

# Single-dose PCV13 immunogenic, safe in pediatric oncology

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11 serotypes, respectively. Comparable responses to PCV7 serotypes were seen for both groups, whereas a significantly higher proportion of patients in the CIT group achieved protective antibody titers to PCV13. The rate of serious adverse events was low (3.5 percent).

"The current data support the recommendation for an additional dose of PCV13 after the completion of immunosuppressive therapy to provide additional protection against [invasive pneumococcal disease](#)," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

**More information:** [Abstract](#)  
[Full Text \(subscription or payment may be required\)](#)

(HealthDay)—For pediatric and adolescent oncology patients, a single-dose 13-valent pneumococcal conjugate vaccine (PCV13) is safe and immunogenic, according to a study published online July 11 in *Cancer*.

Te-Yu Hung, M.B.B.S., from the Princess Margaret Hospital for Children in Perth, Australia, and colleagues conducted a prospective, open-label cohort study involving 85 children ages 1 to 18 years receiving active [immunosuppressive therapy](#) (AIT) or within 12 months after completing immunosuppressive therapy (CIT) for cancer. Blood was sampled before and four weeks after administration of single-dose PCV13; side effects were recorded after vaccination.

The researchers found that 50 percent had protective antibody titers against *Streptococcus pneumoniae* for 10 and eight serotypes, respectively, in the AIT and CIT groups at baseline. After vaccination, in the AIT and CIT groups, 70 percent had protective antibody titers for nine and

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