

## **Are We Following Evidence Based Guidelines for Pneumococcal and Zoster Vaccinations in Adults Living with HIV?**

Yehuda Eidensohn<sup>1</sup>, Diana Finkel DO<sup>2</sup>, and Steven Keller PhD<sup>3</sup>

<sup>1</sup>Rutgers New Jersey Medical School; <sup>2</sup>Department of Medicine, Rutgers New Jersey Medical School; <sup>3</sup>Department of Family Medicine, Emergency Medicine and Psychiatry, Rutgers New Jersey Medical School

**Background:** Adults living with HIV are at higher risk for severe zoster and pneumococcal infections than the general population. Multiple pneumococcal and zoster vaccines are available that can prevent morbidity and mortality. Vaccine uptake in the Infectious Disease clinic is unknown. We conducted a Quality Assurance study to determine what percentage of patients are vaccinated against zoster and pneumococcal infection in accordance with evidence-based guidelines.

**Methods:** A random sample of 50 charts were abstracted from adult patients receiving care in the Rutgers University Hospital Infectious Disease clinic between 1/1/2019 and 9/1/2021. Data collected included pneumococcal and zoster vaccination status, CD4 count, and HIV viral load. Guidelines reviewed for immunization of patients living with HIV included those of the National Institute of Health, Advisory Committee on Immunization Practices (ACIP), and the Infectious Disease Society of America (IDSA).

**Results:** Of the 50 selected patients, 43 were at least 50 years of age and eligible for zoster vaccination at the time of study initiation. Of these 43 patients, 2.3% [95% CI 0.12%, 13.8%] were vaccinated against zoster. For pneumococcal vaccines, all 50 patients were eligible for both PCV13 and PPSV23 vaccines. 64% [50.1%, 75.9%] were up to date with PCV13 and 38% [25.9%, 51.9%] with the PPSV23 vaccine.

**Conclusion:** Uptake of zoster and pneumococcal vaccines was comparable or better than available national data, although many adults remain unvaccinated. Factors that may contribute include vaccine shortages, workflow challenges, and changing guidelines.