



## Immunization During the Postpartum Period

### General Principles

- Immunization in the postpartum period is a simple and effective way to protect the woman and her child from certain infections, particularly when the woman was not immunized during pregnancy. Although obstetrician–gynecologists encourage women of childbearing age to be current with their immunizations before the peripartum period, postpartum maternal immunization can prevent acute maternal infection and potential spread of illness from the woman to her newborn. Infants of breastfeeding women acquire maternal antibodies through breast milk.
- It is recommended that all household members and caregivers who will be in contact with the newborn be up to date with routine vaccines, particularly influenza and tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis (Tdap).
- All vaccines except smallpox can be given to breastfeeding women. The yellow fever and meningococcal (MenB) vaccines must be administered cautiously and only in cases for which the benefits outweigh the risks. Avoid administering yellow fever vaccine to women who are breastfeeding because of the theoretical risk of transmitting the 17D virus to the breastfed infant. If travel to regions where yellow fever is endemic or epidemic cannot be postponed, the woman should receive yellow fever vaccine. There are limited data about the use of meningococcal vaccines in lactating women. Vaccination should be deferred unless the woman is at increased risk.

### Vaccine Recommendations for Postpartum Women

General guidance for vaccine administration for women in the postpartum period is provided as follows. However, for specific recommendations, refer to the Centers for Disease Control and Prevention links provided below:

- Women without documentation of previous Tdap vaccination need to receive the Tdap vaccine. <https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6207a4.htm>
- Women who did not receive influenza vaccination during pregnancy need to be vaccinated during the flu season (October through May).
- Women may need other adult vaccines, including hepatitis A, hepatitis B, pneumococcal, or meningococcal, depending on their health history, risk factors, or where they work. <https://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html>
- Women who tested susceptible to rubella during prenatal testing need to receive a single dose of the measles–mumps–rubella (MMR) vaccine. <https://www.cdc.gov/vaccines/pregnancy/hcp/guidelines.html>

- Women who are not immune to chicken pox need to receive two doses of single-antigen varicella vaccine, 4–8 weeks apart. Evidence of immunity to varicella includes documentation of age-appropriate varicella vaccination, laboratory evidence of immunity or laboratory confirmation of the disease, or birth in the United States before 1980.  
<https://www.cdc.gov/vaccines/pregnancy/hcp/guidelines.html>
- Because of the importance of rubella and varicella immunity among women of childbearing age, the postpartum vaccination of women who do not have evidence of immunity to rubella or varicella with MMR, varicella, or MMR, vaccines should not be delayed because of receipt of anti-Rho(D) globulin or any other blood product during the last trimester of pregnancy or at delivery. Any reduction in immunity caused by anti-Rho(D) globulin or other blood products is outweighed by the opportunity to generate immunity.
- The human papillomavirus (HPV) vaccine is not recommended during pregnancy. Women inadvertently vaccinated during pregnancy should wait until after pregnancy to finish any remaining HPV vaccine dose. For women 26 years and younger who have not received the HPV vaccine, the series should be initiated in the postpartum period.
- Live vaccines are safe to administer to breastfeeding women. Should multiple live vaccines be indicated in the postpartum period, the vaccines should be administered during the same visit or at least 28 days apart. <https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/timing.html>
- The American College of Obstetricians and Gynecologists has developed toolkits for [HPV](#), [Tdap](#), [influenza](#), and a [comprehensive immunization toolkit](#) that includes coding guidance. The American College of Obstetricians and Gynecologists also has an immunization applet found within the [ACOG app](#).

