

## Update on Vaccination in the elderly

*M Verjee*

*M Verjee, MD, MBA, CCFP, FCFP, Weill Cornell Medicine, Qatar*

**Citation:** M Verjee. Update on Vaccination in the elderly. Middle East Journal of Age and Ageing, Volume 15, Issue 2, June 2018. DOI: 10.5742/MEJAA.2018.93453

### ABSTRACT

Many vaccines are available and strongly recommended to protect the elderly from age 65 years onwards. However, earlier protection with specific vaccines from 50 years enhances better protection later in life. There have been some regulatory changes with pneumococcal protection and a new zoster vaccine is available. Annual influenza vaccination is consistently advised, especially for those at increased risk.

Meningococcal protection, even with the quadravalent vaccine, is less effective after the age of 55 years but is still advisable for those undertaking Hajj, or travelling across the African meningitis belt. Hepatitis B should still be given at 60 years or older in certain chronic health conditions or treatments, and to health care and public safety workers, as well as for global travel where Hep B is endemic. Tetanus as

Td protection should have included at least one dose of Tdap in a lifetime. There is no truth that Td vaccination is not necessary after the age of 65. Varicella poses an increase in morbidity if a patient has never had exposure, or had a previous vaccination. A non-immune person at any age is advised to be vaccinated, to reduce the risk of spreading the disease to others, including pregnant mothers. All these vaccines will be covered in detail at the presentation.