Various vaccinations are recommended for adults 50 years of age and older. The immunization information discussed below is based on the Recommended Adult Immunization Schedule—United States, October 2007–September 20083 put out by the Advisory Committee on Immunization Practices (made up of immunization experts across the country selected by the secretary of the U. S. Department of Health and Human Services).

**NOTE:** Variations or exceptions to recommendations for immunizations occur based on an individual’s medical situation or other indications (including pregnancy, immune-compromised conditions, diabetes, heart disease, chronic pulmonary disease, chronic alcoholism, asplenia, chronic liver disease, kidney failure, end-stage renal disease, hemodialysis, and health-care personnel occupation). Speak with your medical provider to determine whether or not any particular vaccine is indicated for you.

### TETANUS, DIPHTHERIA, PERTUSSIS

- Tetanus (lockjaw) is a bacterial disease that affects the nervous system. Tetanus infection can lead to severe complications and death.
- Diphtheria is a respiratory disease caused by bacteria. Diphtheria can also lead to death.
- Pertussis (whooping cough) is a respiratory disease caused by bacteria. The main complications for older adults are bacterial pneumonia and rib fracture.

- The vaccination is a combination vaccination for these three diseases. The general recommendations for adults are:
  - If you have never received the complete primary vaccination series, you should get the complete vaccination series.
  - A booster vaccination is recommended every 10 years.

### MEASLES, MUMPS, RUBELLA (MMR)

The MMR vaccine is a combination vaccine for protection against measles, mumps, and rubella. A combination MMRV (measles-mumps-rubella-varicella) vaccine was licensed in 2005.

- Measles is a respiratory disease caused by a virus. It can lead to severe complications and death.
- Mumps is a viral illness. Severe complications are rare, but can occur.
- Rubella (German measles) is a viral disease. If a pregnant woman becomes infected, severe birth defects can occur.

You DO NOT need the MMR vaccine if:

- You were born before 1957 (unless you’re a woman who might get pregnant).
- You have already been properly vaccinated (talk with your doctor or nurse about your vaccination history).
- You show immunity via blood tests.

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3 The full Recommended Adult Immunization Schedule can be found at [http://www.cdc.gov/vaccines/recs/schedules/adult-schedule.htm](http://www.cdc.gov/vaccines/recs/schedules/adult-schedule.htm).

There are many footnotes in the schedule discussing variations on recommendations, dosage, indications, and contraindications.

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To find more resources for your business, home, or family, visit the College of Agriculture and Home Economics on the World Wide Web at [aces.nmsu.edu](http://aces.nmsu.edu)
You SHOULD get the MMR vaccine if you do not meet the criteria listed above, and:
• You are a student (in college, trade school, or other post-secondary school—a student beyond high school).
• You work in a medical facility.
• You travel internationally or on a cruise ship.
• You are a woman of childbearing age.

VARICELLA (CHICKENPOX)
Varicella is a viral disease that causes skin rash (blister-like lesions). Serious complications can occur.

You DO NOT need the vaccine if you already demonstrate evidence of immunity. The following are indications of immunity:
• You have already had chicken pox or have had herpes zoster (shingles).
• You show immunity to varicella via a blood test.
• You have already been properly vaccinated.
• You were born in the U.S. before 1980 (although pregnant women and health-care personnel need special consideration and should not use this criterion as evidence of immunity).

INFLUENZA (FLU)
Influenza is a respiratory disease caused by a virus. Influenza can lead to death. While everyone can get vaccinated annually to reduce their chances of getting the flu, certain high-priority groups are at high risk for complications, and yearly vaccinations are recommended for:
• Persons >50 years of age.
• Pregnant women.
• Persons with certain chronic medical conditions (such as asthma, heart disease, lung disease, metabolic disease such as diabetes, anemia and other blood disorders)—ask your doctor or nurse.
• Persons with suppressed immune systems (caused by disease or medication)—ask your doctor or nurse.
• Persons who live in nursing homes and other long-term care facilities.
• Children under 5 years of age.

Pneumococcal vaccine is recommended for:
• Adults >65 years old.
• Persons with serious long-term health problems (excluding asthma)—ask your doctor or nurse.
• Persons whose resistance to infection is lowered due to disease and immune suppression (including due to medications)—ask your doctor or nurse.
• Persons who are Alaskan Native or Native American.

HEPATITIS A
Hepatitis A is a liver disease caused by the hepatitis A virus (HAV). Hepatitis A–related death is rare. People can be infected with hepatitis A and not show signs and symptoms.

