#### PNEUMOVAX 23- pneumococcal vaccine polyvalent injection, solution Merck Sharp & Dohme LLC

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HIGHLIGHTS OF PRESCRIBING INFORMATION These highlights do not include all the information needed to use PNEUMOVAX 23 safely and effectively. See full prescribing information for PNEUMOVAX 23.
PNEUMOVAX® 23 (pneumococcal vaccine polyvalent) Sterile, Liquid Vaccine for Intramuscular or Subcutaneous Injection Initial U.S. Approval: 1983
INDICATIONS AND USAGE
PNEUMOVAX 23 is a vaccine indicated for active immunization for the prevention of pneumococcal disease caused by the 23 serotypes contained in the vaccine (1, 2, 3, 4, 5, 6B, 7F, 8, 9N, 9V, 10A, 11A, 12F, 14, 15B, 17F, 18C, 19F, 19A, 20, 22F, 23F, and 33F). (1.1)
PNEUMOVAX 23 is approved for use in persons 50 years of age or older and persons aged $\geq$ 2 years who are at increased risk for pneumococcal disease. (1.1, 14.1)
DOSAGE AND ADMINISTRATION
Single 0.5-mL dose of PNEUMOVAX 23 administered intramuscularly or subcutaneously only. (2.2)
DOSAGE FORMS AND STRENGTHS
Clear, sterile solution supplied in a (0.5-mL dose) single-dose vial and a single-dose, prefilled syringe. (3)
Severe allergic reaction (e.g., anaphylaxis) to any component of PNEUMOVAX 23. (4.1)
<ul> <li>Use caution and appropriate care for individuals with severely compromised cardiovascular and/or pulmonary function in whom a systemic reaction would pose a significant risk. (5.2)</li> </ul>
ADVERSE REACTIONS
The most common adverse reactions, reported in >10% of subjects vaccinated with PNEUMOVAX 23 for the first time in a clinical trial, were: injection-site pain/soreness/tenderness (60.0%), injection-site

the first time in a clinical trial, were: injection-site pain/soreness/tenderness (60.0%), injection-site swelling/induration (20.3%), headache (17.6%), injection-site erythema (16.4%), asthenia and fatigue (13.2%), and myalgia (11.9%). (6.1)

# To report SUSPECTED ADVERSE REACTIONS, contact Merck Sharp & Dohme Corp., a subsidiary of Merck & Co., Inc., at 1-877-888-4231 or VAERS at 1-800-822-7967 or www.vaers.hhs.gov.

**DRUG INTERACTIONS** In a randomized clinical study, a reduced immune response to ZOSTAVAX® as measured by gpELISA was observed in individuals who received concurrent administration of PNEUMOVAX 23 and ZOSTAVAX compared with individuals who received these vaccines 4 weeks apart. Consider administration of the two vaccines separated by at least 4 weeks. (7.1, 14.3)

Pediatrics: PNEUMOVAX 23 is not approved for use in children younger than 2 years of age because children in this age group do not develop an effective immune response to capsular types contained in the polysaccharide vaccine. (8.4)

Geriatrics: For subjects aged 65 years or older in a clinical study systemic adverse reactions, determined by the investigator to be vaccine-related, were higher following revaccination (33.1%) than following initial vaccination (21.7%). Routine revaccination of immunocompetent persons previously vaccinated with a 23valent vaccine, is not recommended. (8.5)

Immunocompromised Individuals: Response to vaccination may be diminished. (5.4, 8.6)

#### See 17 for PATIENT COUNSELING INFORMATION and FDA-approved patient labeling. Revised: 4/2021

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## FULL PRESCRIBING INFORMATION

## **1 INDICATIONS AND USAGE**

## 1.1 Indications and Use

PNEUMOVAX<sup>®</sup> 23 is a vaccine indicated for active immunization for the prevention of pneumococcal disease caused by the 23 serotypes contained in the vaccine (1, 2, 3, 4, 5, 6B, 7F, 8, 9N, 9V, 10A, 11A, 12F, 14, 15B, 17F, 18C, 19F, 19A, 20, 22F, 23F, and 33F). PNEUMOVAX 23 is approved for use in persons 50 years of age or older and persons aged  $\geq$ 2 years who are at increased risk for pneumococcal disease.

## 1.2 Limitations of Use

PNEUMOVAX 23 will not prevent disease caused by capsular types of pneumococcus other than those contained in the vaccine.

## **2 DOSAGE AND ADMINISTRATION**

For intramuscular or subcutaneous injection only.

## 2.1 Preparation

- Parenteral drug products should be inspected visually for particulate matter and discoloration prior to administration. If either of these two conditions exists, the vaccine should not be administered.
- Do not mix PNEUMOVAX 23 with other vaccines in the same syringe or vial.
- Use a separate sterile syringe and needle for each individual patient to prevent transmission of infectious agents from one person to another. <u>Single-Dose Vial</u>

Withdraw 0.5 mL from the vial using a sterile needle and syringe free of preservatives, antiseptics, and detergents.

Single-Dose, Prefilled Syringe

The package does not contain a needle. Attach a sterile needle to the prefilled syringe by twisting in a clockwise direction until the needle fits securely on the syringe.

## 2.2 Administration

Administer PNEUMOVAX 23 intramuscularly or subcutaneously into the deltoid muscle or lateral mid-thigh. Do not inject intravascularly or intradermally.

## <u>Single-Dose Vial</u>

Administer a single 0.5-mL dose of PNEUMOVAX 23 using a sterile needle and syringe. Discard vial after use.

## Single-Dose, Prefilled Syringe

Administer the entire contents of the single-dose, prefilled syringe per standard protocol using a sterile needle. Discard syringe after use.

## 2.3 Revaccination

The Advisory Committee on Immunization Practices (ACIP) has recommendations for revaccination against pneumococcal disease for persons at high risk who were previously vaccinated with PNEUMOVAX 23. Routine revaccination of immunocompetent persons previously vaccinated with a 23-valent vaccine, is not recommended.

## **3 DOSAGE FORMS AND STRENGTHS**

PNEUMOVAX 23 is a clear, sterile solution supplied in a (0.5-mL dose) single-dose vial and a single-dose, prefilled syringe. *[See Description (11) and How Supplied/Storage and Handling (16).]* 

## **4 CONTRAINDICATIONS**

#### 4.1 Hypersensitivity

Do not administer PNEUMOVAX 23 to individuals with a history of anaphylactic/anaphylactoid or severe allergic reaction to any component of the vaccine. *[See Description (11).]* 

## **5 WARNINGS AND PRECAUTIONS**

#### 5.1 Persons with Moderate or Severe Acute Illness

Defer vaccination with PNEUMOVAX 23 in persons with moderate or severe acute illness.

## 5.2 Persons with Severely Compromised Cardiovascular or Pulmonary Function

Caution and appropriate care should be exercised in administering PNEUMOVAX 23 to individuals with severely compromised cardiovascular and/or pulmonary function in whom a systemic reaction would pose a significant risk.

## 5.3 Use of Antibiotic Prophylaxis

This vaccine does not replace the need for penicillin (or other antibiotic) prophylaxis against pneumococcal infection. In patients who require penicillin (or other antibiotic) prophylaxis against pneumococcal infection, such prophylaxis should not be discontinued after vaccination with PNEUMOVAX 23.

## 5.4 Persons with Altered Immunocompetence

Persons who are immunocompromised, including persons receiving immunosuppressive therapy, may have a diminished immune response to PNEUMOVAX 23. [See Use in Specific Populations (8.6).]

## 5.5 Persons with Chronic Cerebrospinal Fluid Leakage

PNEUMOVAX 23 may not be effective in preventing pneumococcal meningitis in patients who have chronic cerebrospinal fluid (CSF) leakage resulting from congenital lesions, skull fractures, or neurosurgical procedures.

## **6 ADVERSE REACTIONS**

The most common adverse reactions, reported in >10% of subjects vaccinated with

PNEUMOVAX 23 for the first time in a clinical trial, were: injection-site pain/soreness/tenderness (60.0%), injection-site swelling/induration (20.3%), headache (17.6%), injection-site erythema (16.4%), asthenia/fatigue (13.2%), and myalgia (11.9%). [See Adverse Reactions (6.1).]

## 6.1 Clinical Trials Experience

Because clinical trials are conducted under widely varying conditions, adverse reaction rates observed in the clinical trials of a vaccine cannot be directly compared to rates in the clinical trials of another vaccine and may not reflect the rates observed in practice.

