

## Vaccinations and Transplantation – Information for Transplant Recipients

### Why are vaccinations important?

After your transplant, you will be on medications that suppress your immune system. You are at a higher risk for infections and will benefit from immunization.

Patients are encouraged to get the necessary vaccinations while waiting for transplant. This is important as not all vaccinations are safe to be given after transplant. For general vaccine information please visit [Health Canada Vaccine Recommendations](#) and [Service Ontario](#).

### Tips about vaccinations

- ✓ Some vaccines are not required after transplant if you have been vaccinated before your transplant. When sorting out which vaccinations are needed, it is helpful to know which ones you've had – Bring your vaccination records with you to Clinic.
- ✓ If you have had your spleen removed, check with your doctor about your vaccinations.
- ✓ The flu shot is recommended for transplant patients. If you receive your transplant during flu season, wait 1 month after your transplant before having the flu shot.
- ✓ Wait 3-6 months after your transplant for all other vaccinations.
- ✓ All vaccines are covered by OHIP with the exception of SHINGRIX (unless you are between 65 – 70 and have not received Zostavax) and HPV. These may be covered by some private insurance plans.
- ✓ Transplant patients should **NOT** receive live vaccines.
- ✓ COVID-19 vaccines are indicated in a three dose vaccine series. Those are preferably given before your transplant. If you are unable to get it before, then you should get it after your transplant. Check with your transplant team beforehand. Refer to [Service Ontario](#) for more information on Covid-19.

### Which vaccinations should I take and when?

Infection	Recommended Vaccine	Cautions
<b>COVID-19</b>	Either Pfizer-BioNTech or Moderna is acceptable. If you have never received ANY Covid vaccines, then <b>3 doses</b> are considered a primary series. You should receive booster doses as they become available. Timing of doses should follow Ontario guidelines. (Note that the first 2 Pfizer mRNA vaccine doses should be three (3) weeks apart and the first two Moderna mRNA doses should be four (4) weeks apart.) For patients unable to receive an mRNA vaccine, the Novavax Nuvaxovid vaccine may be an option.	It is preferred that you not receive any other vaccines other than the influenza vaccine 2 weeks before or 2 weeks after each dose. Your transplant team may recommend you have other vaccines during this time if it is needed (e.g. travelling to a country where other vaccines are necessary). If you have had a recent COVID infection, it would be reasonable to postpone your booster for up to three (3) months.
<b>Influenza (the flu)</b>	<b>Get the flu shot!</b> High dose (one-time dose) OR Regular dose (need 2 doses, 1 month apart)	Do <b>NOT</b> use live inhaled flu vaccine.



Infection	Recommended Vaccine	Cautions
<b>Pneumonia</b>	<p>There are <u>two</u> pneumococcal vaccines recommended – you should receive <u>both</u>.</p> <ol style="list-style-type: none"> <li><b>1. <u>Prevnar® 13</u> or <u>Prevnar®20</u></b>(conjugate vaccine) <i>Prevnar®20 is the preferred vaccine, though it is not covered by OHIP.</i></li> <li><b>2. <u>pneumovax® 23</u></b> – (pneumococcal polysacarie vaccine) -for those with no private insurance</li> </ol> <p><i>These 2 vaccinations are publicly funded for transplant recipients.</i></p> <p><b>Prevnar®13</b> should be given first, followed, eight (8) weeks later by <b>pneumovax®23</b>.</p> <p><i>If able to purchase or have private insurance coverage, PCV 20 (conjugate vaccine) could be given once. There would be no need for pneumovax®23 afterwards.</i></p>	<p>This vaccine is not required again if you were vaccinated before transplant.</p>
<b>Shingles</b>	<p><b>SHINGRIX</b> – 2 doses, 2 months apart</p> <p>Health Canada recommends waiting a year after a shingles infection before getting the first dose of Shingrix.</p> <p>Do <b>NOT</b> use Zostavax – this is a live vaccine.</p>	<p>This vaccine is not required again if you were vaccinated before transplant. SHINGRIX is only covered by OHIP for people between the age 65-70 and if you have not received Zostavax. It may be covered by some private insurance plans.</p>
<b>Tetanus, Diphtheria, Pertussis</b>	<p><b>Tdap Vaccine</b> – required every 10 years</p> <p>There are 2 different Tdap vaccines – either is okay based on your age.</p> <p>Boostrix for people age 10 years and older</p> <p>Adacel for people age 10-64</p>	
<b>Meningitis</b> (given to those who have had a splenectomy or planned use of Eculizumab)	<p>There are different types of meningitis and therefore different vaccines.</p> <p>We recommend getting <b>Menactra</b> which covers the most common types of meningococcal groups (A,C,Y,W).</p> <p><b>Bexsero®</b> covers meningococcal group B.</p> <p>Men-C (<b>Menjugate</b>) vaccine only covers group C</p>	<p>It is important to know which type of vaccine you have had – please check with your family doctor.</p>
<b>Haemophilus influenza B</b>	<p><b>Haemophilus influenzae B vaccine</b> (Hib vaccine) suggested to be given after transplant</p>	
<b>Respiratory Syncytial Virus (RSV)</b>	<p><b>Arexvy©</b> - the only vaccine available in Ontario at this time. This is a <b>two (2) dose</b> vaccine.</p>	<p>It is recommended that the RSV vaccine be administered at least 2 weeks before or after any other</p>



	<p>If you are over 60 years old and have received an organ transplant you are eligible under the High-risk Older adult RSV Vaccine Program to receive this vaccine through your Public Health Unit free of charge. (If you have private insurance it may be covered.)</p>	<p>vaccine. Side effects after the RSV vaccine can include pain, redness, and swelling where the shot is given, fatigue (feeling tired), fever, headache, nausea, diarrhea, and muscle or joint pain.</p>
<b>Hepatitis B</b>	<p><b>Hepatitis B vaccine</b> Being vaccinated to Hepatitis B does not mean that you are immune – it may take several boosters. After transplant it may be more difficult to achieve immunity. Your Transplant Team will have checked your immunity level using a blood test. If you are not immune, it is recommended that you get a booster or complete the 3-dose series. Immunity needs to be retested after vaccination. It is preferable to receive it before transplant. Not publicly funded after transplant.</p>	
<b>Hepatitis A</b>	<p>If you are planning to travel to a country where Hepatitis A is common, you should be vaccinated. This needs to be done well in advance of your travel. Check with the Transplant Team at least 2 months prior to departure. You will need 2 doses of the vaccine. The last dose needs to be at least 2 weeks before departure.</p>	
<b>Human papillomavirus (HPV)</b>	<p><b>4-Valent HPV vaccine (4vHPV)</b> is recommended for anyone less than 45 years old. All students in grade 7 in Ontario can get the HPV vaccine for free in their school. Public health units plan and organize immunization clinics at schools throughout the year. In most cases parents or guardians must sign a consent form before a student will be vaccinated. The form also includes information about the vaccine. The vaccine is usually given in two injections, at least six months apart. Some people – for example older students and people with weakened immune systems – may get three injections over six months. You need all doses to get full protection.</p>	<p>For everyone else, 4vHPV is not covered by OHIP but may be covered by some private insurance plans.</p>
<b>Measles</b>	<p><b>Do NOT vaccinate for measles after transplant – MMR vaccine is live vaccine.</b> Protection against measles is usually checked before transplant and MMR vaccine maybe given then if your transplant doctor approves.</p>	

