One important role of the spleen is removal of polysaccharide encapsulated bacteria (bacteria that are fully covered by sugar molecules) from the blood. Individuals with a poorly functioning spleen or no spleen have a life-long risk of overwhelming infection with this kind of bacteria and death, particularly from *Streptococcus pneumoniae* (pneumococcal disease), but also *Haemophilus influenzae* type b (Hib disease) and *Neisseria meningitidis* (meningococcal disease).

- It is recommended that infants, children, adolescents and adults with functional asplenia or who are pre/post-splenectomy are up-to-date with routine National Immunisation Schedule vaccines.
- Additional Schedule vaccines are also recommended and funded to reduce the risk of the infection with encapsulated bacteria. Table 1 (adults aged 18 years or older), Table 2 (children aged 12 months to under 18 years), and Table 3 (infants aged under 12 months) outline the recommended timing of these important vaccines.
- It is never too late to catch-up missed most Schedule immunisations.

### Pre-/Post-splenectomy immunisation

When splenectomy is planned, individuals would ideally complete the vaccinations they require at least 14 days prior to their surgery. If this is not possible, administer vaccines up to 14 days before splenectomy and recommence vaccination 14 days after splenectomy. When splenectomy is unexpected, for example due to trauma, commence vaccination 14 days after surgery.

### Functional asplenia immunisation

Individuals with functional asplenia can be vaccinated as soon as the condition is identified. Offer catch-up doses of any additional vaccines as needed, and schedule precalls for administration of other additional vaccines when they fall due.

### Key points

- Immunise on-time
- National Immunisation Schedule vaccines at 6 weeks, 3 months, 5 months, 15 months, 4 years, 11 years, 12 years, 45 years, and 65 years of age.
- Additional Schedule Hib (*Haemophilus influenzae* type b), pneumococcal, meningococcal, influenza, and Tdap vaccines (related to the person’s age).
- It is never too late to catch-up missed most Schedule immunisations.

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### Table 1. Adults aged 18 years or older who are pre-/post-splenectomy or have functional asplenia

**Timing of funded Hib, pneumococcal, meningococcal, influenza, and Tdap vaccines**

<table>
<thead>
<tr>
<th>Age at presentation</th>
<th>Funded vaccine (Trade name)</th>
<th>Recommended vaccine schedule</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults aged 18 years or older</td>
<td>Hib (Act-HIB® or Hiberix®)</td>
<td>» Administer one dose</td>
</tr>
<tr>
<td></td>
<td>PCV13 (Prevenar 13®)</td>
<td>» Administer one dose</td>
</tr>
<tr>
<td></td>
<td>» A minimum of 4 weeks is required between administration of PCV13 and MCV4-D</td>
<td></td>
</tr>
<tr>
<td></td>
<td>23PPV (Pneumovax® 23)</td>
<td>If aged 18 years to under 60 years</td>
</tr>
<tr>
<td></td>
<td>» Administer 23PPV a minimum of 8 weeks after PCV13</td>
<td></td>
</tr>
<tr>
<td></td>
<td>» If 23PPV has been administered before PCV13, wait one year to give PCV13</td>
<td></td>
</tr>
<tr>
<td></td>
<td>MCV4-D (Menactra®)</td>
<td>» Administer two doses MCV4-D 8 weeks apart</td>
</tr>
<tr>
<td></td>
<td>» No MenCCV (NeisVac-C®) is required</td>
<td></td>
</tr>
<tr>
<td></td>
<td>» A minimum of 4 weeks is required between administration of PCV13 and MCV4-D</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Influenza (Influvac®)</td>
<td>» Administer one dose</td>
</tr>
<tr>
<td></td>
<td>» Annually, during the funded Influenza Immunisation Programme</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Tdap (Boostrix®)</td>
<td>If a minimum of 10 years has elapsed since receipt of a previous pertussis containing vaccine</td>
</tr>
<tr>
<td></td>
<td>» Administer one booster dose</td>
<td></td>
</tr>
</tbody>
</table>

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### Table 2. Children aged 12 months to under 18 years who are pre-/post-splenectomy or have functional asplenia

[Refer to page 2]

