Immunisation for adults post-chemotherapy who are not taking immunosuppressive disease modifying drugs

Inactive vaccines, with the exception of influenza vaccine that may be given sooner due to a high risk of infection, are administered from 3 months post-chemotherapy if the individual’s lymphocyte count is >1.0 x 10^9/L. Live vaccines, such as MMR and varicella vaccines, are administered from 6 months post-chemotherapy if the individual’s lymphocyte count is >1.0 x 10^9/L.

For children aged under 18 years, please refer to the National Child Cancer Network Guideline Immunisation of children during and after cancer therapy.

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Additional notes</th>
<th>Recommended schedule</th>
<th>Post-chemotherapy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Haemophilus influenzae type b Hib (Hiberix)</td>
<td></td>
<td>• Administer one dose</td>
<td>FUNDED</td>
</tr>
<tr>
<td>Hepatitis B (Engerix-B)</td>
<td>If individual has a documented primary course of three hepatitis B vaccines prior to cancer diagnosis</td>
<td>• Administer one booster dose</td>
<td>FUNDED Following immunosuppressive therapy longer than 28 days</td>
</tr>
</tbody>
</table>
| Humanpapilloma virus HPV (Gardasil 9) | Recommended for males and females 18–45 years of age inclusively                                                                                  | If incomplete primary course documented  
  • Administer up to three doses at 0, 1, and 5 month intervals                                                                                       | FUNDED up to 27 years of age                                                                                                                                |
|                                      | • Gardasil 9 is prescribed off-label for males aged 27–45 years inclusively.  
  • No safety concerns are expected. Vaccine efficacy is not expected to be significantly different to efficacy in females in the same age group.                 | If aged under 27 years and completed an age-appropriate primary course of HPV vaccine doses before chemotherapy  
  • Administer one booster dose                                                                                                                          | Recommended NOT funded 27 years or older                                                                                                                  |
| Influenza                            | Annually during the funded Influenza Immunisation Programme  
  • If the individual has a current cancer diagnosis, excluding basal and squamous skin cancers if not invasive, or  
  • If the individual has an eligible condition, e.g. aged 65 years or older, chronic heart or respiratory disease, diabetes                           | Wait until 3 months post-chemotherapy unless at high-risk of infection:  
  • If at high risk of infection, e.g. it is influenza season and the persons has not already received one dose of the current influenza vaccine, administer one dose.  
  • Administration of two doses four weeks apart in the first year post-chemotherapy is recommended. However, only the first dose is funded.  
  • In subsequent years only one dose is required annually                                                                                                  | FUNDED One dose                                                                                                                                   |
| Pneumococcal PCV13 (Prevenar 13)     | A minimum of 4 weeks is required between administration of Prevenar 13 and Menactra  
  • If Pneumovax 23 has been administered before Prevenar 13, wait one year to give Prevenar 13                                                                 | • Administer one dose                                                                                                                                     | FUNDED                                                                            |
| Pneumococcal 23PPV (Pneumovax 23)    | Administer Pneumovax 23 a minimum of 8 weeks after Prevenar 13                                                                                      | If aged 18 years to under 60 years  
  • Administer one dose  
  • Schedule a recall for the second dose in 5 years  
  • Schedule a recall for the third/final dose 5 years after second dose or at age 65 years, whichever is later  
  If aged 60 years or older  
  • Administer one dose  
  • Schedule a recall for the second/final dose in 5 years                                                                                         | FUNDED                                                                            |

For complete details, please refer to the National Child Cancer Network Guideline Immunisation of children during and after cancer therapy.
## Immunisation for adults post-chemotherapy who are not taking immunosuppressive disease modifying drugs

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<td><strong>Polio</strong>&lt;br&gt;IPV (Ipol)</td>
<td>• Check immunisation history for a primary course of three polio containing vaccines</td>
<td>If unsure of polio immunisation history prior to chemotherapy&lt;br&gt;• Administer three doses with a minimum of 4 weeks between each dose&lt;br&gt;<strong>If has a confident recollection of completed polio immunisation prior to chemotherapy</strong>&lt;br&gt;• Administer one booster dose</td>
<td><strong>Funded</strong></td>
</tr>
<tr>
<td><strong>SARS-CoV-2</strong>&lt;br&gt;(COVID-19)</td>
<td>• The COVID-19 vaccine being administered determines the number of doses and minimum interval between multiple doses&lt;br&gt;• The vaccination schedule for individuals who are immunosuppressed is the same as the schedule for those who are immunocompetent</td>
<td>• Administer vaccine doses following the recommended schedule for the available COVID-19 vaccine</td>
<td><strong>Funded</strong></td>
</tr>
<tr>
<td><strong>Tetanus/diphtheria/pertussis</strong>&lt;br&gt;Tdap (Boostrix)</td>
<td>• Check immunisation history for a primary course of three tetanus/diphtheria containing vaccines</td>
<td>If unsure of tetanus/diphtheria immunisation history prior to chemotherapy&lt;br&gt;• Administer three doses with a minimum of 4 weeks between each dose&lt;br&gt;<strong>If has a confident recollection of completed tetanus/diphtheria immunisation prior to chemotherapy</strong>&lt;br&gt;• Administer one booster dose</td>
<td><strong>Funded</strong></td>
</tr>
<tr>
<td><strong>Measles, mumps, rubella</strong>&lt;br&gt;MMR (Priorix)</td>
<td>• Individuals born in 1969 or later who do not have two documented doses of MMR vaccine&lt;br&gt;• MMR vaccination is not required post-chemotherapy for adults born prior to 1969</td>
<td><strong>If less than two documented doses</strong>&lt;br&gt;• Complete a documented course of two MMR doses&lt;br&gt;• Administer up to two doses at least 4 weeks apart&lt;sup&gt;a,b,c&lt;/sup&gt;</td>
<td><strong>Funded</strong> for individuals who meet the eligibility criteria&lt;br&gt;<strong>Contraindicated</strong> until 6 months post-chemotherapy and/or lymphocyte count is &gt;1.0 x 10&lt;sup&gt;9&lt;/sup&gt;/L</td>
</tr>
<tr>
<td><strong>Varicella</strong> (chickenpox)&lt;br&gt;VV (Varivax)</td>
<td>• Individuals with no clinical history of varicella infection or vaccination</td>
<td>• Administer two doses at least 4 weeks apart&lt;sup&gt;a,b,c&lt;/sup&gt;</td>
<td></td>
</tr>
<tr>
<td><strong>Herpes zoster</strong>&lt;br&gt;HZV (Zostavax)</td>
<td>• Individuals aged 50 years or older</td>
<td>• Administer one dose&lt;sup&gt;c&lt;/sup&gt;</td>
<td></td>
</tr>
</tbody>
</table>

### Footnotes

a. Individuals who have received immunoglobulin or other blood products may require time for passive antibodies to decrease prior to administration of live MMR and varicella vaccines. Refer to Table A6.1: Suggested intervals between immunoglobulin product administration or blood transfusion and MMR or varicella vaccination (does not apply to rotavirus vaccine) in the current Immunisation Handbook.

b. Two or more live vaccines can be given at the same visit. However, when live vaccines are administered at different visits, a minimum interval of 4 weeks is required.

c. Live vaccines should not be given until 6 months post-chemotherapy and/or lymphocyte count is >1.0 x 10<sup>9</sup>/L.