

## National Health and Medical Research Council recommendations on diphtheria vaccination

The National Health and Medical Research Council recommends diphtheria vaccination as part of the standard childhood vaccination schedule<sup>1</sup>. Primary vaccination is achieved with three doses of a diphtheria toxoid-containing vaccine at one to two monthly intervals, with boosters at 18 months and four to five years.

Prior to the eighth birthday DTP (diphtheria, tetanus, pertussis vaccine) should be given. If there is a genuine contraindication to pertussis vaccine DT (adsorbed diphtheria, tetanus vaccine, CDT paediatric formulation) should be used. After the eighth birthday, the adult formulation

(Td, ADT) should be given. The change to Td (ADT) (low dose diphtheria toxoid) after the eighth birthday is related to the reduced tolerance of older children and adults to diphtheria toxoid.

Older children who have not received diphtheria vaccination are also likely to have missed tetanus vaccination. Those who have not reached their eighth birthday should receive three injections of DTP (or DT, CDT) at intervals of one to two months, and those individuals who have passed their eighth birthday should receive three doses of Td (ADT) at intervals of two months.

The need for booster injections in adult life is unclear. However, as protective antibody levels wane with age, it is considered prudent for adults to have booster injections, which may be given as Td (ADT) vaccine, at 10 year intervals. Diphtheria can be a significant risk for travellers to some countries, so all international travellers should ensure that their Td (ADT) vaccination is current.

### Reference

1. National Health and Medical Research Council. *The Australian Immunisation Handbook*. Sixth edition. Canberra: Australian Government Publishing Service, 1997.