## <u>Primary Vaccination and Revaccination with PNEUMOVAX 23 in Adults 50</u> <u>Years of Age or Older</u>

In a randomized, double-blind, placebo-controlled crossover clinical trial, subjects were enrolled in four different cohorts defined by age (50-64 years of age and ≥65 years of age) and vaccination status (no pneumococcal vaccination or receipt of a pneumococcal polysaccharide vaccine 3-5 years prior to the study). Subjects in each cohort were randomized to receive intramuscular injections of PNEUMOVAX 23 followed by placebo (saline containing 0.25% phenol), or placebo followed by PNEUMOVAX 23, at 30-day ( $\pm$ 7 days) intervals. The safety of an initial vaccination (first dose) was compared to revaccination (second dose) with PNEUMOVAX 23 for 14 days following each vaccination.

All 1008 subjects (average age, 67 years; 49% male and 51% female; 91% Caucasian, 4.7% African-American, 3.5% Hispanic, and 0.8% Other) received placebo injections.

Initial vaccination was evaluated in a total of 444 subjects (average age 65 years; 32% male and 68% female; 93% Caucasian, 3.2% African-American, 3.4% Hispanic, and 1.1% Other).

Revaccination was evaluated in 564 subjects (average age 69 years; 53% male and 47% female; 90% Caucasian, 3.5% Hispanic, 6.0% African-American, and 0.5% Other).

## Serious Adverse Experiences

In this study, 10 subjects had serious adverse experiences within 14 days of vaccination: 6 who received PNEUMOVAX 23 and 4 who received placebo. Serious adverse experiences within 14 days after PNEUMOVAX 23 included angina pectoris, heart failure, chest pain, ulcerative colitis, depression, and headache/tremor/stiffness/sweating. Serious adverse experiences within 14 days after placebo included myocardial infarction complicated with heart failure, alcohol intoxication, angina pectoris, and edema/urinary retention/heart failure/diabetes.

Five subjects reported serious adverse experiences that occurred outside the 14-day follow-up window: 3 who received PNEUMOVAX 23 and 2 who received placebo. Serious adverse experiences after PNEUMOVAX 23 included cerebrovascular accident, lumbar radiculopathy, and pancreatitis/myocardial infarction resulting in death. Serious adverse experiences after placebo included heart failure and motor vehicle accident resulting in death.

## Solicited and Unsolicited Reactions

Table 1 presents the adverse event rates for all solicited and unsolicited reactions

reported in  $\geq 1\%$  in any group in this study, without regard to causality.

The most common local adverse reactions reported at the injection site after initial vaccination with PNEUMOVAX 23 were pain/tenderness/soreness (60.0%), swelling/induration (20.3%), and erythema (16.4%). The most common systemic adverse experiences were headache (17.6%), asthenia/fatigue (13.2%), and myalgia (11.9%).

The most common local adverse reactions reported at the injection site after revaccination with PNEUMOVAX 23 were pain/soreness/tenderness (77.2%), swelling (39.8%), and erythema (34.5%). The most common systemic adverse reactions with revaccination were headache (18.1%), asthenia/fatigue (17.9%), and myalgia (17.3%). All of these adverse reactions were reported at a rate lower than 10% after receiving a placebo injection.

#### Table 1: Incidence of Injection-Site and Systemic Complaints in Adults ≥50 Years of Age Receiving Their First (Initial) or Second (Revaccination) Dose of PNEUMOVAX 23 (Pneumococcal Polysaccharide Vaccine, 23 Valent) or Placebo Occurring at ≥1% in Any Group

	PNEUMOVAX 23 Initial Vaccination N=444	PNEUMOVAX 23 Revaccination* N=564	Placebo Injection <sup>†</sup> N=1008
Number Followed for Safety	438	548	984 <sup>‡</sup>
	AE Rate	AE Rate	AE Rate
Injection-Site Complaints			
Solicited Events			
Pain/Soreness/Tenderness	60.0%	77.2%	7.7%
Swelling/Induration	20.3%	39.8%	2.8%
Erythema	16.4%	34.5%	3.3%
Unsolicited Events			
Ecchymosis	0%	1.1%	0.3%
Pruritus	0.2%	1.6%	0.0%
Systemic Complaints			
Solicited Events			
Asthenia/Fatigue	13.2%	17.9%	6.7%
Chills	2.7%	7.8%	1.8%
Myalgia	11.9%	17.3%	3.3%
Headache	17.6%	18.1%	8.9%
Unsolicited Events			
Fever <sup>§</sup>	1.4%	2.0%	0.7%
Diarrhea	1.1%	0.7%	0.5%
Dyspepsia	1.1%	1.1%	0.9%
Nausea	1.8%	1.8%	0.9%
Back Pain	0.9%	0.9%	1.0%
Neck Pain	0.7%	1.5%	0.2%

Upper Respiratory Infection	1.8%	2.6%	1.8%
Pharyngitis	1.1%	0.4%	1.3%

\* Subjects receiving their second dose of pneumococcal polysaccharide vaccine as PNEUMOVAX 23 approximately 3-5 years after their first dose.

† Subjects receiving placebo injection from this study combined over periods.

‡ The number of subjects receiving placebo followed for injection-site complaints. The

corresponding number of subjects followed for systemic complaints was 981.

§ Fever events include subjects who felt feverish in addition to subjects with elevated temperature.

In this clinical study an increased rate of local reactions was observed with revaccination at 3-5 years following initial vaccination.

For subjects aged 65 years or older, injection-site adverse reaction rate was higher following revaccination (79.3%) than following initial vaccination (52.9%). The proportion of subjects reporting injection site discomfort that interfered with or prevented usual activity or injection site induration  $\geq$ 4 inches was higher following revaccination (30.6%) than following initial vaccination (10.4%). Injection site reactions typically resolved by 5 days following vaccination.

For subjects aged 50-64 years, the injection-site adverse reaction rate for revaccinees and initial vaccinees was similar (79.6% and 72.8% respectively).

The rate of systemic adverse reactions was similar among both initial vaccinees and revaccinees within each age group. The rate of vaccine-related systemic adverse reactions was higher following revaccination (33.1%) than following initial vaccination (21.7%) in subjects 65 years of age or older, and was similar following revaccination (37.5%) and initial vaccination (35.5%) in subjects 50-64 years of age. The most common systemic adverse reactions reported after PNEUMOVAX 23 were as follows: asthenia/fatigue, myalgia and headache.

Regardless of age, the observed increase in post vaccination use of analgesics ( $\leq$ 13% in the revaccinees and  $\leq$ 4% in the initial vaccinees) returned to baseline by day 5.

## Sequential Administration of Prevnar 13 and PNEUMOVAX 23

In a randomized, double-blind, placebo-controlled, multicenter study, healthy adults, 50 years of age and older, received Prevnar 13 followed by PNEUMOVAX 23 either 8 weeks later (Group 1) or 26 weeks later (Group 2). Placebo was administered instead of PNEUMOVAX 23 at 26 weeks (Group 1) or 8 weeks (Group 2). Solicited injection site adverse reactions were evaluated during Days 1 through 5 postvaccination. Solicited systemic adverse reactions and any other adverse reactions were evaluated during Days 1 through 14 postvaccination, and any serious adverse events (SAEs) were collected throughout the study period (through Week 30). *[See Clinical Studies (14.2).]* 

Overall, subjects were a mean age of 64.2 years (range: 50 to 97 years). There were more females (n=219, 54.8%) than males (n=181, 45.3%). By race, 84.8% of subjects were White, 9.3% were Black or African-American, and 6.1% were other racial groups; the majority of subjects were not Hispanic or Latino (n=322, 80.5%).

#### **Serious Adverse Reactions**

There were 24 SAEs reported in 20 subjects (n=9 [4.5%] Group 1; n=11 [5.5%] Group 2). No SAEs were considered related to vaccination.

#### **Solicited Adverse Reactions**

Solicited injection site adverse reactions that occurred during Days 1 through 5 postvaccination with PNEUMOVAX 23, solicited systemic adverse reactions that occurred during Days 1 through 14, and fever that occurred during Days 1 through 5 postvaccination with PNEUMOVAX 23 are presented in Table 2. In this study, 81.4% of subjects in Group 1 and 64.0% of subjects in Group 2 reported at least 1 injection site adverse reaction from Days 1 through 5 postvaccination with PNEUMOVAX 23, and 64.9% of subjects in Group 1 and 54.9% of subjects in Group 2 reported at least 1 systemic adverse reaction from Days 1 through 14 postvaccination with PNEUMOVAX 23.

