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An HIV Information Site & HIV Educational Resource Site (HIS & HERS)

Vaccinations Recommended for Persons with HIV Infection

or, Preventative Injections That Persons with HIV Should Consider

Vaccination	Disease That Is Prevented	Possible Side Effects of Vaccination	Best Timing
Influenza vaccine	**Influenza A & B** circulate through the U. S. each Fall through Spring. The disease can be very severe and even life-threatening in persons who are already ill. The vaccine is based on strains of flu that circulate in Asia in the months preceding our influenza season in the U.S. Its not always completely protective, but it usually lessens the severity of the infection at least. Family members of persons with HIV should also consider this vaccine. Influenza consists of high fever, shaking chills, hard coughing, extreme weakness, and sometimes shortness of breath. You can distinguish a cold or other type of "flu" by the lack of nasal congestion	Soreness at site of injection Transient fever, chills, fatigue which rarely last over 12 hours	Once a year in October or November but it can be administered anytime after that into the spring as long as there are influenza cases occurring. If you are going to travel south of the equator in the Spring or Summer, the influenza vaccine would apply to you again.

	and sinus symptoms that are so characteristic of them.		
Pneumococcal vaccine	**Pneumococcal pneumonia** is the most common form of bacterial pneumonia for persons with and without HIV. In someone with HIV, the disease can be more severe and it can be deadly. Smoking, alcoholism, addiction, and lower T-cell counts make the disease more likely and more dangerous. Pneumonia consists of high fever, shaking chills, cough which brings up a lot of nasty (bloody, green, yellow, thick) material from the chest, chest pain, and usually shortness of breath or air hunger. The bacteria can enter the bloodstream and cause shock. The vaccine is effective at reducing the chance of bloodstream infection.	Soreness at site of injection	Once every 5 years. If your T-cells are low at first, you might want to get another shot when your T-cells have gotten better.

Hepatitis A vaccine	**Hepatitis A** is an inflammatory disease of the liver that is transmitted via contaminated food or by fecal-oral contact. If someone already has liver problems, hepatitis A can cause major problems and rarely it might be fatal. Hepatitis consists of loss of appetite, nausea and vomiting, turning yellow in the eyes and skin (jaundice), and light-colored stools.	Soreness at site of injection	An injection is given and then repeated at 6-12 months. This vaccine is combined with the hepatitis B vaccine in a preparation called Twinrix.
Hepatitis B vaccine	**Hepatitis B** is an inflammatory disease of the liver that is transmitted via contaminated food or by fecal-oral contact. Acute hepatitis B may be severe or even life-threatening especially in persons with underlying liver disease. In approximately 1/3 of persons who get hepatitis B, the disease can become chronic and lead to cirrhosis, liver cancer, and possibly death. Hepatitis consists of loss of appetite, nausea and vomiting, turning yellow in the eyes and skin (jaundice), and light-	Soreness at site of injection	An injection is given and then repeated at 1 month and at 6 months. This vaccine is combined with the hepatitis B vaccine in a preparation called Twinrix.

	colored stools.		
Measles, Mumps, Rubella (MMR)	These are all childhood viral diseases. **Measles** causes a rash and possibly more serious problems. **Mumps** causes inflammation of the salivary glands and possibly the testes. **Rubella** causes a skin rash, but it may cause birth defects when a pregnant woman is infected.	Soreness at injection site Fever and/or rash	If you were born after 1957, did not get the MMR, and your CD4-lymphocyte count is over 200, you are a candidate for this vaccine. You should consider checking blood tests for evidence of immunity if you are considering this vaccine.
Tetanus vaccine	**Tetanus** is a potentially fatal disease of paralysis, lock jaw, and shock that results from the tetanus toxin getting into wounds, cuts, sores, or punctures. The classic example is by stepping on a nail. The tetanus toxin is found in the soil everywhere and even in the dust indoors. Therefore, any time you break your skin there is the chance of tetanus being involved. Tetanus is usually fatal and it consists of muscle paralysis and the inability to breath.	Soreness at site of injection	After the primary series of injections, tetanus boosters are given every 10 years. However, if you have a "high risk" wound (for example, a cut that is contaminated with dirt), you should get a tetanus booster if you have not had one in the previous 5 years. Adults should get a combination tetanus, diptheria, pertussis booster once instead of the routine tetanus-diptheria booster every 10 years.

Persons with HIV **should not take** the following vaccines:

Smallpox vaccine (reason: live vaccine)

Oral polio vaccine (reason: live vaccine)

Measles, mumps, rubella if your CD4-lymphocyte count is < 200. (reason: live vaccine)

Varicella vaccine (reason: live vaccine)

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