## References

1. Centers for Disease Control and Prevention. Chickenpox (varicella): clinical overview. Atlanta (GA): CDC; 2016. Available at: <https://www.cdc.gov/chickenpox/hcp/clinical-overview.html>. Retrieved June 27, 2018.
2. Centers for Disease Control and Prevention. Guidelines for vaccinating pregnant women. Atlanta (GA): CDC; 2017. Available at: <https://www.cdc.gov/vaccines/pregnancy/hcp/guidelines.html>.
3. Center for Disease Control and Prevention. Recommended Immunization Schedule for Adults Aged 19 Years or Older, United States, 2018. Atlanta (GA): CDC; 2018. Available at: <https://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html>.
4. Updated recommendations for use of tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccine (Tdap) in pregnant women--Advisory Committee on Immunization Practices (ACIP), 2012. Centers for Disease Control and Prevention (CDC). MMWR Morb Mortal Wkly Rep 2013;62:131-5. Available at: [https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6207a4.htm?s\\_cid=mm6207a4\\_w](https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6207a4.htm?s_cid=mm6207a4_w).

## Resources

### The American College of Obstetricians and Gynecologists Clinical Guidelines

- ❖ Human papillomavirus vaccination. Committee Opinion No. 704. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2017;129:e173–8.

*Covers the role of HPV vaccine in the prevention of cervical cancer, as well as other anogenital cancers and genital warts. It includes information about the timing, safety, and efficacy of bivalent, quadrivalent, and 9-valent HPV vaccines, as well as specific recommendations for pregnant and lactating women.*

- ❖ Influenza vaccination during pregnancy. ACOG Committee Opinion No. 732. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2018;131:e109–14.  
*Recommends obstetrician–gynecologists and all obstetric care providers advocate for influenza vaccination, provide the influenza vaccine to pregnant patients during any trimester, and receive the influenza vaccine themselves every season.*
- ❖ Integrating immunizations into practice. Committee Opinion No. 661. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2016;127:e104–7.  
*Covers the role of obstetrician–gynecologists and other health care providers in vaccine administration and disease prevention. This guideline includes information about how obstetrician–gynecologists and other health care providers initiate and improve immunization programs in their practice.*
- ❖ Update on immunization and pregnancy: tetanus, diphtheria, and pertussis vaccination. Committee Opinion No. 718. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2017;130:e153–7.  
*Covers the critical role of Tdap vaccination during pregnancy for the prevention of pertussis in newborns before they can get their own vaccines. This updated guidance includes information about the recommended timing for Tdap vaccination during pregnancy, and the safety and efficacy of Tdap vaccination during pregnancy.*

### Health Care Provider Resources for Patient Care

- ❖ American College of Obstetricians and Gynecologists. Immunization for women. Available at: <http://www.immunizationforwomen.org/>. Retrieved March 1, 2018.  
*ACOG’s immunization website features the latest news and information on vaccinations for women.*
- ❖ Centers for Disease Control and Prevention. ACIP: guidance for vaccine recommendations for pregnant and breastfeeding women. Atlanta (GA): CDC; 2017. Available at: <https://www.cdc.gov/vaccines/acip/committee/guidance/rec-vac-preg.html>. Retrieved March 1, 2018.
- ❖ Centers for Disease Control and Prevention. Create a circle of protection around babies. Atlanta (GA): CDC; 2016. Available at: <https://www.cdc.gov/vaccines/pregnancy/family-caregivers/index.html>. Retrieved March 1, 2018.
- ❖ Centers for Disease Control and Prevention. FDA approval of an extended period for administering VariZIG for postexposure prophylaxis of varicella. *MMWR Morb Mortal Wkly Rep* 2012;61:212.
- ❖ Centers for Disease Control and Prevention. Maternal vaccines: part of a healthy pregnancy. Atlanta (GA): CDC; 2016. Available at: <https://www.cdc.gov/vaccines/pregnancy/pregnant-women/index.html>. Retrieved March 1, 2018.
- ❖ Immunization Action Coalition. Available at: <http://www.immunize.org/>. Retrieved March 1, 2018.  
*Provides more than 250 CDC-reviewed staff educational materials and patient handouts in several languages.*

### Coding

See [Coding for Immunization](#) (HPV, MMR, Varicella)