	Group 1* (Prevnar 13 -> PNEUMOVAX 23 -> Placebo)		Group 2 <sup>†</sup> (Prevnar 13 - Placebo -> PNEUMOVAX 2	
	n	(%)	n	(%)
Injection Site Adverse	Reactions			
Subjects in population with follow-up	188		164	
Any injection site reaction	153	(81.4)	105	(64.0)
Any Injection site pain <sup>‡</sup>	149	(79.3)	105	(64.0)
Mild	72	(38.3)	65	(39.6)
Moderate	65	(34.6)	36	(22.0)
Severe <sup>§</sup>	12	(6.4)	4	(2.4)
Any Injection site swelling	95	(50.5)	48	(29.3)
0 to <2.5 cm	28	(14.9)	19	(11.6)
≥2.5 to <5.1 cm	20	(10.6)	9	(5.5)
≥5.1 to <7.6 cm	20	(10.6)	10	(6.1)
≥7.6 to <10.2 cm	15	(8.0)	2	(1.2)
≥10.2 cm <sup>§</sup>	12	(6.4)	8	(4.9)
Any Injection site erythema	78	(41.5)	48	(29.3)
0 to <2.5 cm	26	(13.8)	20	(12.2)
≥2.5 to <5.1 cm	12	(6.4)	13	(7.9)
≥5.1 to <7.6 cm	12	(6.4)	6	(3.7)
≥7.6 to <10.2 cm	7	(3.7)	3	(1.8)
≥10.2 cm	19	(10.1)	6	(3.7)
Unknown [missing data]	2	(1.1)	0	(0.0)
Systemic Adverse Read	ctions			

## Table 2: Rates (%) of Solicited Injection Site Reactions Occurring on Days 1 to 5 After PNEUMOVAX 23 and Solicited Systemic Adverse Reactions Occurring on Days 1 to 14 After PNEUMOVAX

Subjects in population with follow-up	188		164	
Any systemic adverse reaction	122	(64.9)	90	(54.9)
Myalgia	93	(49.5)	70	(42.7)
Fatigue	59	(31.4)	45	(27.4)
Headache	46	(24.5)	30	(18.3)
Arthralgia	37	(19.7)	25	(15.2)
Subjects with temperature data <sup>¶</sup>	185		161	
Temperature ≥ 100.4°F	1	(0.5)	0	(0.0)

Every subject is counted a single time for each applicable row and column.

A specific adverse reaction appears in this table only if its incidence in one or more of the columns meets the incidence criterion in the table title, after rounding.

\* Group 1: 8-week interval between Prevnar 13 and PNEUMOVAX 23.

- † Group 2: 26-week interval between Prevnar 13 and PNEUMOVAX 23.
- ‡ Pain was characterized as mild, moderate or severe. (Mild: awareness of sign or symptom, but easily tolerated. Moderate: discomfort enough to cause interference with usual activity. Severe: incapacitating with inability to work or do usual activity).
- § One Group 1 subject with severe pain and swelling greater than 10.2 cm after receipt of PNEUMOVAX 23, went to the Emergency Room for medical attention.
- Percentages are calculated based on number of subjects with temperature data. Oral temperature was solicited on Days 1 to 5 after PNEUMOVAX 23 vaccination.

## 6.2 Post-Marketing Experience

The following list of adverse reactions includes those identified during post approval use of PNEUMOVAX 23. Because these reactions are reported voluntarily from a population of uncertain size, it is not always possible to reliably estimate their frequency or their causal relationship to product exposure.

General disorders and administration site conditions

Cellulitis Malaise Fever (>102°F) Warmth at the injection site Decreased limb mobility Peripheral edema in the injected extremity Injection-site necrosis

*Digestive System* Nausea Vomiting

Hematologic/Lymphatic Lymphadenitis Lymphadenopathy Thrombocytopenia in patients with stabilized idiopathic thrombocytopenic purpura Hemolytic anemia in patients who have had other hematologic disorders Leukocytosis Hypersensitivity reactions including Anaphylactoid reactions Serum Sickness Angioneurotic edema

Musculoskeletal System Arthralgia Arthritis

Nervous System Paresthesia Radiculoneuropathy Guillain-Barré syndrome Febrile convulsion

Skin Rash Urticaria Cellulitis-like reactions Erythema multiforme

*Investigations* Increased serum C-reactive protein

## **7 DRUG INTERACTIONS**

## 7.1 Concomitant Administration with Other Vaccines

In a randomized clinical study, a reduced immune response to ZOSTAVAX® as measured by gpELISA was observed in individuals who received concurrent administration of PNEUMOVAX 23 and ZOSTAVAX compared with individuals who received these vaccines 4 weeks apart. Consider administration of the two vaccines separated by at least 4 weeks. *[See Clinical Studies (14.3).]* 

Limited safety and immunogenicity data from clinical trials are available on the concurrent administration of PNEUMOVAX 23 and vaccines other than ZOSTAVAX.

## **8 USE IN SPECIFIC POPULATIONS**

## 8.1 Pregnancy

#### <u>Risk Summary</u>

All pregnancies have a background risk of birth defect, loss, or other adverse outcomes. In the U.S. general population, the estimated background risk of major birth defects and miscarriage in clinically recognized pregnancies is 2-4% and 15-20%, respectively.

Available human data from clinical trials of PNEUMOVAX 23 in pregnancy have not established the presence or absence of a vaccine-associated risk.

Developmental toxicity studies have not been conducted with PNEUMOVAX 23 in animals.

## 8.2 Lactation

#### Risk Summary

It is not known whether PNEUMOVAX 23 is excreted in human milk. Data are not available to assess the effects of PNEUMOVAX 23 on the breastfed infant or on milk production/excretion.

The developmental and health benefits of breastfeeding should be considered along with the mother's clinical need for PNEUMOVAX 23 and any potential adverse effects on the breastfed child from PNEUMOVAX 23 or from the underlying maternal condition. For preventive vaccines, the underlying maternal condition is susceptibility to the disease prevented by the vaccine.

## 8.4 Pediatric Use

PNEUMOVAX 23 is not approved for use in children less than 2 years of age. Children in this age group do not develop an effective immune response to the capsular types contained in this polysaccharide vaccine.

The ACIP has recommendations for use of PNEUMOVAX 23 in children 2 years of age or older, who have previously received pneumococcal vaccines, and who are at increased risk for pneumococcal disease.

## 8.5 Geriatric Use

In one clinical trial of PNEUMOVAX 23, conducted post-licensure, a total of 629 subjects who were aged  $\geq$ 65 years and 201 subjects who were aged  $\geq$ 75 years were enrolled.

In this trial, the safety of PNEUMOVAX 23 in adults 65 years of age and older (N=629) was compared to the safety of PNEUMOVAX 23 in adults 50 to 64 years of age (N=379). The subjects in this study had underlying chronic illness but were in stable condition; at least 1 medical condition at enrollment was reported by 86.3% of subjects who were 50 to 64 years old, and by 96.7% of subjects who were 65 to 91 years old. The rate of vaccine-related systemic adverse experiences was higher following revaccination (33.1%) than following primary vaccination (21.7%) in subjects  $\geq$ 65 years of age, and was similar following revaccination (37.5%) and primary vaccination (35.5%) in subjects 50 to 64 years of age.

Since elderly individuals may not tolerate medical interventions as well as younger individuals, a higher frequency and/or a greater severity of reactions in some older individuals cannot be ruled out.

Post-marketing reports have been received in which some elderly individuals had severe adverse experiences and a complicated clinical course following vaccination. Some individuals with underlying medical conditions of varying severity experienced local reactions and fever associated with clinical deterioration requiring hospital care.

## 8.6 Immunocompromised Individuals

Persons who are immunocompromised, including persons receiving immunosuppressive therapy, may have a diminished immune response to PNEUMOVAX 23.

## **11 DESCRIPTION**

PNEUMOVAX 23 (Pneumococcal Vaccine Polyvalent) is a sterile, liquid vaccine consisting of a mixture of purified capsular polysaccharides from *Streptococcus pneumoniae* types (1, 2, 3, 4, 5, 6B, 7F, 8, 9N, 9V, 10A, 11A, 12F, 14, 15B, 17F, 18C, 19F, 19A, 20, 22F, 23F, and 33F).

PNEUMOVAX 23 is a clear, colorless solution. Each 0.5-mL dose of vaccine contains 25 micrograms of each polysaccharide type in isotonic saline solution containing 0.25% phenol as a preservative. The vaccine is used directly as supplied. No dilution or reconstitution is necessary.

