

Vaccinations and IBD

Key points

- Most people with IBD should be up to date with vaccinations according to the Australian recommendations.
- Some medications that suppress your immune system are steroids (prednisolone), immunomodulators such as azathioprine, mercaptopurine, methotrexate, and biologics.
- Pregnant women on immunosuppressive therapies should avoid all live vaccines.
- If you are planning to travel, it is important to discuss this with your IBD team at least 6- 8 weeks prior to leaving about vaccines.

General Information Regarding Vaccination

In general, it is recommended that patients with IBD are up to date with vaccinations according to the [Australian recommendations](#).

Most vaccines are regarded as safe for all patients with IBD. However, some vaccines (“live vaccines”) contain ‘live’ weakened viruses to boost your immunity against those diseases as outlined in Table 1. Speak to your IBD team before receiving any of these vaccines to make sure you are safe. These are NOT recommended if you have already commenced medications that suppress the immune system. The vaccines can be safely given to patients with IBD at least 3 weeks before starting these medications. You can ask your doctor for a medical exemption letter for the vaccines you cannot receive.

Medications that suppress the immune system include:

- Steroids (prednisolone)
- Immunomodulators such as azathioprine, mercaptopurine, methotrexate
- Biologics such as infliximab, adalimumab, vedolizumab, ustekinumab, golimumab
- Tofacitinib
- Tacrolimus and cyclosporin

More information on all recommended vaccinations are available through the QR code below.

Table 1: Classification of Vaccines

<p>✗ = not recommended whilst on immunosuppressive therapy*</p> <p>Live Vaccines Against Viruses</p>	<p>✓ = safe whilst on immunosuppressive therapy</p> <p>Inactivated Vaccines Against Viruses</p>
<ul style="list-style-type: none"> ✗ Herpes zoster (Zostavax) ✗ Japanese encephalitis (depends on brand) ✗ Measles/mumps/rubella (MMR) ✗ Measles/mumps/rubella/varicella (MMRV) ✗ Rotavirus ✗ Rubella ✗ Varicella (chickenpox) ✗ Yellow fever ✗ Influenza- intranasal (FluMist) 	<ul style="list-style-type: none"> ✓ COVID-19 ✓ Hepatitis A ✓ Hepatitis B ✓ Human papilloma virus (HPV) ✓ Influenza (flu)- Injectable ✓ Inactivated poliomyelitis (IPV) ✓ Japanese encephalitis (depends on brand) ✓ Rabies ✓ Recombinant non-live Herpes Zoster (Shingrix)
<p>Live Vaccines Against Viruses</p>	<p>Inactivated Vaccines Against Viruses</p>
<ul style="list-style-type: none"> ✗ Oral typhoid ✗ Tuberculosis (BCG) 	<ul style="list-style-type: none"> ✓ Diphtheria-tetanus (dT) ✓ Diphtheria-tetanus-pertussis (dTpa) ✓ Haemophilus influenza type B (HiB) ✓ Injectable typhoid ✓ Meningococcal ✓ Oral cholera ✓ Pneumococcal (pneumonia) ✓ Q fever

*Discuss the timing of these vaccinations with your IBD team

Specific Situations Regarding Vaccination

Pregnant women on immunosuppressive therapies should avoid all live vaccines, including for measles/mumps/rubella (MMR), and should discuss other vaccines with their IBD team or GP.

Mothers on biologic therapies should discuss vaccination of their infant with their IBD team, as the medications taken during pregnancy can influence the safety of live vaccinations after birth. The main one affected on the schedule in Australia is rotavirus vaccine.

You can ask your doctor for a medical exemption letter for the vaccines you cannot receive. These include letters for yourself and your children (in the case of rotavirus

vaccine). This may increase your risk of acquiring the diseases you would be protected from otherwise.

Travel Vaccinations

If you are planning travel, it is important to discuss this with your IBD team and doctors in travel clinics at least 6-8 weeks prior to leaving. This allows for vaccinations to be given to you if required and/or advised by your doctors. It would be advisable to attend an expert travel clinic to ensure you are adequately prepared for the regions you plan on visiting on your trip.

- As outlined above, if you are on certain medications for your IBD that suppress the immune system, you may find you cannot take live vaccinations (table 1 above).
- Consider your travel destination carefully. If diseases that you cannot get vaccinated against are present in the country of your travel, you should consider choosing a different destination if possible.
- Carry a vaccination card with you on your travel.
- For helpful travel tips, see our separate [Travel and IBD](#) information sheet.

Some travel vaccines such as hepatitis A and rabies, whilst being safe, may not be as effective when taking medications for IBD due to a suppressed immune system. Discuss this with your doctors

For help or information

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