

13-valent pneumococcal conjugate vaccine no longer routinely recommended for adults 65 and older

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previously received PCV13, administration of PCV13 was recommended based on shared clinical decision making. Some adults aged ≥65 years are potentially at an [increased risk](#) for exposure to PCV13 serotypes, including those residing in nursing homes or other long-term care facilities and those residing in settings with low pediatric PCV13 uptake or traveling to settings with no pediatric PCV13 program. All adults aged ≥65 years should still receive one PPSV23 dose. If PCV13 is administered, it should be given at least one year prior to PPSV23.

"ACIP will continue to review [relevant data](#) as they become available and update pneumococcal vaccination policy as appropriate," the authors write.

More information: [Abstract/Full Text](#)

The 13-valent pneumococcal conjugate vaccine (PCV13) is no longer recommended for routine use among adults aged ≥65 years, according to research published in the Nov. 22 issue of the U.S. Centers for Disease Control and Prevention *Morbidity and Mortality Weekly Report*.

Almea Matanock, M.D., from the CDC in Atlanta, and colleagues reviewed evidence accrued during the preceding three years relating to the recommended routine use of PCV13 in series with the 23-valent pneumococcal polysaccharide vaccine (PPSV23) for all [adults](#) aged ≥65 years.

The researchers found that the Advisory Committee on Immunization Practices (ACIP) voted to remove the recommendation for routine PCV13 use among adults aged ≥65 years. For adults aged ≥65 years who do not have an immunocompromising condition, cerebrospinal fluid leak, or cochlear implant, and who had not

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