VACCINATIONS DURING PREGNANCY

KEY WORDS
Vaccination, live, attenuated, vaccines, hepatitis, cholera, influenza, pneumococcal, meningococcal

AIM
To provide information on the administration of vaccines to pregnant women

VACCINATIONS IN PREGNANCY (LIVE ATTENUATED)
The following vaccinations are contraindicated in pregnancy
- BCG (Live attenuated strain)
- Oral typhoid vaccine
- Measles-Mumps-Rubella (MMR)
- Rotavirus (Not registered for use in adults)
- Smallpox
- Varicella
- Yellow fever (unless travelling to yellow fever endemic areas)
- Zoster

VACCINATIONS IN PREGNANCY (INACTIVATED VACCINES)
- Cholera (oral) – not recommended.
- Adult / adolescent formulation dTpa – recommended for pregnant women who work in close contact with children e.g. childcare, neonatal units.
- Hib : *Haemophilus influenzae* type b – recommended for pregnant women at risk of Hib disease e.g. hyposplenia, asplenia.
- MenCCV : Meningococcal C conjugate – recommended for pregnant women at increased risk of meningococcal disease or possible exposure to serogroup C e.g. hyposplenia, asplenia.
- 4vMenPV : Meningococcal polysaccharide – recommended for women at increased risk of meningococcal disease who have not been vaccinated with 4vMenpv in the past 3 years (e.g. hyposplenia, asplenia) or possible exposure to serogroup A, W 135 or Y.
- 7vPCV : 7-valent pneumococcal conjugate vaccine – not recommended.
- 23vPPV : 23-valent pneumococcal polysaccharide – recommended for women at increased risk of invasive pneumococcal disease (IPDE)(e.g. asplenia, impaired immunity, chronic
illness, CSF leak) who have not received 23vPPV in the past 5 years (and provided they have not received 2 previous doses).

- **Q fever vaccine**: not recommended.

- **Typhoid Vi polysaccharide vaccine**: recommended for women travelling to endemic countries where water quality and sanitation is poor.

- **Hepatitis vaccine**: recommended for susceptible pregnant women travelling to areas of moderate to high endemicity or who are at increased risk of exposure through lifestyle factors, or where severe outcomes may be expected e.g. pre-existing liver disease.

- **Hepatitis B**: recommended for susceptible pregnant women. It should only be given to pregnant women who are non-immune and where there is a clear recommendation.

- **HPV**: Human papillomavirus – not recommended.

- **Influenza vaccine**: recommended for all pregnant women who will be in the second or third trimester during the influenza season including those in the first trimester at the time of vaccination.

- **Japanese encephalitis (JE) vaccine**: recommended for pregnant women at risk of acquiring JE.

- **IPV inactivated polio vaccine**: Recommended for pregnant women at risk of poliovirus exposure e.g. travel to endemic countries. It should only be given when clearly indicated.

- **Rabies vaccine**: recommended for pregnant women for whom this vaccine would be otherwise recommended e.g. travellers to rabies endemic countries.

- **Tetanus / diphtheria toxoid**: recommended for pregnant women.

- **Pooled or hyperimmune immunoglobulins**: recommended for susceptible pregnant women exposed to measles, hepatitis A, hepatitis B, rabies or Australian bat lyssavirus. Varicella viruses and tetanus.

**REFERENCE**