The vial stoppers, syringe plunger stopper and syringe tip cap are not made with natural rubber latex.

## **12 CLINICAL PHARMACOLOGY**

## 12.1 Mechanism of Action

PNEUMOVAX 23 induces type-specific antibodies that enhance opsonization, phagocytosis, and killing of pneumococci by leukocytes and other phagocytic cells. The levels of antibodies that correlate with protection against pneumococcal disease have not been clearly defined.

## **14 CLINICAL STUDIES**

#### **14.1 Effectiveness**

The protective efficacy of pneumococcal vaccines containing six (types 1, 2, 4, 8, 12F, and 25) or twelve (types 1, 2, 3, 4, 6A, 8, 9N, 12F, 25, 7F, 18C, and 46) capsular polysaccharides was investigated in two controlled studies in South Africa in male novice gold miners ranging in age from 16 to 58 years, in whom there was a high attack rate for pneumococcal pneumonia and bacteremia. In both studies, participants in the control groups received either meningococcal polysaccharide serogroup A vaccine or saline placebo. In both studies, attack rates for vaccine type pneumococcal pneumonia were observed for the period from 2 weeks through about 1 year after vaccination. Protective efficacy was 76% and 92%, respectively, for the 6- and 12-valent vaccines, for the capsular types represented.

Three similar studies in South African young adult male novice gold miners were carried out by Dr. R. Austrian and associates using similar pneumococcal vaccines prepared for the National Institute of Allergy and Infectious Diseases, with pneumococcal vaccines containing a 6-valent formulation (types 1, 3, 4, 7, 8, and 12) or a 13-valent formulation (types 1, 2, 3, 4, 6, 7, 8, 9, 12, 14, 18, 19, and 25) capsular polysaccharides. The reduction in pneumococcal pneumonia caused by the capsular types contained in the vaccines was 79%. Reduction in type-specific pneumococcal bacteremia was 82%.

A prospective study in France found a pneumococcal vaccine containing fourteen (types 1, 2, 3, 4, 6A, 7F, 8, 9N, 12F, 14, 18C, 19F, 23F, and 25) capsular polysaccharides to be 77% (95%CI: 51% to 89%) effective in reducing the incidence of pneumonia among male and female nursing home residents with a mean age of 74 (standard deviation of 4 years).

In a study using a pneumococcal vaccine containing eight (types 1, 3, 6, 7, 14, 18, 19, and 23) capsular polysaccharides, vaccinated children and young adults aged 2 to 25 years who had sickle cell disease, congenital asplenia, or undergone a splenectomy experienced significantly less bacteremic pneumococcal disease than patients who were not vaccinated.

In the United States, one post-licensure randomized controlled trial, in the elderly or patients with chronic medical conditions who received a 14-valent pneumococcal polysaccharide vaccine (types 1, 2, 3, 4, 6A, 8, 9N, 12F, 14, 19F, 23F, 25, 7F, and 18C), did not support the efficacy of the vaccine for nonbacteremic pneumonia.

A retrospective cohort analysis study based on the U.S. Centers for Disease Control and Prevention (CDC) pneumococcal surveillance system, showed 57% (95%CI: 45% to 66%) overall protective effectiveness against invasive infections caused by serotypes included in PNEUMOVAX 23 in persons  $\geq$ 6 years of age, 65 to 84% effectiveness among specific patient groups (e.g., persons with diabetes mellitus, coronary vascular disease, congestive heart failure, chronic pulmonary disease, and anatomic asplenia) and 75% (95%CI: 57% to 85%) effectiveness in immunocompetent persons aged  $\geq$ 65 years of age. Vaccine effectiveness could not be confirmed for certain groups of immunocompromised patients.

## 14.2 Immunogenicity

The levels of antibodies that correlate with protection against pneumococcal disease have not been clearly defined.

Antibody responses to most pneumococcal capsular types are generally low or inconsistent in children less than 2 years of age.

#### Sequential Administration of Prevnar 13 and PNEUMOVAX 23

In a randomized, double-blind, placebo-controlled, multicenter study, healthy adults, 50 years of age and older, received Prevnar 13 followed by PNEUMOVAX 23 either 8 weeks later (Group 1) or 26 weeks later (Group 2). Four hundred subjects were randomized 1:1 into Group 1 or Group 2, all of whom were initially vaccinated with Prevnar 13; of these, 188 subjects received PNEUMOVAX 23 (Group 1) and 185 subjects received placebo (Group 2) at Week 8, and 172 subjects received placebo (Group 1) and 164 subjects received PNEUMOVAX 23 (Group 2) at Week 26.

Opsonophagocytic activity (OPA) titers were measured at prevaccination, at Week 12 and at Week 30 for the 12 shared serotypes contained in both PNEUMOVAX 23 and Prevnar 13 (1, 3, 4, 5, 6B, 7F, 9V, 14, 18C, 19A, 19F, and 23F), 2 of the 11 serotypes unique to PNEUMOVAX 23 (22F and 33F), and 1 serotype unique to Prevnar 13 (6A). OPA testing was performed on evaluable serum samples from all subjects at baseline (Day 1) and Week 12, and on sera from a random subset of subjects (approximately 50% of subjects) at Week 30. Estimated GMTs, GMT ratio, and 95% confidence intervals were obtained from a constrained Longitudinal Data Analysis model {1}.

For each of the shared serotypes, Week 12 OPA geometric mean titers (GMTs) in Group 1 were noninferior to those of Group 2, as the lower bounds of the 95% CIs for the OPA GMT ratios were >0.5 for all 12 shared serotypes. For serotypes 22F and 33F, OPA GMTs in Group 1 at Week 12 were superior to those of Group 2 at Week 12, as the lower bounds of the 95% CIs for the OPA GMT ratios were >2.0 for both serotypes. The OPA GMTs to the 12 shared serotypes and 2 unique serotypes (22F and 33F) when measured 4 weeks after dosing with PNEUMOVAX 23 were generally similar between Group 1 (Week 12) and Group 2 (Week 30 subset).

## 14.3 Concomitant Administration with Other Vaccines

In a double-blind, controlled clinical trial, 473 adults, 60 years of age or older, were randomized to receive ZOSTAVAX and PNEUMOVAX 23 concomitantly (N=237), or PNEUMOVAX 23 alone followed 4 weeks later by ZOSTAVAX alone (N=236). At four weeks postvaccination, the varicella-zoster virus (VZV) antibody levels following concomitant use were significantly lower than the VZV antibody levels following nonconcomitant administration (GMTs of 338 vs. 484 gpELISA units/mL, respectively; GMT ratio = 0.70 (95% CI: [0.61, 0.80]).

Limited safety and immunogenicity data from clinical trials are available on the concurrent administration of PNEUMOVAX 23 and vaccines other than ZOSTAVAX.

## **15 REFERENCES**

 Liang KY, Zeger S. Longitudinal data analysis of continuous and discrete responses for pre-post designs. Sankhyā: The Indian Journal of Statistics (Series B) 2000; 62: 134-148.

## **16 HOW SUPPLIED/STORAGE AND HANDLING**

PNEUMOVAX 23 is supplied as follows:

**NDC** 0006-4943-00 — a box of 10 single-dose vials, color coded with a purple cap and stripe on the vial labels and cartons.

**NDC** 0006-4837-03 — a box of 10 single-dose, pre-filled Luer-Lok<sup>m</sup> syringes with tip caps, color coded with a violet plunger rod and purple stripe on the syringe labels and cartons.

## Storage and Handling

- Store at 2-8°C (36-46°F).
- All vaccine must be discarded after the expiration date.

The vial stoppers, syringe plunger stopper and syringe tip cap are not made with natural rubber latex.

## **17 PATIENT COUNSELING INFORMATION**

Advise the patient to read the FDA-approved patient labeling (Patient Information).

- Inform the patient, parent or guardian of the benefits and risks associated with vaccination.
- Tell the patient, parent or guardian that vaccination with PNEUMOVAX 23 may not offer 100% protection from pneumococcal infection.
- Provide the patient, parent or guardian with the vaccine information statements required by the National Childhood Vaccine Injury Act of 1986, with each immunization.

 Instruct the patient, parent or guardian to report any serious adverse reactions to their health care provider who in turn should report such events to the vaccine manufacturer or the U.S. Department of Health and Human Services through the Vaccine Adverse Event Reporting System (VAERS), 1-800-822-7967, or report online at www.vaers.hhs.gov.

