



Please familiarise yourself with the information in the *Zoster (herpes zoster/shingles)* chapter in the Immunisation Handbook 2017.

What is Zostavax used for?

Zostavax is a live attenuated vaccine used to reduce the risk of shingles (herpes zoster) and post-herpetic neuralgia. After recovery from chickenpox, the varicella-zoster virus remains latent (sleeping) in the spinal nerves. Years later, the virus may reactivate causing shingles.

Who can have Zostavax?

Zostavax is licensed for adults aged 50 years or older. There is no upper age limit to receive the vaccine.

- » The risk of developing shingles increases with advancing age from the age of 50 years.
- » Around 20% of cases will occur in those aged 50–59 years, and 50% of cases will occur in those aged 60 years or older.
- » The risk of developing chronic pain following shingles (post-herpetic neuralgia) also increases with advancing age.

Who can receive funded Zostavax?

From 1 April 2018, Zostavax will be funded for adults aged 65 years. Zostavax will also be funded for adults aged 66–80 years inclusively from 1 April 2018 to 31 March 2020 as part of a catch-up immunisation programme.

For all other age groups, Zostavax must be prescribed by a doctor and purchased from Healthcare Logistics.

Can Zostavax be given at the same visit as other vaccines?

Yes. Zostavax can be given at the same visit as any other vaccine, including influenza (Influvac® Tetra), pneumococcal (Pneumovax® 23), Tdap (Boostrix®), and Td (ADT™ Booster) vaccines.

Studies where influenza and Zostavax vaccines or pneumococcal polysaccharide (Pneumovax 23) and Zostavax vaccines were administered at the same visit have shown that the immune response to each of the vaccines, and likelihood of local or systemic vaccine responses, were similar to when the vaccines were administered on different days.

Does the adult have to have had chickenpox in the past to have Zostavax?

No. It is not necessary to ask about a chickenpox disease history.

- » Individuals aged 50 years or older can receive a dose of Zostavax regardless of whether they have had chickenpox disease or immunisation in the past or not.
- » Do not do a blood test to check for immunity against chickenpox before or after Zostavax immunisation.

Can someone who has had shingles have Zostavax?

Yes. Having shingles is expected to boost natural immunity against a further episode of shingles, so vaccinating soon after having shingles is unlikely to provide any gain. However, it is not possible to predict how long this natural immunity will last in an individual. We recommend waiting at least 1 year after an episode of shingles before having Zostavax.

How well does Zostavax prevent shingles?

The effectiveness of Zostavax at preventing shingles is highest in adults aged 50–59 years and lowest in adults aged 80 years or older.

As we age, our immune system becomes less efficient at preventing the varicella-zoster virus reactivating and also less efficient at responding to the Zostavax vaccine.

Note: Zostavax must be stored between +2°C to +8°C in the original packaging and protected from light. Discard reconstituted vaccine if not used within 30 minutes.

Age group	Vaccine efficacy against shingles
50–59 years	Around 70%
60–69 years	Around 64%
70–79 years	Around 41%
≥ 80 years	Around 18%

Does Zostavax prevent post-herpetic neuralgia?

Zostavax can reduce the severity of shingles related pain and decrease the risk of post-herpetic neuralgia if a person develops shingles despite immunisation.

How long does Zostavax protect for?

Long-term follow up of people who received Zostavax showed that the ability of Zostavax to prevent shingles decreases over time, particularly from 4–5 years after immunisation.

Can adults have a second Zostavax immunisation?

There are no recommendations for adults to receive a second Zostavax immunisation at this time.

Can a person taking antiviral medication for cold sores receive Zostavax?

Yes. However, they need to stop taking the antiviral medication for at least 24 hours prior to receiving Zostavax and for 14 days post-immunisation so the vaccine virus is able to replicate and stimulate an immune response.

Can a person who is receiving blood products receive Zostavax?

Yes. Circulating varicella-zoster antibodies do not affect the immune response to Zostavax.

Contraindications

Can a person who is immunosuppressed receive Zostavax?

No. People who are immunosuppressed such as those who are receiving medication to treat immune-mediated inflammatory diseases such as rheumatoid arthritis or Crohn's disease, or chemotherapy to treat cancer, or people who are HIV-positive with a low CD4 count, cannot receive Zostavax.

Ideally, anyone needing Zostavax should be vaccinated at least one month before commencing immunosuppressive treatment.

Can a person who is living in the same household as someone who is immunosuppressed or pregnant receive Zostavax?

Yes. Zostavax does not cause shingles. However, a varicella-like rash at the injection site following immunisation could theoretically transmit the varicella vaccine virus to a susceptible person. This risk should be weighed against the risk of shingles and possible transmission of wild-type varicella-zoster virus. If a varicella-like rash occurs, covering the rash can minimise the risk of transmission.

After immunisation

What are the possible vaccine responses?

Zostavax is generally well tolerated. The most common vaccine responses are redness, pain, or swelling at the injection site. Arm pain, itching or a varicella-like rash around the injection site, and headache following immunisation have also been reported. Zostavax does not cause shingles.

References

A list of references is provided on page two.



References

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