**Posted Questions/Answers from DTaP/Tdap Pink Book Webinar, July 25, 2018**

Question 1: If a child’s series consists of four doses of DTaP, and the final dose is a dose of Quadracel given after the fourth birthday, does the fourth and final dose count?

Answer 1: Yes. While we don’t recommend prospectively that you administer Quadracel as a fourth dose of DTaP unless an opportunity to vaccinate will be missed, if the dose has already been given, it can count as the final dose.

Question 2: If a fifth dose of DTaP is given before the fourth birthday, I know that it is invalid. What is the interval to the next dose?

Answer 2: Presuming the first four doses were valid doses (that is, only the fifth dose was invalid), the next dose should be given at 4-6 years of age at least 6 months after the invalid dose.

Question 3: Please explain the difference in dosage of tetanus toxoid: it was 10 Lf/dose in earlier vaccines like Infanrix, Pediarix, and Kinrix, yet it is only 5 Lf in Boostrix.

Answer 3: The quantity of tetanus toxoid in Boostrix is equivalent to the quantity in Td vaccine (5 Lf). This was also the comparator vaccine used by FDA to license Boostrix as a substitute for Td, and manufacturer demonstrated non-inferiority of Tdap to Td.

<https://www.fda.gov/downloads/BiologicsBloodVaccines/UCM152842.pdf>

Question 4: If someone is older than 64 years old, and a provider only stocks Adacel, may they administer this vaccine?

Answer 4: Yes. This is an off-label recommendations, but modeling studies suggest comparable protection of Adacel for adults 65 years old and older, even though the vaccine is not approved for this age group.

Question 5: Is there any current recommendation for Tdap vaccination for daycare/childcare workers?

Answer 5: Tdap is recommended for all adults without contraindications, so this includes daycare/childcare workers, if they do not have a contraindication.

Question 6: Can a health care provider receive a dose of Tdap even if they received a dose of Td in the past few months?

Answer 6: If a health care provider recently received an adult booster dose of Td, there is no interval recommendation between that dose of Td and a dose of Tdap. Tdap should be administered ASAP, to provide pertussis protection.

Question 7: Can Adacel or Boostrix be administered to a pregnant patient?

Answer 7: Yes, pregnancy is neither a contraindication nor a precaution to Tdap vaccine (Boostrix and Adacel). So either vaccine can be used to fulfill this ACIP recommendation.

Question 8: Can you address Tdap/Td vaccine for wound prophylaxis?

Answer 8: Either Tdap or Td can be used to prevent tetanus infection following a wound. In someone 11 years or older who sustains a wound, who has never received Tdap, then Tdap would be the preferred vaccine. In someone 7 through 10 years, or someone who has received a previous dose of vaccine, Td is the preferred vaccine. If either one of these vaccines (Td or Tdap) is not available, the other vaccine may be administered for this indication.

<https://www.cdc.gov/mmwr/volumes/67/rr/pdfs/rr6702a1-H.pdf>

Question 9: Given the waning of pertussis in the acellular formulation, why is it not recommended for every dose in the adult population?

Answer 9: Protection from the repeat dose of Tdap wanes even faster than the original Tdap dose, so the effective burden of disease prevented by Tdap is not large enough to warrant repeat dosing of Tdap. For more information see pp. 24-5 at <https://www.cdc.gov/mmwr/volumes/67/rr/pdfs/rr6702a1-H.pdf>

Question 10: Can a provider administer Pentacel if the Hib component is not needed?

Answer 10: Yes, as long as Hib is not contraindicated in the patient. Providers should try not to give extra doses of vaccine; however, this can be difficult because different combination vaccines contain different suites of components.

Question 11: An adult received Tdap at age 50 years but there is no record of infant/toddler DTP/DTaP vaccination, or any adolescent or adult Td doses. How should we proceed?

Answer 11: The tetanus primary series needs to be completed. A dose of Td should be administered if it has been 4 weeks or more since the dose of Tdap. Another dose of Td should be administered 6 months later, and then Td every ten years.

Question 12: A patient had a knee replacement 10 months ago and after receiving Tdap he came back into the clinic complaining of extreme joint pain that made it difficult to walk. Is this possible?

Answer 12: You will have to use your clinical discretion as to the most likely cause of these symptoms. Lower extremity joint pain is not a known adverse reaction to a tetanus-toxoid vaccine.

Question 13: What causes the pain associated with Tdap or DTaP injection?

Answer 13: The list of excipients in tetanus-toxoid vaccines is long (e.g. polysorbate 80, Mueller-Miller casamino acid medium, modified Stainer-Scholte liquid medium). It is most likely that local reactions are caused by one of these components, since there are so many additives in addition to the vaccine antigen. Fortunately, the vast major of local reactions like pain resolve over two-three days with no treatment necessary.

Question 14: Would you please comment on the reasoning for the April 2018 change in the minimum age of validity of the adolescent Tdap booster recommendation, from 10 to 11-12 years?

Answer 14: Before April 2018, if a dose of Tdap was administered to someone 7-10 years of age, it was the discretion of the provider to administer another dose of Tdap at age 11-12 years of age. This ambiguity was troubling for providers, especially since there was never a safety concern with administering an additional dose. So in April 2018 we took away the ambiguity and stated that if a dose of Tdap was administered to someone 7-10 years of age (either because of catching up on pertussis protection, or a dose given in error) then the routine 11-12 year old dose of Tdap SHOULD be administered. However if a 10 year old is up to date with DTaP and/or the Tdap series, he/she can receive a dose at 10 years of age to count as the 11-12 year old dose (provided state or local laws permit this age variation).

Question 15: If someone has sustained a wound, would a previous dose of Tdap provide post-exposure tetanus protection?

Answer 15: Yes, exactly in the same way that a dose of DTaP or Td provides this protection. We recommend a repeat dose after five years if a dirty wound, and if a clean wound, we recommend the traditional ten year cycle of booster doses of Td.

Question 16: If an adult has a documented dose of Tdap, and they require tetanus protections, and all the clinic carries is Tdap, may it be administered?

Answer 16: Yes, but this is an off-label use of Tdap. Your clinic should make an effort to carry both Td and Tdap.