

**Table 3.3.8: Recommended timing of administration of live attenuated vaccines in adults and children in relation to the use of corticosteroids (specifically the prednisone equivalent dose)**

*Note:* This table assumes that the child or adult is not otherwise immunocompromised, i.e. that there are no additional factors contributing to the patient being immunocompromised (such as an underlying medical condition or use of other immunosuppressive medications<sup>‡</sup>).

Prednisone equivalent dose*		Duration of therapy	Potential timing of vaccination
<b>Adolescents aged ≥16 years and adults</b>			
<20 mg per day		Any duration	Any time during therapy
≥20 mg per day		Less than 14 days	Immunise 1 month prior to corticosteroid initiation or any time after cessation of corticosteroids
		14 days or longer	Immunise 1 month prior to corticosteroid initiation or at least 1 month after cessation of corticosteroids
<b>Children and adolescents aged &lt;16 years</b>			
<b>Weight ≤10 kg</b>	<b>Weight &gt;10 kg</b>		
<1 mg/kg per day	<10 mg per day	Less than 28 days	Any time during therapy
<2 mg/kg per day	<20 mg per day	Less than 14 days <sup>†</sup>	Any time during therapy
		Between 14 days and 28 days	Immunise 1 month prior to corticosteroid initiation or at least 1 month after cessation of corticosteroids
≥2 mg/kg per day	≥20 mg per day	Less than 14 days	Immunise 1 month prior to corticosteroid initiation or any time after cessation of corticosteroids
		Between 14 days and 28 days	Immunise 1 month prior to corticosteroid initiation or at least 1 month after cessation of corticosteroids
Any dose for 28 days or longer			Immunise 1 month prior to corticosteroid initiation or at least 1 month after cessation of corticosteroids

\* Systemic doses of different formulations of systemic corticosteroids (such as dexamethasone, cortisone, methylprednisolone) should be converted to a prednisone equivalent dose for the purpose of assessing suitability to receive live viral vaccines.

† Children taking lower doses (e.g. <1 mg/kg per day or <10 mg in total per day) for 14 to <28 days may also be suitable to receive live attenuated vaccines any time during therapy, but only after expert advice is sought.

‡ Zoster vaccine can be given to patients receiving low-dose corticosteroids (<20 mg per day of prednisone equivalent dose as above) either on their own or in combination with certain csDMARDs in low doses (i.e. methotrexate ≤0.4 mg/kg per week, azathioprine ≤3.0 mg/kg per day or mercaptopurine ≤1.5 mg/kg per day). At these doses, it is likely that the level of immunocompromise is not severe (refer to 4.24 *Zoster*).

Source: Australian Technical Advisory Group on Immunisation. *The Australian Immunisation Handbook*. 10th ed (2017 update). Canberra: Australian Government Department of Health; 2017.

<http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook10-home>