Health Facts for You



Vaccines After Bone Marrow Transplant

After your transplant, you will no longer have the immunity from your childhood vaccines. Vaccines lower your chance of getting certain diseases (like cancers, or other health conditions) or there complications. Vaccines work with your body's natural defense system to help you safely gain immunity to disease. For instance:

- Hepatitis B vaccine lowers your risk of liver cancer.
- HPV vaccine lowers your risk of cervical cancer, head and neck cancers.
- Flu vaccine lowers your risk of flurelated heart attacks or other problems.

Vaccines are vital for people who have a weakened immune system, such as after bone marrow transplant(BMT).

Vaccination Schedule

You will need to follow a vaccination schedule for getting revaccinated. You will start your vaccines about 6 months after transplant and complete them about 2 years after transplant. Get the vaccines during the time frame listed on your schedule. All BMT patients should follow this schedule to receive their vaccines.

Vaccines

The BMT staff can provide the full vaccination schedule and details to your local health care team.

- **Flu (influenza):** You will need a yearly flu shot as the flu can be deadly for transplant patients. Avoid live flu vaccines.
- **Shingles:** Talk to your BMT team about your safe vaccine options. Avoid the live shingles vaccine.

Live Virus Vaccines

Talk to your BMT team **before** getting any live vaccines, as they may be harmful.

- Mumps/Measles/Rubella (MMR) vaccine: Patients with chronic GVHD or patients on medicines to suppress the immune system should **not** get this vaccine. It may be safe for other patients. Please talk with the BMT team for details.
- Chickenpox vaccine: The BMT team does not suggest this vaccine, though it may be safe for some patients. Please talk with the BMT team for details.
- Avoid other live virus vaccines like flu mist (live flu vaccine), live shingles vaccine, Sabin oral polio vaccine (OPV), BCG, yellow fever and smallpox as they carry risk for BMT patients.

Insurance Coverage for Vaccines After Transplant

Medicare patients: Medicare does not cover vaccines as a part of preventative care (except for yearly flu shots). This means that any vaccines given in-clinic will not be covered by Medicare. If Medicare is your primary insurer, you should get your vaccines at a retail pharmacy so they are cheaper. The vaccine will be processed through your pharmacy benefit (if you have a supplemental insurance plan). You may still have a co-pay for each vaccine.

Non-medicare patients: Most other insurers view vaccines as preventative. These patients can receive the vaccine in clinic.

Vaccines for Family Members

Members of your household should also be up-to-date on their vaccines, such as the flu vaccine. They should get the flu vaccine yearly to help prevent them from spreading the flu.

Vaccines Family Members Should Avoid

- Live polio vaccine: If someone in your household gets the live polio vaccine, avoid close contact for about 2 months. They must practice good personal hygiene to avoid exposing you.
- Within the first year after your transplant, members of your household should not receive the live vaccine.
- Varicella: If a household member receives the varicella vaccine and then gets lesions, you need to avoid them while the lesions are still present.

To find out more about vaccines and vaccine safety, go to the Center for Disease Control's website at www.cdc.gov/vaccines.

This is only a summary of the vaccines you need. Have your provider ask for the complete UW Health post-transplant vaccine schedule.

Who to Call

Please call UW Cancer Clinics with questions.

UW Cancer Clinics **608-265-1700**

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 2/2021 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing HF#8186.

Table 1- Vaccines for Adults After Transplant								
Time After Transplant	6 months	9 months	12 months	2-4 weeks later	14 months	2-4 weeks later	24 months	2-4 weeks later
Diphtheria Tetanus and Pertussis toxoid (DTaP)			X		X		X	
Inactivated poliovirus (IPV)				X		X	X	
Pneumococcal conjugate**	PCV- 13	PCV- 13	PCV-13		PCV-13 OR PPSV- 23			
Haemophilus influenzae (HIB)				X		X		X
Hepatitis B				X		X		X
Influenza	X	Then yearly						
MMR (measles, mumps, rubella)								X
Human papillomavirus vaccine (HPV) (Only for those under 45 years old)	X	X	X					
Meningococcal conjugate		6 1	X	1 6.1	X			

^{**} PCV-13 should be given for the first three doses of the pneumococcal vaccination series. For patients without GVHD, the fourth dose should be PPSV-23. For patients with GVHD, the fourth dose should be PCV-13.

Pneumococcus booster for patients 65 years of age or older: repeat dose of PPSV-23 5 years after last dose, or 6-12 months after 4th PCV-13 (those with active GVHD) and then 5 years later.