InfoMHtal INFORMACIÓN BÁSICA SOBRE EL VIH

VACCINATION RECOMMENDATIONS FOR CHILDREN AND ADOLESCENTS WITH HIV

INGLÉS

Vaccines in children with HIV are well tolerated and offer protection, albeit weaker and shorter-lasting than in the population at large. The CD4 cell count is considered the best predictor of vaccine response. If the child shows signs of immunodeficiency, antiretroviral treatment should be initiated or adapted to restore immunity before vaccination and to improve response. This sheet contains information and guidance that may be useful for parents or carers of children and adolescents with HIV.

VACCINATION RECOMMENDATIONS FOR CHILDREN AND ADOLESCENTS WITH HIV

	Vaccine	Dose	Comments and warnings
	Diphtheria, tetanus and whooping cough • DTaP-IPV • dTaP	3 doses: at 2, 4 and 11 months 4 doses: at 2, 4, 6 and 18 months	 Prenatal (dTaP): One dose of dTaP in each pregnancy from week 27, preferably in week 27 or 28 Routine vaccination at 6 years of age: A combined DTaP/IPV vaccine should be administered to minors. They should be given three doses of the vaccine when they reach the age of 6 years old. Children vaccinated with a total of 4 doses should be given one dose of DTaP
<image/>	Poliomyelitis	3 doses: at 2, 4 and 11 months 4 doses: at 2, 4, 6 and 18 months.	Routine vaccination at 6 years of age: A combined DTaP/IPV vaccine should be administered to minors. They should be given three doses of the vaccine when they reach the age of 6 years old. Children vaccinated with a total of 4 doses should be given one dose of DTaP
<section-header></section-header>	HiB (Haemophilus influenzae type b) • PRP-T • DTaP-HB-IPV- HiB	3 doses: at 2, 4 and 11 months	 Vaccination in childhood: Three doses of DTaP-HB-IPV- Hib should be given. Vaccination for adolescents and young people: For people of up to 18 years old who have not been previously vaccinated, a single dose should be given

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Vaccine	Dose	Comments and warnings	
Hepatitis B (HBV)	3 doses: at 2, 4 and 11 months	Vaccination in childhood: • Three doses should be given if maternal prenatal screening testing has been conducted	
	4 doses: at 0, 2, 4 and 11 months	• Four doses should be given to the children of HBsAg positive mothers. The first dose should be given in the initial 24 hours of life along with Hepatitis B immune globulin	
		 If at 4-8 weeks, the level of antibodies is too low, revaccinating (3 doses in 6 months) with adult vaccine should be considered 	
		Vaccination for adolescents and young people:	
		For people of up to 18 years old who have not been previously vaccinated, 3 doses (at 0, 1 and 6 months) should be given	
Pneumococcus	Immunisation schedule:	Under 2 years old: PCV13 (2, 4, 6 and 11 months) + PPV23 (from	
• PCV13 • PPV23	4 doses: at 0, 2, 4 and 11 months +	24 months). Booster dose of PPV23, 5 years after the previous dose	
fi 1	1 dose: from 24 months + 1 dose (booster): 5 years after the previous dose	Unvaccinated children from 2 to 5 years old: 2 doses of PCV13 (8 weeks apart) + PPV23 (from 8 weeks to 12 months later). Booster dose of PPV23, 5 years after the previous dose	
		Unvaccinated children >5 years of age: 1 dose of PCV13 + PPV23 (12 months and minimum of 8 weeks apart). Booster dose of PPV23, 5 years after the previous dose	
Flu	1 dose: Each year	Inactivated vaccine administered from the age of 6 month	
	2 doses: In children under 9 years old vaccinated for the first time (at least 4 weeks apart)		
Hepatitis A (HAV)	2 doses: in a 6-month period (0 and 6 months)	Administered from 12 months old	
Human papillomavirus (HPV)	3 doses: in a 6-month period (0, 1-2 and 6 months)	Given to children	

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Meningococcus MenACWY: Meningococcal sero- groups A, C, W and Y conjugate vaccine	3 doses: at 2, 4 and 11 months 2 doses: initial dose + booster dose	 In children under 12 months old, vaccine should be given in three doses In children over 12 months old, an initial dose should be given, followed by a booster dose at twelve years old Administering subsequent booster doses should be considered
MMR (measles, mumps, and rubella)	2 doses: at least 4 weeks apart	 Vaccine should be given from 12 months of age Contraindicated if the CD4 count is less than 200 cells/mm³ or the CD4 percentage is under 15% The MMRV vaccine should not be given
Varicella (chicken pox)	2 doses: at least 3 months apart	 Vaccine should be given from 12 months of age Contraindicated if the CD4 count is less than 200 cells/mm³ or the CD4 percentage is under 15% The MMRV vaccine should not be given

Note: The contents of this sheet were drafted in September 2021. The recommendations may therefore not be up to date. The information is not intended to replace advice from a health professional. Health decisions should always be taken after consulting health profes-

Sources: Workgroup for vaccination among the adult population and risk groups of the Committee for Immunization Programme and Registry. Vaccination among risk groups of all ages and in specific situations. Public Health Committee of the Interterritorial Council of the Spanish National Health Service. Ministry of Health, Consumer Affairs and Social Welfare, July 2018.

COVID-19 Vaccination Technical Workgroup of the Committee for Immunisation Programme and Registry. CO-VID-19 vaccination strategy in Spain. Update 9 amended. 2 November 2021.



¡POR FAVOR FOTOCÓPIALO Y HAZLO CIRCULAR!