Considerations for patients aged 70-79 who are on DMARDs and/or steroids and are offered Zostavax via GP as part of the National vaccination programme

1. Vaccination **indicated** with any of the following as monotherapy OR in combination with Hydroxychloroquine only:*

   - Sulfasalazine at any dose
   - Prednisolone 10mg or less per day
   - Methotrexate 0.4mg/kg/week
   - Azathioprine 3mg/kg/day

   *GP should counsel patient that the risk of VZV reactivation is low

2. Relative **contraindication**:

   - Prednisolone >10mg/day for 2 or more weeks should wait one month before vaccination
   - Prednisolone >40mg/day for >1/52 should wait 3 months before vaccination
   - Leflunomide 10 - 20mg/day as monotherapy**

   ** There is no data to demonstrate safety of vaccination on Leflunomide and cases should be discussed on an individual basis with microbiology

3. Vaccination **contraindicated**:

   - Combination therapy not mentioned in the green box (above).
   - Use of Mycophenolate mofelti or Ciclosporin or Gold.
   - Cyclophosphamide given or planned **within** 3 months of vaccine
   - Any anti-rheumatic **Biologic** therapy (see BNF 10.1.3)

4. Non-Rheumatic **contraindications**:***

   - Current bone marrow or lymphatic disorder
   - Untreated active TB
   - Cellular immune deficiency incl. neutropaenia, hypogammaglobulinaemia
   - HIV
   - Pregnancy
   - Anaphylactic reaction to components including neomycin, gelatin

   ***for further information refer to Dept of Health Green book Chapter 28a

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<table>
<thead>
<tr>
<th>Weight (kg)</th>
<th>Max Dose MTX (mg/week)</th>
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<tr>
<td>&lt;40</td>
<td>Calculate at 0.4mg/kg</td>
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<td>57-61</td>
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</table>

Version 1.0 Dr V Flower Specialty Rheumatology Registrar RNHRD, Dr R Mayer Consultant Microbiologist Royal United Hospital. Approved by Medical Staffing October 2014.
References:

- The Green Book, Chapter 28a & 34, Department of Health

- BSR statement on Zostavax

- ACR varicella vaccination guidelines
