children's HEALTH

It's Common. It's Potentially Serious. It's Preventable. What You Should Know About Invasive Pneumococcal Disease

(NAPSA)—Did you know that children in the U.S. younger than 5 years of age are at increased risk of contracting a serious condition known as invasive pneumococcal disease (IPD)? IPD is a group of illnesses that can be life-threatening. The group includes some types of meningitis and bacteremia, and it's caused by a bacterium called pneumococcus.

Armed with the facts, parents can help protect their children against IPD. Common questions parents can ask their child's doctor include:

Is my child at risk?

Children younger than 5 are at increased risk for IPD.¹ Invasive pneumococcal disease is often spread through sneezing, coughing, and even breathing. Children can pass it on to each other in any setting where there is close contact, such as day care.²

Is vaccination an option?

Vaccination can help prevent IPD in infants and young children. The Centers for Disease Control and Prevention (CDC) and the American Academy of Pediatrics (AAP) recommend routine vaccination with a pneumococcal 13-valent conjugate vaccine for the prevention of IPD in infants and toddlers.³⁴

In addition, the CDC and AAP recommend that children 15 months to 5 years of age receive a single dose of a pneumococcal 13-valent conjugate vaccine even if they were previously vaccinated with four doses of Prevnar® (Pneumococcal 7-valent Conjugate Vaccine [Diphtheria CRM₁₉₇ Protein]).^{3,4} The immune response from this schedule might be lower for the 6 additional strains (types

INDICATION FOR PREVNAR 138

- $\bullet Prevnar~13^{\circ}$ is a vaccine approved for use in children 6 weeks through 5 years of age (prior to the 6th birthday)
- •Prevnar 13[®] is indicated for active immunization for the prevention of invasive disease caused by 13 strains of Streptococcus pneumoniae (1, 3, 4, 5, 6A, 6B, 7F, 9V, 14, 18C, 19A, 19F, and 23F)

IMPORTANT SAFETY INFORMATION FOR PREVNAR 13®

- \bullet Prevnar 13® should not be given to anyone with a severe allergic reaction to any component of Prevnar 13®, Prevnar® (Pneumococcal 7-valent Conjugate Vaccine [Diphtheria CRM_{^{197}} Protein]), or any diphtheria toxoid—containing vaccine
 - Prevnar 13® may not protect all individuals receiving the vaccine.
- Children with weakened immune systems may have a reduced immune response to Prevnar 13®
- •A temporary pause of breathing following vaccination has been observed in some infants born prematurely
- •The most commonly reported serious adverse events include bronchiolitis (an infection of the lungs) (0.9%, 1.1%), gastroenteritis (inflammation of the stomach and small intestine) (0.9%, 0.9%), and pneumonia (0.9%, 0.5%) for Prevnar 13® and Prevnar® (Pneumococcal 7-valent Conjugate Vaccine [Diphtheria CRM₁₉₇ Protein]), respectively
- •The most common side effects are redness, swelling and tenderness at the injection site, fever, decreased appetite, irritability, increased sleep, and decreased sleep. Any side effects associated with the vaccination should be reported to your child's health care provider
- •Ask your child's health care provider about the risks and benefits of Prevnar 13°. Only a health care provider can decide if Prevnar 13° is right for your child

To learn more about IPD or see the Full Prescribing Information for Prevnar 13° , visit www.Prevnar 13.com.

References

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- 5. Pilishvili T, Lexau C, Farley MM, et al; for the Active Bacterial Core Surveillance/Emerging Infections Program Network. Sustained reductions in invasive pneumococcal disease in the era of conjugate vaccine. J Infect Dis. 2010;201:32-41.
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Doctors say children should be vaccinated against the several strains of a serious respiratory condition.

1, 3, 5, 6A, 7F, and 19A) than if your child had received the full 4 doses of Prevnar 13® (Pneumococcal 13-valent Conjugate Vaccine [Diphtheria CRM₁₉₇ Protein]). It's not known how medically important this difference is.

What is different about

What is different about Prevnar 13° ?

Prevnar 13[®] can help protect against 6 additional strains of pneumococcus that cause IPD. One of the additional strains, 19A, causes nearly half the IPD in children younger than 5 in the U.S.^{1,5}

Can antibiotics treat IPD? Antibiotics can be used to treat IPD infections. Unfortunately, using antibiotics for the wrong reason or too often has caused them to not work at times. This is important for patients with IPD, because some strains of pneumococcus have been difficult to treat with common antibiotics.⁶

Strain 19A, the most common strain affecting children in the U.S. today, is frequently antibiotic resistant.⁶