



## PIC QUESTION OF THE WEEK: 04/17/06

Q: Can patients with systemic lupus receive hepatitis A vaccine?

A: Systemic lupus erythematosus, also known simply as lupus, is an autoimmune disorder that affects multiple organ systems and results in tissue damage and possible organ failure. Its cause is unknown. One of the most characteristic symptoms of lupus is the “butterfly” rash seen on the face. The onset of disease is frequently associated with fatigue, fever, joint pain, and hair loss. Lupus occurs most often in women of childbearing age. Disease course is characterized by cycles of remission and flares or periods of active, progressive disease. Since lupus is an autoimmune disorder, questions have been raised as to whether or not vaccination is appropriate for these patients. The benefits and risks of vaccination appear to be dependent on a number of factors including current disease activity; the patient’s immune status (including use of drugs such as immunosuppressives and/or prednisone); and the nature of the vaccine (live versus inactivated vaccine). Most rheumatologists agree that vaccinating a lupus patient who is in remission would pose no problem, regardless of the type of vaccine. There has been some concern over administering a live virus vaccine (for example influenza vaccine, nasal - Flumist® or measles/mumps/rubella vaccine) to lupus patients who are immunocompromised because of a theoretical risk of developing active infection or induction of flares of the disease. There are no case reports of any type of lupus patient developing infection after receiving live vaccines; however, a delay in immunization may be considered in immunosuppressed patients. In addition, there is little evidence to support the suggestion that disease will flare after injection of live vaccines. Some suggest that inactivated flu vaccines may not be sufficiently immunogenic in patients with active lupus; however, most rheumatologists consider the response to be adequate for protection. Other inactivated vaccines such as hepatitis A pose no risk of infection and produce an appropriate antibody response that provides effective prophylaxis. When questioning whether or not to vaccinate a patient with lupus, it is important to weigh the benefits and risks of vaccination in relation to the patient’s clinical status, nature of the vaccine, and current drug therapy.

### References:

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- The Lupus Foundation of Pennsylvania. <http://www.lupuspa.org> (accessed 2006 April 6).

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