Regarding adults, the hepatitis A vaccination is recommended for:
• Persons who live in a community with a high rate of hepatitis A (no community in New Mexico is considered to have a high rate).
• Men who have sex with other men.
• IV drug users.
• Persons who travel to countries with high rates of hepatitis A (Central and South America; Mexico; Asia except Japan; Africa; and eastern Europe).
• Persons with chronic liver disease.
• Persons receiving blood products for blood clotting.
• Persons working with HAV-infected animals or working in an HAV research setting.
HEPATITIS B
Hepatitis B is a liver disease caused by the hepatitis B virus (HBV). Infection can be an acute and/or lifelong chronic disease. Hepatitis B can cause scarring of the liver (cirrhosis), liver cancer, and liver failure. Death resulting from infection occurs for 15%–25% of people chronically infected. About 30% of persons infected with HBV show no signs or symptoms.

Regarding adults, the hepatitis B vaccination is recommended for:

• Persons having sex with or living in the same household with a person who is HBV infected.
• Persons with multiple sex partners.
• Persons seeking/obtaining medical testing or treatment for sexually transmitted diseases, HIV, or drug use.
• Men who have sex with other men.
• IV drug users.
• Persons whose work involves contact with blood.
• Persons working or receiving care in an institution for the developmentally disabled.
• Persons on dialysis.
• Persons who have end-stage renal disease.
• HIV-infected persons.
• Persons with chronic liver disease.
• Persons living or traveling for more than 6 months in a year in countries where hepatitis B is common.
• Prisoners in a correctional facility.

MENINGOCOCCAL DISEASE
Meningococcal disease—infection of the bloodstream or meninges (membranes covering the brain and spinal cord)—is caused by meningococcal bacteria. The disease is rare in New Mexico, but some cases do occur. Meningococcal disease can lead to severe complications and death.

Regarding adults, the vaccination is recommended for:

• College students living in a dormitory.
• Military recruits.
• Persons who have a damaged spleen or spleen removed.
• Persons who have terminal complement deficiency (a deficiency of specific proteins that are part of the immune system).
• Microbiologists routinely exposed to the bacteria.
• Persons traveling or residing in countries where meningococcal disease is common (currently in parts of Africa).
• Any person exposed during an outbreak.

ZOSTER (SHINGLES)
Shingles is caused by the varicella zoster virus (VZV), which is the same virus that causes chickenpox. However, even if you’ve had chickenpox, because of how the virus resides in your body, you can still develop shingles. Persons whose immune systems are suppressed (from disease or drug therapy) and persons >50 years of age are at a higher risk than the general population for getting shingles. Shingles is a very painful illness. It sometimes (though very rarely) leads to severe complications and death. It is recommended that adults >60 years of age get vaccinated.

Table 1 shows the average annual incidence of selected vaccine-preventable diseases in New Mexico from 2002 to 2006.

Table 1. Average Annual Incidence of Selected Vaccine-Preventable Diseases, New Mexico, 2002–2006*

<table>
<thead>
<tr>
<th>Disease</th>
<th>Average number of cases</th>
<th>Average cases per 100,000 population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tetanus:</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Diphtheria:</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Pertussis:</td>
<td>156.2</td>
<td>8.1</td>
</tr>
<tr>
<td>Measles:</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Mumps:</td>
<td>1</td>
<td>0.1</td>
</tr>
<tr>
<td>Rubella:</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Pneumococcal disease:</td>
<td>301.8</td>
<td>15.6</td>
</tr>
<tr>
<td>Hepatitis A (acute):</td>
<td>25</td>
<td>1.3</td>
</tr>
<tr>
<td>Hepatitis B (acute):</td>
<td>49.4</td>
<td>2.6</td>
</tr>
<tr>
<td>Varicella (chickenpox):</td>
<td>232</td>
<td>11.8</td>
</tr>
</tbody>
</table>

* Annual averages for reported cases. Under-reporting can occur, particularly for varicella. Varicella became reportable in 2003, so averages are for 2004–2006 only. Data source: New Mexico Department of Health, Epidemiology and Response Division; obtained March 25, 2008 via personal communication.
REFERENCES
New Mexico Department of Health, Epidemiology and Response Division.

Information Disclaimer: The information provided in this article is intended only as general summary information to the public. The primary purpose of this information is educational. Nothing contained herein is, or should be considered or used, as a substitute for medical advice from a medical practitioner.