Manuf. and Dist. by: Merck Sharp & Dohme Corp., a subsidiary of **MERCK & CO., INC.,** Whitehouse Station, NJ 08889, USA

For patent information: www.merck.com/product/patent/home.html

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uspi-v110-i-2104r044

#### Patient Information about PNEUMOVAX<sup>®</sup> 23 (pronounced "noo-mo-vax 23") Generic Name: pneumococcal vaccine polyvalent

Read this leaflet before you or your child gets the vaccine called PNEUMOVAX 23. If you have any questions about the vaccine after you read this, you should ask your health care provider. This is a summary only. It does not take the place of talking to your doctor, nurse or other health care provider about the vaccine. Only your health care provider can decide if PNEUMOVAX 23 is right for you or your child.

#### What is PNEUMOVAX 23?

PNEUMOVAX 23 is a vaccine that is given as a shot. It helps protect you from infection by certain germs or bacteria which are called pneumococcus (pronounced "noo-mo-cacus"). PNEUMOVAX 23 is for people 50 years of age and older. It is also for people who are 2 years of age and older if they have certain medical conditions that put them at increased risk for infection.

Illnesses or health problems may allow these germs to spread into the blood, lungs, or brain where they can cause serious diseases such as:

- An infection in the blood
- A lung infection (pneumonia) that can also come with an infection in the blood
- An infection of the coverings of the brain and spinal cord (meningitis).

PNEUMOVAX 23 may not protect everyone who gets it. It will not protect against diseases that are caused by bacteria types that are not in the vaccine.

## Who should not get PNEUMOVAX 23?

You should not get this vaccine if you (or your child):

- are allergic to any of its ingredients
- had an allergic reaction to PNEUMOVAX 23 in the past
- are less than 2 years old.

#### What should I tell my health care provider before getting PNEUMOVAX 23?

Tell your health care provider if you (or your child):

- are allergic to PNEUMOVAX 23
- have heart or lung problems
- have a fever
- have immune problems or are receiving radiation treatment for chemotherapy
- are pregnant or breast-feeding

#### How is PNEUMOVAX 23 given?

Most often, just one shot is given.

If you or your child is in a high-risk group for pneumococcal infection, then your health care provider will decide if it would be helpful to give a second shot of PNEUMOVAX 23 at a later time.

#### Can PNEUMOVAX 23 be given with other vaccines?

Talk to your health care provider if you plan to get ZOSTAVAX at the same time as PNEUMOVAX 23 because it may be better to get these vaccines at least 4 weeks apart.

Talk to your health care provider if you plan to get PNEUMOVAX 23 at the same time as other vaccines.

## What are the possible side effects of PNEUMOVAX 23?

The most common side effects are:

- pain, warmth, soreness, redness, swelling, and hardening at the injection site
- headache
- weakness, feeling tired
- muscle pain

Tell your health care provider or get emergency help right away if you get any of the following problems after vaccination because these may be signs of an allergic reaction or other serious conditions:

- difficulty breathing
- wheezing
- rash
- hives

Side effects at the site where you get the shot may be more common and may feel worse after a second shot than after the first shot.

Tell your health care provider if you or your child has a side effect that bothers you or that does not go away.

For a more complete list of side effects, ask your health care provider.

You may also report any side effect to your or your child's health care provider, or directly to the Vaccine Adverse Event Reporting System (VAERS). You may call the VAERS number 1-800-822-7967 at no charge, or report online to www.vaers.hhs.gov.

## What are the ingredients of PNEUMOVAX 23?

	Bacterial sugars from 23 pneumococcal types: 1, 2, 3, 4, 5, 6B,
Active Ingredients:	7F, 8, 9N, 9V, 10A, 11A, 12F, 14, 15B, 17F, 18C, 19F, 19A, 20,
	22F, 23F, and 33F
Inactive Ingredients:	Phenol (a preservative)

#### What else should I know about PNEUMOVAX 23?

Some adults and children have problems with leakage of spinal fluid after the skull is cracked or injured or after medical operations and this may increase their risk for pneumococcal infection. PNEUMOVAX 23 may not be able to prevent all of these infections.

The vial stoppers, syringe plunger stopper and syringe tip cap for PNEUMOVAX 23 are not made with natural rubber latex.

This leaflet is a summary of information about PNEUMOVAX 23. If you would like more information, talk to your health care provider. You can also call the Merck National Service Center at 1-800-622-4477.

Manuf. and Dist. by: Merck Sharp & Dohme Corp., a subsidiary of **MERCK & CO., INC.,** Whitehouse Station, NJ 08889, USA

For patent information: www.merck.com/product/patent/home.html

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usppi-v110-i-1912r040

## **PRINCIPAL DISPLAY PANEL - 5 Dose Vial Carton**

NDC 0006-4739-00

One 5-Dose Vial (0.5 mL/dose)

Pneumococcal Vaccine Polyvalent PNEUMOVAX<sup>®</sup> 23

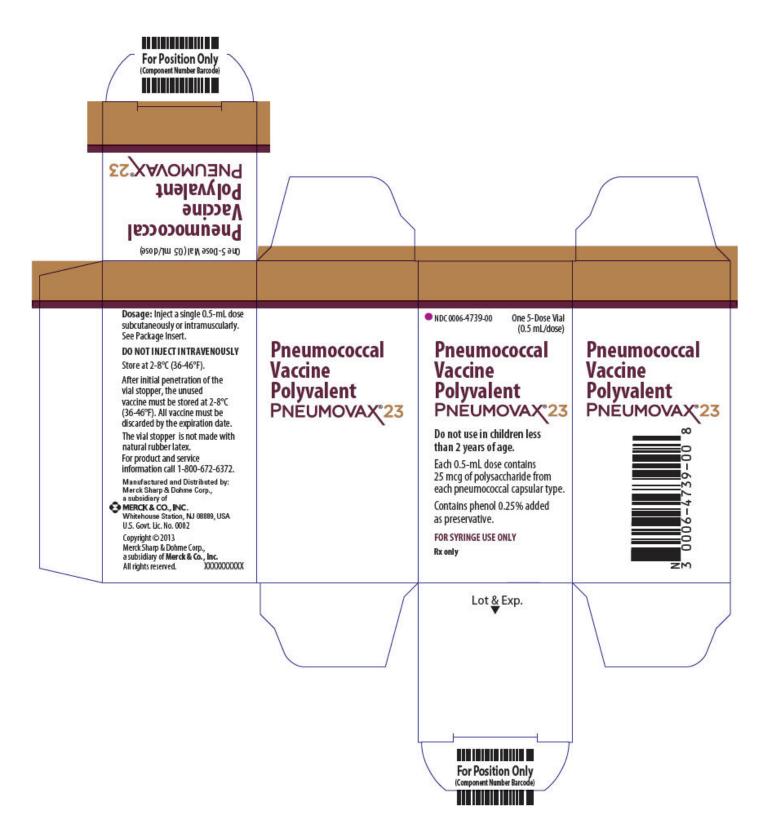
## Do not use in children less than 2 years of age.

Each 0.5-mL dose contains 25 mcg of polysaccharide from each pneumococcal capsular type.

Contains phenol 0.25% added as preservative.

## FOR SYRINGE USE ONLY

#### **Rx only**



## PRINCIPAL DISPLAY PANEL - 10 Dose Vial Carton

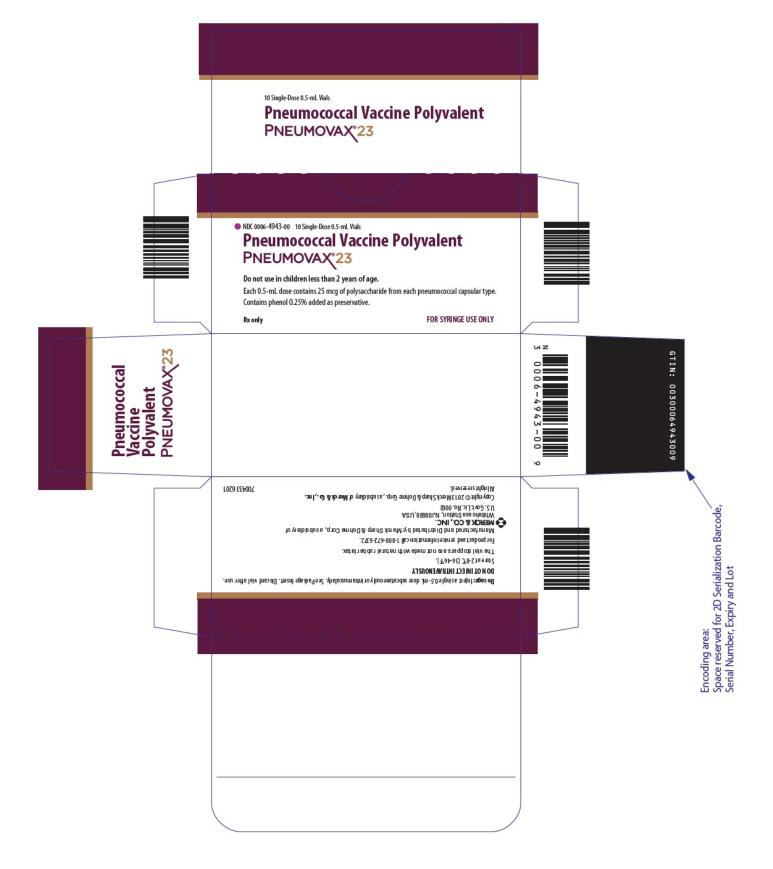
NDC 0006-4943-00 10 Single-Dose 0.5-mL Vials

Pneumococcal Vaccine Polyvalent PNEUMOVAX<sup>®</sup>23

## Do not use in children less than 2 years of age.

Each 0.5-mL dose contains 25 mcg of polysaccharide from each pneumococcal capsular type. Contains phenol 0.25% added as preservative.

