Questions on Immunization and Vaccination and Short Answers

Bağışıklama ve Aşı ile İlgili Sorular ve Kısa Cevaplar

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Question 1: An 11-month and 10-day-old baby who had contact with a measles case and had not previously been immunized against measles received the MMR vaccine.

Question 1A: Does this MMR dose substitute the routine dose that should be given at the age of one?

No, it won’t. Because the MMR vaccine is valid from the age of 12 months. Therefore, the MMR vaccine administered to this child for contact prophylaxis does not replace the routine vaccination dose since it was administered before age one. This vaccine may be considered valid if administered ≤4 days before the baby’s first birthday. Because only the vaccine doses administered ≤4 days before the minimum age or interval are considered valid.

Question 1B: Since this dose does not replace the routine one-year MMR vaccine dose; when this child reaches the age of one, can the MMR vaccine in the routine schedule be administered?

No, it cannot. Because at least four weeks must have passed between the two doses for the dose to be considered valid, and the baby must be at least one year old. The valid (routine) MMR vaccine dose for this baby can only be given four weeks after the post-exposure vaccine dose given before the 12th month, i.e. at about 12 months and eight days of age.

Question 1C: Can the routine varicella vaccine be administered to the same infant when he is 12 months old?

No, it cannot. Because two live vaccines given by injection should be given on the same day or separated by at least four weeks. For this reason, the varicella vaccine can be administered at 12 months and eight days of age at the earliest.

Question 1D: When can I give this infant the one-year PCV?

Because PCV is not a live vaccine, it can be given when the baby receives the age of one, with no gap between MMR and varicella vaccines.

Question 2: Because the baby was scheduled to travel, the first dose of the pentavalent vaccine was given at six weeks and the second at 10 weeks. The third dose was given at the age of 13 weeks and two days. Is this baby’s vaccination valid?

Answer 2: The pentavalent vaccine can be administered as early as six weeks of age for the first dose, 10 weeks for the second dose, and 14 weeks for the third dose.

In exceptional cases, the vaccine is still considered valid if, for any reason, it was administered no more than four days (i.e., no more than one to four days) prior to the shortest re-
commended interval or the youngest age specified for that vaccine.

In other words, a dose administered ≥5 days before the recommended schedule should not count as a valid dose.

**Pentavalent**

This only applies in exceptional cases, such as when it is discovered that the vaccination was administered sooner than scheduled.

The recommended intervals in the regular vaccination schedule must be followed. This exception should not be used to schedule future vaccine doses. This exception also does not apply when two different live parenteral vaccinations are administered. The intervals between rabies vaccine doses cannot be reduced in any way. Therefore, this exception does not apply to the rabies vaccine.

**Question 3:** What should the varicella vaccination be like in a 12-month-old baby who had chickenpox when he was eight months old?

**Answer 3:** Individuals with a documented history of chickenpox after the age of one do not need to be vaccinated. However, there is no harm in vaccination.

A history of chickenpox before the age of one may not provide adequate immunity to the disease. For this reason, children who had chickenpox before age one should receive a routine dose of the varicella vaccine at 12 months. However, at least four weeks should have passed since the healing of all lesions before routine varicella and MMR vaccination.