

ACIP Provisional Recommendations for Pregnant Women on Use of Tetanus Toxoid, Reduced Diphtheria Toxoid and Acellular Pertussis Vaccine (Tdap)

Date of ACIP vote: June 22, 2011

Date of posting of provisional recommendations: August 5, 2011

On June 22, 2011, the ACIP approved recommendations for use of tetanus toxoid, reduced diphtheria toxoid and acellular pertussis vaccine (Tdap) for pregnant women, and updated Tdap recommendations for persons in contact with infants and special situations. These recommendations are in line with the overall CDC strategy to reduce the burden of pertussis disease in infants and are consistent with existing ACIP recommendations for use of Tdap.

Summary of new recommendations:

Use of Tdap in pregnant women

Women's health care providers should implement a Tdap vaccination program for pregnant women who previously have not received Tdap. Health care providers should administer Tdap during pregnancy, preferably during the third or late second trimester*. Alternatively, if not administered during pregnancy, Tdap should be administered immediately postpartum.

Vaccination of adolescents and adults in contact with infants

Adolescents and adults who have or who anticipate having close contact with an infant aged less than 12 months (e.g., parents, siblings, grandparents, child-care providers and healthcare providers) and who previously have not received Tdap should receive a single dose of Tdap to protect against pertussis. Ideally, these adolescents and adults should receive Tdap at least 2 weeks before beginning close contact with the infant.

Special situations

Pregnant women due for tetanus booster

If a tetanus and diphtheria booster vaccination is indicated during pregnancy for a woman who has previously not received Tdap (i.e., more than 10 years since previous Td), then health care providers should administer Tdap during pregnancy, preferably during the third or late second trimester*.

Wound management for pregnant women

As part of standard wound management care to prevent tetanus, a tetanus toxoid-containing vaccine might be recommended for wound management in a pregnant woman if 5 years or more have elapsed since the previous Td. If a Td booster is indicated for a pregnant woman who previously has not received Tdap, health care providers should administer Tdap.

Pregnant women with unknown or incomplete tetanus vaccination

To ensure protection against maternal and neonatal tetanus, pregnant women who never have been vaccinated against tetanus should receive three vaccinations containing tetanus and reduced diphtheria toxoids during pregnancy. The recommended schedule is 0, 4 weeks, and 6 to 12 months. Tdap should replace 1 dose of Td, preferably during the third or late second trimester* of pregnancy.

*After 20 weeks gestation

This document available at: <http://www.cdc.gov/vaccines/recs/provisional/default.htm>