#### Rx only FOR SYRINGE USE ONLY



## **PRINCIPAL DISPLAY PANEL - 0.5-mL Syringes Carton**

NDC 0006-4837-03

10 Single-dose 0.5-mL Syringes

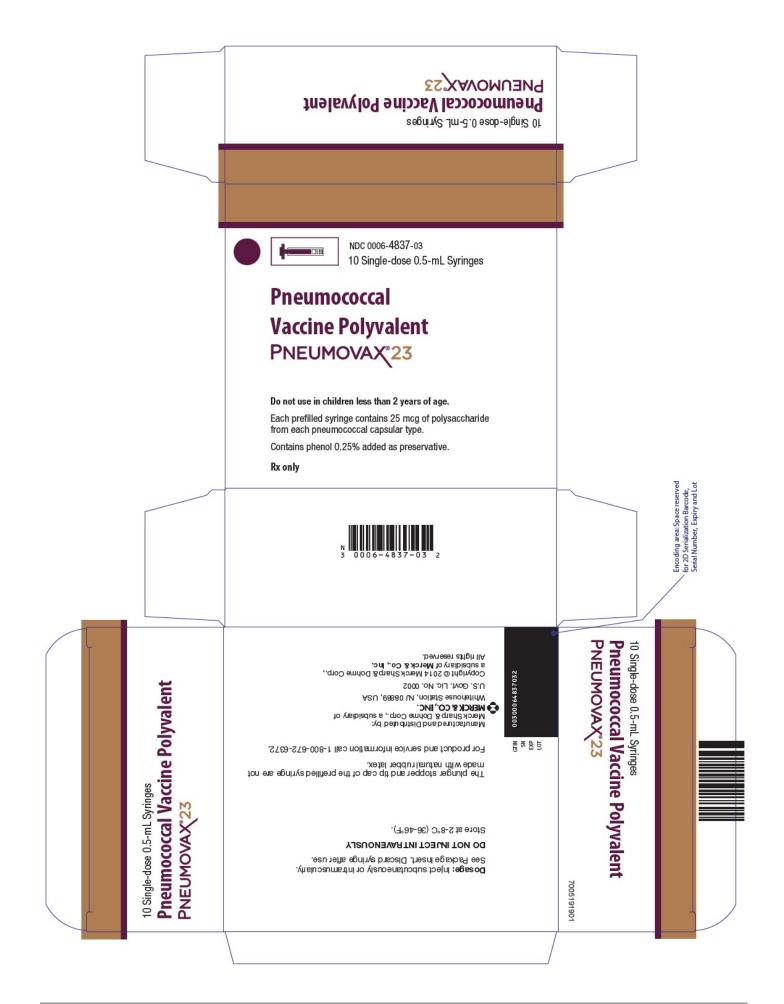
Pneumococcal Vaccine Polyvalent

## PNEUMOVAX<sup>®</sup>23

Do not use in children less than 2 years of age.

Each prefilled syringe contains 25 mcg of polysaccharide from each pneumococcal capsular type. Contains phenol 0.25% added as preservative.

## **Rx only**



PNEUMOVAX 23			
pneumococcal vaccine polyva	alent injection, solution		
Product Information			
Product Type	VACCINE	Item Code (Source)	NDC:0006-4739
Route of Administration	INTRAMUSCULAR, SUBCUTANEOUS	item coue (bource)	
	·		
Active Ingredient/Active	Moiety		
Ingree	lient Name	Basis of Strengt	h Strengt
STREPTOCOCCUS PNEUMONIAI POLYSACCHARIDE ANTIGEN (UN PNEUMONIAE TYPE 1 CAPSULAR PC UNII:H9NOI61UH1)	II: H9NOI61UH1) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 1 CAPSULAR POLYSACCHAR ANTIGEN	25 ug RIDE in 0.5 m
STREPTOCOCCUS PNEUMONIAI POLYSACCHARIDE ANTIGEN (UN PNEUMONIAE TYPE 2 CAPSULAR PC UNII:E11P4F3X4S)	II: E11P4F3X4S) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 2 CAPSULAR POLYSACCHAR ANTIGEN	25 ug RIDE in 0.5 m
STREPTOCOCCUS PNEUMONIAI POLYSACCHARIDE ANTIGEN (UN PNEUMONIAE TYPE 3 CAPSULAR PC UNII:4FVB62AFF1)	II: 4FVB62AFF1) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 3 CAPSULAR POLYSACCHAR ANTIGEN	25 ug RIDE in 0.5 m
STREPTOCOCCUS PNEUMONIAI POLYSACCHARIDE ANTIGEN (UN PNEUMONIAE TYPE 4 CAPSULAR PC UNII:CGS5KI3Q2M)	II: CGS5KI3Q2M) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 4 CAPSULAR POLYSACCHAF ANTIGEN	25 ug RIDE in 0.5 m
STREPTOCOCCUS PNEUMONIAI POLYSACCHARIDE ANTIGEN (UN PNEUMONIAE TYPE 5 CAPSULAR PC UNII:N8R9GL539D)	II: N8R9GL539D) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 5 CAPSULAR POLYSACCHAR ANTIGEN	25 ug RIDE in 0.5 m
STREPTOCOCCUS PNEUMONIAI POLYSACCHARIDE ANTIGEN (UN PNEUMONIAE TYPE 6B CAPSULAR P UNII:57F7254B6Q)	II: 57F7254B6Q) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 6B CAPSULAR POLYSACCHAI ANTIGEN	25 ug RIDE in 0.5 m
STREPTOCOCCUS PNEUMONIAI POLYSACCHARIDE ANTIGEN (UN PNEUMONIAE TYPE 7F CAPSULAR P UNII:X1K54R2P9I)	II: X1K54R2P9I) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 7F CAPSULAR POLYSACCHAR ANTIGEN	25 ug RIDE in 0.5 m
STREPTOCOCCUS PNEUMONIAI POLYSACCHARIDE ANTIGEN (UN PNEUMONIAE TYPE 8 CAPSULAR PC UNII:669818346F)	II: 669818346F) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 8 CAPSULAR POLYSACCHAR ANTIGEN	25 ug RIDE in 0.5 m
STREPTOCOCCUS PNEUMONIAI POLYSACCHARIDE ANTIGEN (UN PNEUMONIAE TYPE 9N CAPSULAR P UNII:313LJP87ET)	II: 313LJP87ET) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 9N CAPSULAR POLYSACCHAR ANTIGEN	25 ug RIDE in 0.5 m
STREPTOCOCCUS PNEUMONIAI POLYSACCHARIDE ANTIGEN (UN PNEUMONIAE TYPE 9V CAPSULAR P UNII:DL82PE6ANE)	II: DL82PE6ANE) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 9V CAPSULAR POLYSACCHAF ANTIGEN	25 ug RIDE in 0.5 m
STREPTOCOCCUS PNEUMONIAI POLYSACCHARIDE ANTIGEN (UN PNEUMONIAE TYPE 10A CAPSULAR UNII:328VNB72T8)	II: 328VNB72T8) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 10A CAPSULAR POLYSACCHAR ANTIGEN	25 ug RIDE in 0.5 m
STREPTOCOCCUS PNEUMONIAI POLYSACCHARIDE ANTIGEN (UN PNEUMONIAE TYPE 11A CAPSULAR UNII:N967BGT6XW)	II: N967BGT6XW) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 11A CAPSULAR POLYSACCHAR ANTIGEN	25 ug RIDE in 0.5 m
STREPTOCOCCUS PNEUMONIAI POLYSACCHARIDE ANTIGEN (UN PNEUMONIAE TYPE 12F CAPSULAR	II: S46U1CM432) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 12F CAPSULAR POLYSACCHAR	25 ug RIDE in 0.5 m

