

## Louth: Antimicrobial Guidelines - Louth Hospitals: Antimicrobial Guidelines: Asplenia / Splenic Dysfunction / Splenectomy Prophylaxis

### Vaccination

Patients should be vaccinated ideally 4 weeks before but **at least two weeks before or two weeks after splenectomy**. If patient is discharged sooner than 2 weeks post-splenectomy, give first dose of vaccines on day of discharge. In general, vaccination should take place at least two weeks before or at least three months after immunosuppressive chemotherapy or radiotherapy. **Ensure the GP is fully informed about outstanding vaccinations on discharge.**

For both adult and paediatric patients, the vaccination schedule in cases of asplenia or hyposplenia is outlined in the National Immunisation Guidelines, available at [www.hse.ie](http://www.hse.ie). See the tables below for a summary of the vaccination schedule for **ADULT** patients.

| Vaccine – Full Name           | Vaccine – Short Name | Brand(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|-------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Haemophilus influenzae type b | Hib                  | Hiberix®                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Meningococcal conjugate       | MenACWY              | Menveo®, Nimenrix®                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Meningococcal B               | MenB                 | Bexsero®                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Pneumococcal conjugate        | PCV                  | Prevenar-13®                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Pneumococcal polysaccharide   | PPV                  | Pneumovax 23®                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Influenza                     | Influenza            | Changes annually                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Vaccine                       |                      | Recommended Schedule                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Hib                           |                      | <p><b>Not previously immunised with Hib:</b></p> <p>Two doses given 2 months apart.</p> <p><b>Previously immunised with Hib:</b></p> <p>One dose.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| MenACWY                       |                      | <p><b>Regardless of immunisation history:</b></p> <p>Two doses given 2 months apart. Booster dose every 5 years.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| MenB                          |                      | <p><b>Not previously immunised with MenB:</b></p> <p>Two doses given 1 month apart.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| PCV                           |                      | <p><b>Not previously immunised with PCV or PPV:</b></p> <p>Two doses 2 months apart followed by PPV (see below)</p> <p><b>Previously immunised with PCV:</b></p> <p>One dose followed by PPV (see below).</p> <p><b>Previously immunised with PPV:</b></p> <p>Wait at least 1 year before giving PCV schedule.</p>                                                                                                                                                                                                                                                                                                                           |
| PPV                           |                      | <p><b>Not previously immunised with PPV:</b></p> <p>First dose at least 2 months after PCV. Booster dose 5 years later. If &lt; 65 years when booster dose given, final booster dose at least 5 years later at <math>\geq</math> 65 years.</p> <p><b>Previously immunised with PPV when &lt; 65 years:</b></p> <p>Booster dose 5 years after previous dose (given at least 2 months after PCV). If &lt; 65 years when booster dose given, final booster dose at least 5 years later at <math>\geq</math> 65 years.</p> <p><b>Previously immunised with PPV when <math>\geq</math> 65 years:</b></p> <p>No further doses of PPV required.</p> |
| Influenza                     |                      | <p>Annual vaccination during the influenza season. Influenza vaccine also recommended for household contacts of a person with asplenia or hyposplenia.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |

### Antibiotic Prophylaxis ■

- Phenoxymethylpenicillin (Calvepen®) 666mg BD
- If penicillin allergic, Erythromycin 250mg BD

## Duration of Antibiotic Prophylaxis

■ Life-long antibiotic prophylaxis is recommended, particularly for patients at highest risk of pneumococcal infection:

- Aged less than 16 years or greater than 50 years
- Inadequate serological response to pneumococcal vaccination
- History of previous invasive pneumococcal disease
- Splenectomy for underlying haematological malignancy, particularly in the context of on-going immunosuppression

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Patients not at high risk may be counselled regarding the risks and benefits of lifelong antibiotic prophylaxis – the review may be conducted by the patient's GP after 2 years, who should also assess the serological response to vaccination after the first 2 years. Though most infections occur within the first two years after splenectomy, up to a third may be manifested at least five years later.

## Patient Education

A patient information leaflet and splenectomy card is available from <https://www.gov.uk/government/publications/splenectomy-leaflet-and-card> :

Advise patient to

- Seek **urgent** medical attention if they develop a fever or other symptoms of infection, e.g. sore throat, as asplenic patients are immunocompromised and infection can progress very quickly.
- Consider carrying a card to alert doctors that they do not have a working spleen in case of emergency.
- Seek medical advice prior to booking an overseas holiday. It is recommended that patients who plan to travel overseas receive an emergency/standby supply of antimicrobials to take on the trip in the event that they become unwell and there is a potential delay in seeking medical attention. Prescribe co-amoxiclav 625mg TDS PO or, if penicillin allergy, levofloxacin 500mg once daily PO (Caution with levofloxacin – risk of long-lasting and disabling adverse effects, mainly involving muscles, tendons and bones and the nervous system. Consider potential to prolong the QT interval. Consider that seizure threshold may be lowered.)