV, which can be given opportunistically at a suitable clinical encounter. |

# Dose intervals

The recommended interval between the dose of 13vPCV and the first dose of 23vPPV is 12 months (although an interval of at least 2 months is acceptable), and the youngest age recommended for receiving the first dose of 23vPPV after the required dose(s) of 13vPCV is 4 years.

The recommended interval between the two 23vPPV doses is at least 5 years.

The number of lifetime doses of 23vPPV is now limited to 2 doses for all people who are recommended to receive 23vPPV.

The doses of 23vPPV received in the past are also counted when deciding how many more are required.

If a person has already received at least two doses based on previous recommendations, no further doses of 23vPPV are to be given. (Refer to the [**Australian Immunisation Handbook**](https://immunisationhandbook.health.gov.au/) for further details).

# Pneumococcal disease

Pneumococcal disease is caused by the bacterium *Streptococcus pneumoniae*. It can cause [**severe**](https://immunisationhandbook.health.gov.au/technical-terms#invasive-disease) or [**invasive disease**](https://immunisationhandbook.health.gov.au/technical-terms#invasive-disease), including pneumonia, meningitis and bacteraemia.

Invasive pneumococcal disease (IPD) is when the bacteria are found in the blood, spinal fluid or another part of the body that would normally be sterile. IPD mainly affects young children, older people, Aboriginal and Torres Strait Islander people, people with certain long-term diseases and people with weakened immune systems.

# Australian Immunisation Register

The Australian Immunisation Register (AIR) accepts data on vaccines administered to people of all ages. Providers are required to submit data to the AIR on all vaccines administered.

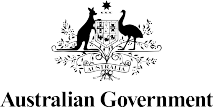
# Further information

Advice on the 1 July 2020 NIP schedule changes can be found in:

* The *ATAGI clinical advice on changes to recommendations for the use and funding of pneumococcal vaccines from 1 July 2020.*
* The *ATAGI clinical advice on changes to vaccine recommendations and funding for people with risk conditions from 1 July 2020.*
* The *ATAGI clinical advice on the changes to vaccine recommendations and funding for Aboriginal and Torres Strait Islander people from 1 July 2020.*
* The *ATAGI clinical advice on changes to vaccine recommendations and funding for older non-Indigenous adults from 1 July 2020.*
* The *ATAGI clinical advice on changes to recommendations for the use and funding of meningococcal vaccines from 1 July 2020.*

## The [**Australian Immunisation Handbook**](https://immunisationhandbook.health.gov.au/).

*All information in this fact sheet is correct as at June 2020. REPORT all vaccinations to the Australian Immunisation Register (AIR).*

**State and territory health department contact numbers:**

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| **ACT** | 02 5124 9800 | **SA** | 1300 232 272 |
| **NSW** | 1300 066 055 | **TAS** | 1800 671 738 |
| **NT** | 08 8922 8044 | **VIC** | 1300 882 008 |
| **WA** | 08 9321 1312 | **QLD** | Contact your local Public Health Unit |

