Tools for Practice

Zoster vaccine

Michael R. Kolber MD CCFP MSc Christina Korownyk MD CCFP Tony Nickonchuk CDE

Clinical question

What are the benefits of the zoster vaccine?

Evidence

Two large industry-supported multicentre RCTs of zoster vaccine or placebo vaccine:

- One RCT of 38546 immunocompetent patients aged 60 years or older (median age 69 years, 59% male).1 Outcomes at 3 years:
 - -Zoster (herpes zoster [HZ], shingles) incidence
 - —vaccine 1.67%, placebo 3.42%; NNT=58.
 - -Postherpetic neuralgia (PHN) incidence
 - —vaccine 0.14%, placebo 0.42%; NNT=358.
 - -Seven-year outcomes of a subgroup of patients were not helpful, as all placebo patients were offered the vaccine, and the numbers are difficult to interpret.²
- One RCT of 22439 immunocompetent patients aged 50 to 59 years (mean age 55 years, 62% female).3 Followed for 1.3 years:
 - -Zoster incidence
 - -vaccine 0.27%, placebo 0.88%; NNT=164;
 - —conversion to 3 years, NNT=71.
 - -Limitations: short follow-up; PHN rates not reported.
- Adverse events: about 2% more patients had systemic adverse events with the vaccine, 1,3,4 and serious adverse events were also slightly more common (1.9% vs 1.3%).1

Context

- · Although the vaccine reduces the relative risk of HZ by 50% to 70%, 60 to 70 patients must be vaccinated to prevent 1 case of HZ over 3 years.^{1,3}
- Rates of HZ increase with age: 3/1000 per year in those 40 to 64 years; 7.5/1000 per year in those 75 and older.⁵ -Overall, about 11% of patients 60 years and older who develop HZ develop PHN.1
 - -PHN risk increases with age, 6,7 and is rare (about 1%) in patients younger than 50 years of age.6
- Recurrence of HZ is low, 1.8 but might be as high as 5.7% over 7 years if including immunocompromised patients.9
- · Zoster vaccine guideline recommendations
 - -Canada: vaccinate those 60 years of age and older; can vaccinate those 50 to 59 years old. 10
 - -United States: vaccinate those 60 years of age and older; do not recommend vaccinating those 50 to 59 years old (owing to vaccine supply issues).11
- The cost of the vaccine is about \$200.
- Remaining questions about the vaccine:
 - -Is it safe and effective in immunocompromised patients?
 - -Is it beneficial for patients with previous HZ?
 - -What is the long-term efficacy (will a booster be required)?

Bottom line

Over 3 years, zoster vaccine will prevent 1 HZ case for every 60 to 70 patients vaccinated (and 1 PHN case in 350 vaccinated patients). Long-term benefits and effectiveness in specific populations (eg, the immunocompromised, those with previous HZ) are unclear.

Implementation

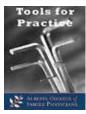
Reminders in the electronic medical record appear to increase zoster vaccine uptake12; however, these do not promote shared, informed decision making. Detailed numeric information is necessary.13 For average patients, 1 of every 60 to 70 of those vaccinated will avoid an HZ case over 3 years. Patients with immune-mediated diseases or who are taking immunosuppressive medication have 1.5 to 2 times the risk of developing HZ14; thus, it might be reasonable to more strongly encourage vaccination in those initiating immunosuppressive therapy in the near future. #

Dr Kolber is Associate Professor and Dr Korownyk is Assistant Professor, both in the Department of Family Medicine at the University of Alberta in Edmonton. Mr Nickonchuk is Pharmacy Manager in Peace River, Alta.

The opinions expressed in Tools for Practice articles are those of the authors and do not necessarily mirror the perspective and policy of the Alberta College of Family Physicians.

References

- 1. Oxman M, Levin M, Johnson G, Schmader K, Straus S, Gelb L, et al. A vaccine to prevent herpes zoster and postherpetic neuralgia in older adults. N Engl J Med 2005;352(22):2271-84.
- 2. Schmader KE, Oxman MN, Levin MJ, Johnson G, Zhang JH, Betts R, et al. Persistence of the efficacy of zoster vaccine in the Shingles Prevention Study and the Short-Term Persistence Substudy. *Clin Infect Dis* 2012;55(10):1320-8.
- 3. Schmader KE, Levin MJ, Gnann JW, McNeil SA, Vesikari T, Betts RF, et al. Efficacy, safety, and tolerability of herpes zoster vaccine in persons aged 50-59 years. Clin Infect Dis
- 4. Simberkoff MS, Arbeit RD, Johnson GR, Oxman MN, Boardman KD, Williams HM, et al. Safety of herpes zoster vaccine in the Shingles Prevention Study. Ann Intern Med 2010;152(9):545-54
- Boivin G, Jovey R, Elliott CT, Patrick DM. Management and prevention of herpes zoster: a Canadian perspective. Can J Infect Dis Med Microbiol 2010;21(1):45-52.
- 6. Drolet M, Brisson M, Schmader KE, Levin MJ, Johnson R, Oxman MN, et al. The impact of herpes zoster and postherpetic neuralgia on health-related quality of life: a prospective study. CMAJ 2010;182(16):1731-6.
- 7. Helgason S, Petursson G, Gudmundsson S, Sigurdsson JA. Prevalence of postherpetic neuralgia after a single episode of herpes zoster: prospective study with long term follow up. BMJ 2000;321 (7264):794-6.
- 8. Tseng HF, Chi M, Smith N, Marcy SM, Sy LS, Jacobsen SJ. Herpes zoster vaccine and the incidence of recurrent herpes zoster in an immunocompetent elderly population. J Infect Dis 2012;206(2):190-6.
 9. Yawn BP, Wollan PC, Kurland MJ, St Sauver JL, Saddier P. Herpes zoster recurrences
- more frequent than previously reported. Mayo Clin Proc 2011;86(2):88-93
- Laupland K; National Advisory Committee on Immunization. Statement of the recommended use of herpes zoster vaccine. Can Commun Dis Rep 2010;36(ASC-1):1-19.
- Harpaz R, Ortega-Sanchez IR, Seward JF; Advisory Committee on Immunization Practices. Prevention of herpes zoster. MMWR 2008;57(5):1-30.
- 12. Chaudhry R, Schietel SM, North F, Dejesus R, Kesman RL, Stroebel RJ. Improving rates of herpes zoster vaccination with a clinical decision support system in a primary care practice. J Eval Clin Pract 2012 Feb 5. Epub ahead of print.
- 13. Stacey D, Bennett CL, Barry MJ, Col NF, Eden KB, Holmes-Rovner M, et al. Decision aids for people facing health treatment or screening decisions. Cochrane Database Syst Rev
- 14. Zhang J, Xie F, Delzell E, Chen L, Winthrop KL, Lewis JD, et al. Association between vaccination for herpes zoster and risk of herpes zoster infection among older patients with selected immune-mediated diseases. JAMA 2012;308(1):43-9.



Tools for Practice articles in Canadian Family Physician (CFP) are adapted from articles published on the Alberta College of Family Physicians (ACFP) website, summarizing medical evidence with a focus on topical issues and practice-modifying information. The ACFP summaries and the series in CFP are coordinated by Dr G. Michael Allan, and the summaries are co-authored by at least 1 practising family physician and are peer reviewed. Feedback is welcome and can be sent to toolsforpractice@cfpc.ca. Archived articles are available on the ACFP website: www.acfp.ca.