General questions:

Are the slides going to be archived and available for printing?

Yes, you can access them from the console during the event by clicking on the event resources bar to the left of the slides under Dr. Offit’s credentials.

Shingles-related questions:

Can you get shingles if you never had chickenpox?

Technically, you cannot get shingles if you have never had chickenpox. However, some people might have had a sub-clinical chickenpox infection, so they didn't know they had been infected. Also, the chickenpox vaccine, like natural chickenpox virus, can reactivate and cause shingles. However, shingles caused by the chickenpox vaccine occurs much less frequently and is much less severe than shingles caused by natural chickenpox.

Is a second dose of Zostavax ever recommended due to waning immunity?

A second dose of Zostavax has not been recommended.

Should one receive Shingrix if he or she has already had shingles disease or the Zostavax vaccine?

Yes. About 5 of every 100 people will get shingles more than once. For this reason, shingles vaccine is recommended for people who have already had shingles. Also, the ACIP has now recommended that people who have already received Zostavax should still receive Shingrix.

Will insurance pay for Shingrix now that it has been recommended by ACIP?

Typically, insurance companies pay for vaccines that have been recommended by the CDC. However, insurance companies typically wait until the ACIP recommendations have been accepted by the CDC and published in Morbidity and Mortality Weekly Report (MMWR) before reimbursing for vaccines.

Can someone on Cellcept to treat (myasthenia gravis) considered immune-competent to receive the Shingrix vaccine?

Studies looking at immune-compromised patients are ongoing.

Is there any information about how long we should wait to receive Shingrix after receiving Zostavax?

It would probably be best to wait at least 8 weeks after receiving Zostavax before receiving Shingrix.
Why is shingles vaccine recommended at such a late age when anyone previously infected with chickenpox is at risk?

Shingles occurs when a person’s immune system is weak. Most healthy adults will not experience shingles until they reach an age at which their immune system starts weakening because of their age. The risk of shingles increases with increasing age:

Accessed: https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5705a1.htm#fig3

At some point, will the incidence of shingles go to zero because of chickenpox vaccine?

No. Even though the virus in the chickenpox vaccine is weakened, it can still live dormant in the nervous system; therefore, it can reactivate to cause shingles. That said, existing data indicates that this happens less frequently and symptoms are less severe compared with people who had natural infection.

Can chickenpox be eradicated or is it also found in animal reservoirs?

Although the herpes zoster virus does not infect animals, eradicating chickenpox would be difficult because of the fact that the virus lives silently in people’s nervous systems. This means that any time someone has a bout with shingles, he or she can potentially infect others who are not immune to the virus.

When can we expect an MMWR for Shingrix?

It is likely that the recommendations will be available in the MMWR in a few months.

If second dose of Shingrix is given after 6 months, does series have to be restarted?

No.

Will there be a recommendation for re-vaccination with Shingrix if someone previously received Zostavax?

Yes, people who had Zostavax should still get the 2 doses of Shingrix.
Looks like the immune response to Shingrix dropped rapidly over the 4 years. If people get it at 50, will they need another dose at 70?

Although the efficacy decreased over the 4 years (from 97.6 percent to 84.7 percent), it was still higher than original efficacy following immunization with Zostavax (51 percent). So it is highly unlikely that repeat dosing would be recommended for those over 70 years of age.

**Mumps-related questions:**

Can the mumps vaccine be attributed to the decrease in severity and complications in mumps cases?

Yes.

Do healthcare workers need to worry about negative mumps titers? Should they get booster doses or wait until a "just in time" is needed?

For now, there is no recommendation for repeated mumps vaccination in healthcare workers who have received two doses of mumps-containing vaccine.

**Hepatitis B-related questions:**

When would Heplisav be used since hepatitis B vaccine is now a routinely recommended childhood vaccine and Heplisav is indicated for people age 18 and older?

This vaccine would be used for adults who were not vaccinated, did not complete the series or were non-responders.

Is Heplisav approved for children? How effective is it?

No. The vaccine is only approved for those 18 and older.

If a healthcare worker needs hepatitis B vaccine, should we use Engerix or wait for Heplisav to become available?

Since the ACIP will not vote on Heplisav until February and a susceptible healthcare worker could be exposed in the meantime, it is worth starting the series.