UNII:S46U1CM432		ANTIGEN		
	S PNEUMONIAE TYPE 14 CAPSULAR	STREPTOCOCCUS		
POLYSACCHARID	E ANTIGEN (UNII: G1GFK9898U) (STREPTOCOCCUS 14 CAPSULAR POLYSACCHARIDE ANTIGEN -	PNEUMONIAE TYPE : CAPSULAR POLYSAC ANTIGEN		g .5 mL
POLYSACCHARID	S PNEUMONIAE TYPE 15B CAPSULAR DE ANTIGEN (UNII: 667Y1EG6EW) (STREPTOCOCCUS E 15B CAPSULAR POLYSACCHARIDE ANTIGEN -	STREPTOCOCCUS PNEUMONIAE TYPE : CAPSULAR POLYSAC ANTIGEN		g .5 mL
POLYSACCHARID	S PNEUMONIAE TYPE 17F CAPSULAR DE ANTIGEN (UNII: 3RED79E75R) (STREPTOCOCCUS E 17F CAPSULAR POLYSACCHARIDE ANTIGEN -	STREPTOCOCCUS PNEUMONIAE TYPE I CAPSULAR POLYSAC ANTIGEN		g .5 mL
POLYSACCHARID	S PNEUMONIAE TYPE 18C CAPSULAR DE ANTIGEN (UNII: 23036553F6) (STREPTOCOCCUS E 18C CAPSULAR POLYSACCHARIDE ANTIGEN -	STREPTOCOCCUS PNEUMONIAE TYPE 2 CAPSULAR POLYSAC ANTIGEN		g .5 mL
POLYSACCHARID	S PNEUMONIAE TYPE 19F CAPSULAR DE ANTIGEN (UNII: 5K0VU709JD) (STREPTOCOCCUS E 19F CAPSULAR POLYSACCHARIDE ANTIGEN -	STREPTOCOCCUS PNEUMONIAE TYPE 2 CAPSULAR POLYSAC ANTIGEN		g .5 mL
POLYSACCHARID	S PNEUMONIAE TYPE 19A CAPSULAR E ANTIGEN (UNII: 9W2T4OSF98) (STREPTOCOCCUS E 19A CAPSULAR POLYSACCHARIDE ANTIGEN -	STREPTOCOCCUS PNEUMONIAE TYPE 2 CAPSULAR POLYSAC ANTIGEN		g .5 mL
POLYSACCHARID	S PNEUMONIAE TYPE 20 CAPSULAR DE ANTIGEN (UNII: V3FC0DK9XS) (STREPTOCOCCUS 20 CAPSULAR POLYSACCHARIDE ANTIGEN -	STREPTOCOCCUS PNEUMONIAE TYPE 2 CAPSULAR POLYSAC ANTIGEN		g .5 mL
POLYSACCHARID	S PNEUMONIAE TYPE 22F CAPSULAR DE ANTIGEN (UNII: 7NLV25LOSI) (STREPTOCOCCUS 22F CAPSULAR POLYSACCHARIDE ANTIGEN -	STREPTOCOCCUS PNEUMONIAE TYPE 2 CAPSULAR POLYSAC ANTIGEN		g .5 mL
POLYSACCHARID	S PNEUMONIAE TYPE 23F CAPSULAR DE ANTIGEN (UNII: PYD255827T) (STREPTOCOCCUS 23F CAPSULAR POLYSACCHARIDE ANTIGEN -	STREPTOCOCCUS PNEUMONIAE TYPE 2 CAPSULAR POLYSAC ANTIGEN		g .5 mL
POLYSACCHARID	S PNEUMONIAE TYPE 33F CAPSULAR DE ANTIGEN (UNII: 2MGG3XW1L2) (STREPTOCOCCUS 33F CAPSULAR POLYSACCHARIDE ANTIGEN - )	STREPTOCOCCUS PNEUMONIAE TYPE 3 CAPSULAR POLYSAC ANTIGEN		g .5 mL
Inactive Ingr	edients			
indenie ingi	Ingredient Name		Strength	
PHENOL (UNII: 33	-		Juengui	
Packaging				
# Item Code	Package Description	Marketing Start Date	Marketing Date	End
<b>1</b> NDC:0006- 4739-00	1 in 1 CARTON			
1 NDC:0006-	0.5 mL in 1 VIAL, MULTI-DOSE; Type 0: Not a			
4739-01	Combination Product			
	Information			

Category	Citation	Date	Date
BLA	BLA101094	07/07/1983	05/16/2015

alent injection, solution		
VACCINE	Item Code (Source) N	DC:0006-4943
INTRAMUSCULAR, SUBCUTANEOUS		
Moiety		
dient Name	Basis of Strength	Strength
III: H9NOI61UH1) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 1 CAPSULAR POLYSACCHARIE ANTIGEN	25 ug DE in 0.5 mL
III: E11P4F3X4S) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 2 CAPSULAR POLYSACCHARIE ANTIGEN	25 ug DE in 0.5 mL
III: 4FVB62AFF1) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 3 CAPSULAR POLYSACCHARIE ANTIGEN	25 ug DE in 0.5 mL
III: CGS5KI3Q2M) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 4 CAPSULAR POLYSACCHARIE ANTIGEN	25 ug DE in 0.5 mL
III: N8R9GL539D) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 5 CAPSULAR POLYSACCHARIE ANTIGEN	25 ug DE in 0.5 mL
III: 57F7254B6Q) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 6B CAPSULAR POLYSACCHARIE ANTIGEN	25 ug DE in 0.5 mL
III: X1K54R2P9I) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 7F CAPSULAR POLYSACCHARIE ANTIGEN	25 ug DE in 0.5 mL
III: 669818346F) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 8 CAPSULAR POLYSACCHARIE ANTIGEN	25 ug DE in 0.5 mL
III: 313LJP87ET) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 9N CAPSULAR POLYSACCHARIE ANTIGEN	25 ug DE in 0.5 mL
III: DL82PE6ANE) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 9V CAPSULAR POLYSACCHARIE ANTIGEN	25 ug DE in 0.5 mL
III: 328VNB72T8) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 10A CAPSULAR POLYSACCHARIE ANTIGEN	25 ug DE in 0.5 mL
		VACCINE       Item Code (Source)       NE         INTRAMUSCULAR, SUBCUTANEOUS       Rem Code (Source)       NE         INTRAMUSCULAR, SUBCUTANEOUS       Basis of Strength         INTRAMUSCULAR, SUBCUTANEOUS       STREPTOCOCCUS         INTRAMUSCULAR, SUBCUTANEOUS       STREPTOCOCCUS         INTRAMUSCULAR, STREPTOCOCCUS       STREPTOCOCCUS         DLYSACCHARIDE ANTIGEN -       STREPTOCOCCUS         NII: CGSSKI3Q2M) (STREPTOCOCCUS       STREPTOCOCCUS         DLYSACCHARIDE ANTIGEN -       STREPTOCOCCUS         NII: STRESAGBOJ (STREPTOCOCCUS       STREPTOCOCCUS         DLYSACCHARIDE ANTIGEN -       STREPTOCOCCUS         NII: STREPTS CAPSULAR       STREPTOCOCCUS         NII: STREPTS CAPSULAR       STREPTOCOCCUS         POLYSACCHARIDE ANTIGEN -       STREPTOCOCCUS         POLYSACCHARIDE ANTIGEN -       STREPTOCOCCUS         POLYSACCHARIDE ANTIGEN -       STREPTOCOCCUS         POLYSACCHARIDE ANTIGEN -       STREPTOCOCCUS         PNEUMONIAE TYPE 50 <t< td=""></t<>

