

June 20, 2018

NACI Recommendation on Herpes Zoster Vaccines

The National Advisory Committee on Immunization (NACI) just released the *Updated Recommendations on the Use of Herpes Zoster Vaccines*. The NACI statement will be available online shortly.

Herpes Zoster Vaccines

- live attenuated vaccine (LZV), Zostavax[®]II [*in use since 2008*]
- recombinant subunit vaccine (RZV), Shingrix[®] [*authorized in October 2017*]

Both vaccines have been shown to be safe, immunogenic, and reduce the incidence of herpes zoster and post-herpetic neuralgia. LZV efficacy decreases with age and over time. RZV efficacy remains higher and appears to decline more slowly in all age groups.

In Ontario, only LZV (Zostavax[®]II) is publicly funded for adults 65 to 70 years of age.

NACI recommends:

- a) RZV (Shingrix[®]) should be offered to persons >50 years of age without contraindications including:
 - Individuals previously vaccinated with LZV. Re-vaccinate with two doses of RZV at least one year after receiving LZV.
 - Individuals with a previous episode of herpes zoster disease. Provide two doses of RZV at least one year after herpes zoster episode.
 - Immunocompromised individuals, may be considered on a case-by-case assessment of the benefits vs risks.
- b) LZV (Zostavax[®]II) may be considered for immunocompetent individuals >50 years of age without contraindications when RZV is contraindicated, unavailable or inaccessible.

Concomitant Administration

In general, live and inactivated vaccines may be administered at the same time as other parental vaccines. Herpes zoster vaccines may be given at the same time as unadjuvanted seasonal influenza vaccine.