

ACIP Recommends Prenatal Tdap Vaccine

BY HEIDI SPLETE

FROM THE CENTERS FOR DISEASE CONTROL AND PREVENTION'S ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES

ATLANTA – The Tdap vaccine should be given to pregnant women after 20 weeks' gestation to help prevent pertussis in the mothers and their newborns, the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices voted at its meeting.

The ACIP also voted that in special situations in which a pregnant woman who has not previously received Tdap is in need of a tetanus booster (for wound management or if it's been more than 10 years since the previous Td), health care providers should administer Tdap during the third or late second trimester (after 20 weeks' gestation). However, the language may be revised to allow for earlier vaccination for urgent wound management in women prior to 20 weeks' gestation.

In addition, the ACIP recommended that pregnant women whose tetanus vaccination status is unknown or uncertain should receive three vaccinations containing tetanus and reduced diphtheria toxoids during pregnancy. The recommended dosing schedule is 0, 4 weeks, and 6-12 months. Tdap should replace one dose of Td, preferably during the late second or third trimester.

As part of the same vote, the ACIP also voted to recommend "cocooning" (Tdap vaccination of adolescent and adult contacts of infants younger than 12 months) despite the lack of evidence for its effectiveness.

"The working group would never not recommend cocooning, but it is an insufficient national strategy to prevent pertussis morbidity and mortality for newborn infants," noted Dr. Jennifer Liang of the CDC, who presented data on behalf of the ACIP pertussis vaccine working group. Cocooning has been recommended since 2005, but available data show poor uptake and no evidence that cocooning programs are sustainable.

The ACIP voted in favor of prenatal Tdap vaccination as preferable to postpartum vaccination when possible. "Postpartum vaccination is a suboptimal national strategy to prevent infant pertussis morbidity and mortality," said Dr. Liang. "Vaccinating pregnant women during the late second or early third trimester is acceptably safe for both mother and fetus."

Moving Tdap vaccination to the third trimester of pregnancy is the most cost-effective of several options to protect pregnant women and newborns against pertussis, said Garrett R. Beeler Asay, Ph.D., also of the CDC. Using a simulated birth cohort model of approximately 4 million infants, the cost per quality-of-life-year saved was \$414,442 for vaccination during pregnancy, compared to \$1,174,143 for postpartum vaccination.

The ACIP also voted to include the recommendations in the Vaccines for Children program, to state that adolescents who are pregnant would receive Tdap in the same manner as adult pregnant women.

Neither Dr. Liang nor Dr. Beeler Asay had any relevant financial disclosures. ■

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