

ATAGI recommendation for using 15vPCV vaccine versus 13vPCV vaccine in non-indigenous adults aged ≥ 70 years without special risk factors

15vPCV vaccine is recommended as an alternative to 13vPCV vaccine in non-indigenous adults aged ≥ 70 years without special risk factors. It should be noted that 15vPCV provides additional anticipated protection against two more serotypes.

Additional considerations:

- For those who have received one or more doses of 23vPPV previously, 15vPCV should be administered adhering to same recommendations in terms of interval as is currently recommended for 13vPCV (i.e., 12 months from last 23vPPV dose)
- For those who have already received 13vPCV, a dose of 15vPCV is not recommended as there is no data to support repeat doses of PCV in adults

Justification

- The evidence suggests that 15vPCV likely results in little difference in the immunogenicity outcomes for the shared serotypes compared to 13vPCV.
- For serotypes unique to 15vPCV (22F and 33F), 15vPCV likely results in small, improved protection based on immunogenicity outcomes compared to 13vPCV.
- Rates of injection site adverse events and systemic adverse events following 15vPCV are mild to moderate in severity and slightly higher than those seen after 13vPCV. Serious adverse events are comparable between 15vPCV and 13vPCV.
- The body of evidence suggests that the overall balance of immunogenicity effects and adverse events of 15vPCV are comparable to 13vPCV.