### Table 3. Infants aged under 12 months who are pre-/post-splenectomy or have functional asplenia

[Refer to page 3]
<table>
<thead>
<tr>
<th>Age at presentation</th>
<th>Funded vaccine (Trade name)</th>
<th>Recommended vaccine schedule</th>
</tr>
</thead>
</table>
| Children aged 12 months to under 18 years | Hib (Act-HIB or Hiberix) | If aged 12–15 months  
» Administer one dose at age 15 months  
If aged 16 months to under 5 years, and  
» They have not received a Hib containing vaccine dose since age 12 months (either Infanrix-hexa, Act-HIB or Hiberix)  
» Administer one dose  
If aged 5 years to under 18 years  
» Administer one dose even if they received one or more Hib containing vaccine doses before age 5 years |
| PCV13 (Prevenar 13) | PCV13 replaces PCV10 (Synflorix) doses on the routine Immunisation Schedule once the high-risk condition has been identified.  
If aged 12–15 months  
» Give PCV13 instead of PCV10 at age 15 months, OR  
» Follow an appropriate catch-up schedule using PCV13 if any PCV doses are overdue  
If aged 16 months to under 5 years  
» Follow an appropriate catch-up schedule using PCV13 if any PCV doses are overdue, OR  
» Any child who has only received PCV7 or PCV10 (Prevenar or Synflorix)  
» Administer one PCV13 dose  
If aged 5 years to under 18 years  
» Administer one dose |
| 23PPV (Pneumovax23) | 23PPV a minimum of 8 weeks after the last PCV13 dose | If aged 12 months to under 2 years  
» Schedule a precall for one 23PPV dose at age 2 years  
» At age 2 years  
» Administer one dose  
» Schedule a precall for the second/final dose in 5 years  
If aged 2 years to under 18 years  
» Administer one dose  
» Schedule a precall for the second/final dose in 5 years |
| MenCCV (NeisVac-C) and/or MCV4-D (Menactra) | MenCCV doses needed  
» A minimum of 4 weeks is required between administration of PCV13 and MCV4-D  
» From age 2 years, if 23PPV has been administered before PCV13, wait one year to give PCV13 |
| Influenza (Influvac) |  
> Annually, during the funded Influenza Immunisation Programme  
> Children aged 6–35 months receive 0.25mL doses  
> Children aged 36 months or older receive 0.5mL doses | If aged 12 months to under 9 years, and  
» This is the first year they are receiving influenza vaccine  
» Administer two age appropriate doses 4 weeks apart, OR  
» They have previously received one or more influenza vaccines doses  
» Administer one dose  
If aged 9 years to under 18 years  
» Administer one dose |
Funded vaccines for individuals pre-/post-splenectomy or with functional asplenia (updated August 2017)

Table 3. Infants aged under 12 months who are pre-/post-splenectomy or have functional asplenia
Timing of funded Hib, pneumococcal, meningococcal, and influenza vaccines

<table>
<thead>
<tr>
<th>Age at presentation</th>
<th>Funded vaccine (Trade name)</th>
<th>Recommended vaccine schedule</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infants aged under 12 months</td>
<td>Hib (Infanrix-hexa and/or Act-HIB or Hiberix)</td>
<td>» Administer Hib (in Infanrix-Hexa) at ages 6 weeks, 3 months, 5 months, OR&lt;br&gt;» Follow an appropriate catch-up schedule if any vaccine doses are overdue&lt;br&gt;» Administer one Hib booster dose at age 15 months</td>
</tr>
<tr>
<td>PCV13 (Prevenar 13) and 23PPV (Pneumovax23)</td>
<td>PCV13 replaces PCV10 (Synflorix) doses on the routine Immunisation Schedule once the high-risk condition has been identified.&lt;br&gt;» Give PCV13 instead of PCV10 at ages 6 weeks, 3 months, 5 months, OR&lt;br&gt;» Follow an appropriate catch-up schedule if any vaccine doses are overdue&lt;br&gt;» Administer one PCV13 booster dose at age 15 months&lt;br&gt;» Schedule a recall for 23PPV at age 2 years&lt;br&gt;<strong>At age 2 years</strong>&lt;br&gt;» Administer one 23PPV dose&lt;br&gt;» Schedule a recall for the second/final 23PPV dose in 5 years</td>
<td></td>
</tr>
<tr>
<td>MenCCV (NeisVac-C) and MCV4-D (Menactra)</td>
<td>If aged 8 weeks to under 6 months&lt;br&gt;» Administer two doses MenCCV 8 weeks apart, and&lt;br&gt;» Schedule a recall for one MenCCV booster dose at age 12 months&lt;br&gt;» Schedule a recall for two MCV4-D doses at age 2 years&lt;br&gt;<strong>If aged 6 months to under 12 months</strong>&lt;br&gt;» Administer one MenCCV dose, and&lt;br&gt;» Schedule a recall for one MenCCV booster dose at age 12 months, at least 8 weeks after previous dose&lt;br&gt;» Schedule a recall for two MCV4-D doses at age 2 years&lt;br&gt;<strong>At age 12 months</strong>&lt;br&gt;» Administer one MenCCV booster dose&lt;br&gt;<strong>At age 2 years</strong>&lt;br&gt;» Administer two MCV4-D doses 8 weeks apart&lt;br&gt;» Schedule a recall for one MCV4-D booster dose after 3 years then every 5 years</td>
<td></td>
</tr>
<tr>
<td>Influenza (Influvac)</td>
<td>Annually, during the funded Influenza Immunisation Programme&lt;br&gt;» Children aged 6–35 months receive 0.25mL doses</td>
<td>From age 6 months&lt;br&gt;» Administer two doses 4 weeks apart in the first year receiving influenza vaccine&lt;br&gt;» In subsequent years, administer one dose</td>
</tr>
</tbody>
</table>

References