PNEUMOVAX 23 is a vaccine indicated for active immunization for the prevention of pneumococcal disease caused by the 23 serotypes contained in the vaccine (1, 2, 3, 4, 5, 6B, 7F, 8, 9N, 9V, 10A, 11A, 12F, 14, 15B, 17F, 18C, 19F, 19A, 20, 22F, 23F, and 33F).

PNEUMOVAX 23 is approved for use in persons 50 years of age or older and persons aged ≥2 years who are at increased risk for pneumococcal disease.

PNEUMOVAX 23 will not prevent disease caused by capsular types of pneumococcus other than those contained in the vaccine.

Select Safety Information:
Do not administer PNEUMOVAX 23 to individuals with a history of a hypersensitivity reaction to any component of the vaccine.
Defer vaccination with PNEUMOVAX 23 in persons with moderate or severe acute illness.
Use caution and appropriate care in administering PNEUMOVAX 23 to individuals with severely compromised cardiovascular and/or pulmonary function in whom a systemic reaction would pose a significant risk.

Since elderly individuals may not tolerate medical interventions as well as younger individuals, a higher frequency and/or a greater severity of reactions in some older individuals cannot be ruled out.

Persons who are immunocompromised, including persons receiving immunosuppressive therapy, may have a diminished immune response to PNEUMOVAX 23.

The most common adverse reactions, reported in >10% of subjects vaccinated with PNEUMOVAX 23 in clinical trials, were: injection-site pain/soreness/tenderness, injection-site swelling/ induration, headache, injection-site erythema, asthenia and fatigue, and myalgia.

For subjects aged 65 years or older in a clinical study, systemic adverse reactions which were determined by the investigator to be vaccine-related were higher following revaccination with PNEUMOVAX 23 than following initial vaccination with PNEUMOVAX 23.

Important considerations:
- There are limited data on the sequential administration of PNEUMOVAX 23 with other vaccines, including PCV13.
- An immunogenicity study described in the Prescribing Information for PCV13 evaluated the sequential administration with PNEUMOVAX 23 in adults aged 60–64 years:
  - Diminished immune response with one dose of PNEUMOVAX 23 followed by a dose of PCV13 one year later vs PCV13 alone
  - Noninferior immune response with one dose of PCV13 followed by a dose of PNEUMOVAX 23 one year later vs PNEUMOVAX 23 alone
- The levels of antibodies that correlate with protection against pneumococcal disease have not been clearly defined.
- Routine revaccination of immunocompetent persons previously vaccinated with a 23-valent vaccine is not recommended.
- For subjects aged ≥65 years in a clinical study, systemic adverse reactions which were determined by the investigator to be vaccine-related were higher following revaccination with PNEUMOVAX 23 than following initial vaccination with PNEUMOVAX 23.
- The CDC-recommended sequential administration and intervals for immunocompetent adults aged ≥65 years:

According to the CDC—Sequential vaccination with both PCV13 and PNEUMOVAX 23 is recommended.