



Pneumococcal Vaccines

Revised: December 19, 2022.

Drug Levels and Effects

Summary of Use during Lactation

The Centers for Disease Control and Prevention and several health professional organizations state that vaccines given to a nursing mother do not affect the safety of breastfeeding for mothers or infants and that breastfeeding is not a contraindication to pneumococcal vaccine. Immunization of the mother during the third trimester of pregnancy markedly increases the amount of pneumococcal antibodies in breastmilk.[1] Breastfed infants should be vaccinated according to the routine recommended schedules.[2-4]

Drug Levels

Maternal Levels. A study followed mothers who received the 23-valent pneumococcal polysaccharide vaccine. It found that mothers who received the vaccination during pregnancy or within 72 hours postpartum had sIgA and IgG in their breastmilk that persisted for at least 7 months postpartum.[5]

Infant Levels. Relevant published information was not found as of the revision date.

Effects in Breastfed Infants

Limited data indicate that breastfeeding can enhance the response of the infant to certain vaccine antigens. [2,3,6,7]

Immunization of pregnant women with pneumococcal vaccine increased the specific secretory IgA content of milk and colostrum.[8-13] These antibodies in colostrum help inhibit epithelial adhesion of pneumococci to pharyngeal epithelial cells.[8] Some evidence of decreased pneumococcal disease has been found among breastfed infants of vaccinated mothers.[13] Infants breastfed for longer than 90 days have a better antibody response to some pneumococcal strains in the vaccine at 13 months of age than those breastfed less than 90 days.[14]

Effects on Lactation and Breastmilk

Relevant published information was not found as of the revision date.

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Substance Identification

Substance Name

Pneumococcal Vaccines

Drug Class

Breast Feeding

Lactation

Milk, Human

Vaccines