

## RECOMMENDED VACCINES FOR ADULTS OVER THE AGE OF 19 YEARS

Disease	Vaccine	Recommendation	Notes
INFLUENZA	Influenza vaccine	1 dose annually	No benefit of 2 doses in the same flu season Recommended for pregnant women, irrespective of trimester
TETANUS, DIPHTHERIA, PERTUSSIS +/- POLIO	Tdap (Adacel®/Boostrix®) or Tdap-IPV (Adacel Quadra®/ Boostrix Tetra®)	1 dose and routine booster every 10 years unless needed for PEP (5 years)	Registered for use as tetanus PEP. Pregnancy: Booster during each pregnancy in 2nd or 3rd trimester. Travellers requiring a polio booster vaccine can receive Adacel Quadra or Boostrix Tetra (Tdap-IPV)
MEASLES, MUMPS, RUBELLA	MMR (Omzyta®/Priorix®)	2 doses at least 4 weeks apart	If only measles is required, Measles vaccine Cipla® can be given. Contraindicated in immunocompromised patients and in pregnancy.
CHICKENPOX (Varicella)	Onvara®/Varilix®	2 doses at least 4 weeks apart	Contraindicated in immunocompromised patients and in pregnancy.
SHINGLES (Herpes zoster)	Shingrix® (Section 21)	2 doses as per product information	Expected release 2026
HUMAN PAPILLOMA VIRUS - HPV	Cervarix®/Gardasil® /Gardasil 9®	3 doses (0, 1-2, 6 months) (Reduced dose option as per WHO)	All products licenced for use in males and females. Schedule is age dependent. (See PI for guidance)
PNEUMOCOCCAL	Prevenar13® (PCV13) Vaxneuvance® (PCV15) Pneumovax 23® (PPSV23)	For high risk adults and/or ≥ 65 years (with no history of previous pneumococcal vaccines), 1 dose of PCV13 or PCV15 followed by 1 dose of PPSV23	PCV and PPSV23 must not be given on the same day. Guidelines: <a href="https://jtd.amegroups.org/article/view/68210/pdf">https://jtd.amegroups.org/article/view/68210/pdf</a> Additional information for high-risk adults 19 years and older. Refer to guidelines for dosing interval. A second dose of PPSV23 is only indicated in high-risk patients.
HEPATITIS A	Avaxim 160®	2 doses at least six months apart	For those who are not immune.
HEPATITIS B	Engerix B®/ Euvax B®	3 doses, schedule depends on product	For those who are not immune.
HEPATITIS A + B	Twinrix®	3 doses (0,1 and 6 months)	An option if protection against both hepatitis A and B is required. Contains paediatric hepatitis A and adult hepatitis B. Accelerated schedule available: Day 0, 7 and 21, with a booster a year later for patients 18 years and older.
MENINGOCOCCAL	Menactra® MenACWY	Single dose (immunocompromised, complement deficiency, asplenia or PLWHIV receive a 2-dose primary schedule (12 weeks apart). Booster dose every 5 years for those at continued risk.	Patients at high risk of contracting meningococcal infections: • Laboratory personnel from reference labs who work with Neisseria meningitidis • Travellers and Hajj pilgrims to Saudi Arabia (MenACWY required) • Patients with asplenia, complement deficiency or PLWHIV • Consider vaccination of first-year students attending college/university/military academies; miners Guidelines: <a href="https://www.nicd.ac.za/wp-content/uploads/2017/03/SAJID_Recommendations-for-Meningococcal-Vaccine-in-SA-2017SMeiring.pdf">https://www.nicd.ac.za/wp-content/uploads/2017/03/SAJID_Recommendations-for-Meningococcal-Vaccine-in-SA-2017SMeiring.pdf</a>
	Bexsero® 4CMenB	2 doses 1 month apart. Booster dose as per recommendation for those at continued risk.	
RABIES	Verorab® Chirorab® Rabies vaccine Cipla®	Pre-exposure: Immunocompetent: • Day 0, and 7 Immunocompromised: • Day 0,7,21-28	For at risk patients: Individuals may be predisposed for exposure to the rabies virus i) due to their occupation (such as veterinarians, other veterinary health professionals, animal welfare workers and laboratory workers), or ii) due to their hobbies such as bat enthusiasts or spelunkers, or iii) due to travel to canine rabies endemic areas. PrEP does not negate the need for PEP (see guidelines) Rabies guidelines: <a href="https://www.nicd.ac.za/diseases-a-z-index/rabies/">https://www.nicd.ac.za/diseases-a-z-index/rabies/</a>
TYPHOID	Typhim Vi®	1 dose	Prevention becomes effective approximately 2 to 3 weeks after injection. Revaccinate every 3 years only if continued to be at risk.
YELLOW FEVER	Stamaril®	1 dose	Refer to WHO for people living, travelling, or transiting through yellow fever endemic areas: <a href="https://cdn.who.int/media/docs/default-source/travel-and-health/countries-with-risk-of-yellow-fever-transmission.pdf">https://cdn.who.int/media/docs/default-source/travel-and-health/countries-with-risk-of-yellow-fever-transmission.pdf</a> Document on the official <b>International certificate of vaccination or prophylaxis</b> . Certificate valid 10 days after administration of the vaccine.
RSV	Abrysvo®	1 dose for patients ≥60 years of age	Also recommended during pregnancy week 28 - 36 Recommended for adults with certain underlying medical conditions.

Please see **Know your products - Registered vaccines in South Africa 2026** for age indications: <https://www.amayeza-info.co.za/vaccine-info>

\* PEP - Post-exposure prophylaxis \* PrEP - Pre-exposure prophylaxis