TITLE: Varicella-Zoster Vaccine Implementation: Clinical Evidence and Guidelines

DATE: 28 October 2010

RESEARCH QUESTIONS

1. What is the clinical evidence regarding barriers to implementation of the varicella-zoster vaccine for the prevention of shingles in adults aged 60 and older?

2. What are the evidence-based guidelines regarding the use of the varicella-zoster vaccine for the prevention of shingles in adults aged 60 and older?

KEY MESSAGE

Limited evidence from one non-randomized study suggests that lack of awareness may be the most important barrier to varicella-zoster vaccine uptake despite the recommendation from several evidence-based guidelines that all adults aged 60 years or older should be vaccinated.

METHODS

A limited peer reviewed literature search was conducted using the following bibliographic databases: PubMed and the Cochrane Library (2010, Issue 10). No methodological filters were applied to limit retrieval by study type. Where possible, retrieval was limited to the human population. The search was limited to English language documents published between January 1, 2005, and October 21, 2010. Grey literature was obtained through health technology agency websites and a focused Internet search. Internet links were provided, where available.

The summary of findings was prepared from the abstracts of the relevant information. Please note that data contained in abstracts may not always be an accurate reflection of the data contained within the full article.

RESULTS

Rapid response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are
presented first. These are followed by randomized controlled trials, non-randomized studies, and evidence-based guidelines.

One non-randomized study and three evidence-based guidelines were identified pertaining to the clinical evidence regarding barriers to implementation and guidelines for the use of the varicella-zoster vaccine for the prevention of shingles in adults aged 60 and older. No relevant health technology assessment reports, systematic reviews, meta-analyses, or randomized controlled trials were identified. Additional information that may be of interest, including surveys regarding barriers to vaccination, is included in the appendix.

OVERALL SUMMARY OF FINDINGS

Limited information regarding barriers to implementation of the varicella-zoster vaccine for the prevention of shingles in adults aged 60 and older is available. The included non-randomized study identified lack of awareness as the most important barrier to the implementation of the varicella-zoster vaccine.\(^1\)

Recommendations for the use of the varicella-zoster vaccine (Zostavax) in patients 60 years or older for the prevention of shingles and complications are as follows:

- Zostavax is recommended for all patients aged 60 years or older without contraindications and who are not immunocompromized.\(^2,4\) Previous infection with zoster and chronic medical conditions are not considered contraindications.\(^3,4\)
- The duration of the vaccine is beyond four years\(^2\) and a booster dose is not recommended\(^2\) or licensed\(^3,4\) for healthy individuals.
- Zostavax should be administered regardless of previous chicken pox\(^2,3\) or documented varicella infection.\(^2\)
- Individuals who receive antiviral therapy for varicella-zoster 2 days prior or 14 days after vaccination may need an additional vaccine dose.\(^2\)
- The varicella-zoster vaccine is not recommended for patients who have received the varicella vaccination.\(^3\)

For further detail, links to the complete guidelines are provided in the reference section.
REFERENCES SUMMARIZED

Health technology assessments
No literature identified.

Systematic reviews and meta-analyses
No literature identified.

Randomized controlled trials
No literature identified.

Non-randomized studies


Guidelines and recommendations


   See 14. Herpes Zoster/Shingles Vaccine p. 27-29


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APPENDIX – FURTHER INFORMATION:

Clinical practice guidelines and consensus statements


Surveys


Review articles


Additional references


Discussion and news articles


