

# Varivax®

Vaccine	Dose	Recommended Age	Schedule	Minimum Intervals
Varivax® (Merck)	0.5 mL SC	12 mos – 12 yrs	1 <sup>st</sup> dose: 12-15 months 2 <sup>nd</sup> dose: 4-6 years	Dose 1 to dose 2: at least 3 months
		13 yrs and older	1 <sup>st</sup> dose: 13 years 2 <sup>nd</sup> dose: 4 - 8 weeks later	Dose 1 to dose 2: 4 – 8 weeks



## Varivax® Vaccine Recommendations:

- Vaccination of children at age 12-15 months and administer a second dose at age 4-6 years (may be administered earlier provided >3 months have elapsed after the 1<sup>st</sup> dose).
- All adolescents and adults, 13 years and older without evidence of immunity should receive 2 doses (4-8 weeks apart).
- Unvaccinated persons in the following groups should be vaccinated:
  - Persons who have close contact with persons at high risk for serious complications (e.g. health-care personnel, and household contacts of Immunocompromised persons);
  - Persons who live or work in environments in which transmission of varicella zoster virus is likely (e.g. teachers, child-care workers, and residents and staff in institutional settings);
  - Persons who live and work in environments in which transmission has been reported (e.g. college students, inmates and staff members of correctional institutions, military personnel);
  - Non-pregnant women of childbearing age (should not get pregnant for 1 month after vaccination);
  - Adolescents and adults living in households with children;
  - International travelers.
- Upon completion or termination of pregnancy, women who do not have evidence of varicella immunity should be vaccinated.
- Vaccination should be considered for HIV-infected children with age-specific CD4+ T-lymphocyte percentage >15% and may be considered for adolescents and adults with CD4+ T-lymphocyte count >200 cells/μL.

## Vaccine Reconstitution

- Withdraw entire contents of the diluent
- Inject all diluent into the vial of lyophilized (powder) vaccine
- Gently agitate to mix thoroughly
- Withdraw the entire contents and inject the total volume of reconstituted vaccine subcutaneously (SC)
- Discard reconstituted vaccine if not used within 30 minutes
- Only use the diluent supplied with the vaccine.

## Contraindications

- History of anaphylaxis to a prior dose of vaccine or vaccine component, including gelatin and neomycin.
- Immunosuppression due to leukemia, lymphoma, generalized malignancy.
- Immune deficiency diseases (including HIV and AIDS) or immunosuppressive therapy.

## Post-exposure Immunization:

Varicella vaccine administered to susceptible persons within three days and possibly up to five days after varicella exposure may prevent or significantly modify disease.

## Post-exposure Prophylaxis:

VariZIG is the only varicella zoster immune globulin preparation available in the United States for post-exposure prophylaxis of varicella in persons at high risk for severe disease who lack evidence of immunity to varicella and are ineligible for varicella vaccine.

VariZIG should be administered as soon as possible after exposure but a patient may receive VariZIG up to 10 days after exposure. Limited data has shown that the incidence of varicella is comparable among persons who receive varicella zoster immune globulin within 4 days of exposure and those who receive it up to 10 days after exposure. Also, the severity of the disease might be lessened with administration of varicella zoster immune globulin up to 10 days after exposure.

The ACIP recommends the use of VariZIG for patients without evidence of immunity to varicella (i.e. without a health-care provider diagnosis or verification of a history of varicella or herpes zoster, documentation of vaccination, or laboratory evidence of immunity or confirmation of disease) who are at high risk for severe disease and complications, who have been exposed to varicella or herpes zoster, and are ineligible for varicella vaccine.

ACIP recommends the following patients to receive VariZIG:

- Immunocompromised patients
- Neonates whose mothers have signs and symptoms of varicella around the time of delivery (i.e. 5 days before to 2 days after)
- Premature infants born at  $\geq 28$  weeks of gestation who are exposed during the neonatal period and whose mothers do not have evidence of immunity
- Premature infants born at  $< 28$  weeks of gestation or who weigh  $\leq 1,000$  g at birth and were exposed during the neonatal period, regardless of their mother's evidence of immunity status
- Pregnant women

### Adverse Reactions

- Injection site pain, soreness, erythema and swelling.
- Injection site varicella-like rash (a median of two lesions) generally occurring within 2 weeks following the 2<sup>nd</sup> dose.
- Generalized varicella-like rash (average of 5 lesions) occurring within 3 weeks. If a vaccinated person develops a rash, close contact with persons who do not have evidence of varicella immunity and who are at high risk of complications of varicella should be avoided until rash has resolved.
- Fever within 42 days of vaccination.
- Zoster caused by the vaccine (mild and has not been associated with complications.)

### Vaccine Storage and Handling

- Store Varivax<sup>®</sup> in the freezer between 5°F and -58°F (aim for 0°F).
- Do not allow vaccine storage temperatures to go above 5°F or below -58°F.
- Do not store diluent in the freezer.