POLYSACCHARIDE ANTIGEN (UNII: N967 PNEUMONIAE TYPE 11A CAPSULAR POLYSA UNII:N967BGT6XW)	, ,	PNEUMONIAE TYPE 1 CAPSULAR POLYSAC ANTIGEN	- · J
STREPTOCOCCUS PNEUMONIAE TYPE POLYSACCHARIDE ANTIGEN (UNII: S46U PNEUMONIAE TYPE 12F CAPSULAR POLYSA UNII:S46U1CM432)	1CM432) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 1 CAPSULAR POLYSAC ANTIGEN	- · J
STREPTOCOCCUS PNEUMONIAE TYPE POLYSACCHARIDE ANTIGEN (UNII: G1GF PNEUMONIAE TYPE 14 CAPSULAR POLYSAC UNII:G1GFK9898U)	K9898U) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 1 CAPSULAR POLYSAC ANTIGEN	
STREPTOCOCCUS PNEUMONIAE TYPE POLYSACCHARIDE ANTIGEN (UNII: 667Y PNEUMONIAE TYPE 15B CAPSULAR POLYSA UNII:667Y1EG6EW)	1EG6EW) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 1 CAPSULAR POLYSAC ANTIGEN	5
STREPTOCOCCUS PNEUMONIAE TYPE POLYSACCHARIDE ANTIGEN (UNII: 3RED PNEUMONIAE TYPE 17F CAPSULAR POLYSA UNII:3RED79E75R)	79E75R) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 1 CAPSULAR POLYSAC ANTIGEN	- · J
STREPTOCOCCUS PNEUMONIAE TYPE POLYSACCHARIDE ANTIGEN (UNII: 2303) PNEUMONIAE TYPE 18C CAPSULAR POLYSA UNII:23036553F6)	6553F6) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 1 CAPSULAR POLYSAC ANTIGEN	
STREPTOCOCCUS PNEUMONIAE TYPE POLYSACCHARIDE ANTIGEN (UNII: 5K0V PNEUMONIAE TYPE 19F CAPSULAR POLYSA UNII:5K0VU709JD)	U709JD) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 1 CAPSULAR POLYSAC ANTIGEN	
STREPTOCOCCUS PNEUMONIAE TYPE POLYSACCHARIDE ANTIGEN (UNII: 9W2T PNEUMONIAE TYPE 19A CAPSULAR POLYSA UNII:9W2T4OSF98)	40SF98) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 1 CAPSULAR POLYSAC ANTIGEN	
STREPTOCOCCUS PNEUMONIAE TYPE POLYSACCHARIDE ANTIGEN (UNII: V3FC) PNEUMONIAE TYPE 20 CAPSULAR POLYSAC UNII:V3FC0DK9XS)	0DK9XS) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 2 CAPSULAR POLYSAC ANTIGEN	· · J
STREPTOCOCCUS PNEUMONIAE TYPE POLYSACCHARIDE ANTIGEN (UNII: 7NLV. PNEUMONIAE TYPE 22F CAPSULAR POLYSA UNII:7NLV25LOSI)	25LOSI) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 2 CAPSULAR POLYSAC ANTIGEN	
STREPTOCOCCUS PNEUMONIAE TYPE POLYSACCHARIDE ANTIGEN (UNII: PYD2 PNEUMONIAE TYPE 23F CAPSULAR POLYSA UNII:PYD255827T)	55827T) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 2 CAPSULAR POLYSAC ANTIGEN	5
STREPTOCOCCUS PNEUMONIAE TYPE POLYSACCHARIDE ANTIGEN (UNII: 2MGC PNEUMONIAE TYPE 33F CAPSULAR POLYSA UNII:2MGG3XW1L2)	G3XW1L2) (STREPTOCOCCUS	STREPTOCOCCUS PNEUMONIAE TYPE 3 CAPSULAR POLYSAC ANTIGEN	5
Inactive Ingredients			
Ingredie	nt Name	9	Strength
PHENOL (UNII: 339NCG44TV)			
De else sin s			
Packaging			Na
# Item Code Packag	e Description	Marketing Start Date	Marketing End Date
NDC:0006-			
<b>1</b> 4943-00 10 in 1 CARTON			

Marketing In						
Marketing Category	Applicat	tion Number or Monograph Citation	M	arketing Start Date		ting End ate
BLA	BLA101094		07/0	7/1983		
PNEUMOVAX	23					
pneumococcal vac	cine polyva	lent injection, solution				
Product Inform	ation					
Product Type		VACCINE	It	em Code (Source	) NDC:	0006-4837
Route of Administ	ration	INTRAMUSCULAR, SUBCUTANEOUS				
Active Ingredie	nt/Active	Moiety				
		lient Name		Basis of Stre	ngth	Strength
	NEUMONIAE NTIGEN (UNI			STREPTOCOCCUS PNEUMONIAE TYPE 1 CAPSULAR POLYSAC ANTIGEN	L	25 ug in 0.5 mL
	NTIGEN (UNI	<b>TYPE 2 CAPSULAR</b> I: E11P4F3X4S) (STREPTOCOCCUS LYSACCHARIDE ANTIGEN -		STREPTOCOCCUS PNEUMONIAE TYPE 2 CAPSULAR POLYSAC ANTIGEN		25 ug in 0.5 mL
	NTIGEN (UNI	<b>TYPE 3 CAPSULAR</b> I: 4FVB62AFF1) (STREPTOCOCCUS LYSACCHARIDE ANTIGEN -		STREPTOCOCCUS PNEUMONIAE TYPE 3 CAPSULAR POLYSAC ANTIGEN	-	25 ug in 0.5 mL
	NTIGEN (UNI	<b>TYPE 4 CAPSULAR</b> I: CGS5KI3Q2M) (STREPTOCOCCUS LYSACCHARIDE ANTIGEN -		STREPTOCOCCUS PNEUMONIAE TYPE 4 CAPSULAR POLYSAC ANTIGEN		25 ug in 0.5 mL
	NTIGEN (UNI	<b>TYPE 5 CAPSULAR</b> I: N8R9GL539D) (STREPTOCOCCUS LYSACCHARIDE ANTIGEN -		STREPTOCOCCUS PNEUMONIAE TYPE 5 CAPSULAR POLYSAC ANTIGEN		25 ug in 0.5 mL
POLYSACCHARIDE A	NTIGEN (UNI	<b>TYPE 6B CAPSULAR</b> I: 57F7254B6Q) (STREPTOCOCCUS DLYSACCHARIDE ANTIGEN -		STREPTOCOCCUS PNEUMONIAE TYPE & CAPSULAR POLYSAC ANTIGEN		25 ug in 0.5 mL
	NTIGEN (UNI	<b>TYPE 7F CAPSULAR</b> I: X1K54R2P9I) (STREPTOCOCCUS DLYSACCHARIDE ANTIGEN -		STREPTOCOCCUS PNEUMONIAE TYPE 7 CAPSULAR POLYSAC ANTIGEN		25 ug in 0.5 mL
	NTIGEN (UNI	<b>TYPE 8 CAPSULAR</b> I: 669818346F) (STREPTOCOCCUS LYSACCHARIDE ANTIGEN -		STREPTOCOCCUS PNEUMONIAE TYPE & CAPSULAR POLYSAC ANTIGEN		25 ug in 0.5 mL
POLYSACCHARIDE A	NTIGEN (UNI	<b>TYPE 9N CAPSULAR</b> I: 313LJP87ET) (STREPTOCOCCUS DLYSACCHARIDE ANTIGEN -		STREPTOCOCCUS PNEUMONIAE TYPE S CAPSULAR POLYSAC ANTIGEN		25 ug in 0.5 mL
	NTIGEN (UNI	<b>TYPE 9V CAPSULAR</b> I: DL82PE6ANE) (STREPTOCOCCUS DLYSACCHARIDE ANTIGEN -		STREPTOCOCCUS PNEUMONIAE TYPE S CAPSULAR POLYSAC ANTIGEN		25 ug in 0.5 mL

# Item Code	Package Description		Marketing Start Date	Marketing End Date		
Packaging						
PHENOL (UNII: 339NCG4		Stren	yu			
Inactive Ingredients Ingredient Name Strength						
POLYSACCHARIDE ANT	EUMONIAE TYPE 33F CAPSULAR FIGEN (UNII: 2MGG3XW1L2) (STREPTOCO CAPSULAR POLYSACCHARIDE ANTIGEN -	CCUS PNEUM	TOCOCCUS IONIAE TYPE 33F JLAR POLYSACCHARI EN	25 ug DE in 0.5 mL		
POLYSACCHARIDE ANT	EUMONIAE TYPE 23F CAPSULAR FIGEN (UNII: PYD255827T) (STREPTOCOC CAPSULAR POLYSACCHARIDE ANTIGEN -	CUS PNEUM	TOCOCCUS IONIAE TYPE 23F JLAR POLYSACCHARI EN	25 ug DE in 0.5 mL		
POLYSACCHARIDE ANT	EUMONIAE TYPE 22F CAPSULAR FIGEN (UNII: 7NLV25LOSI) (STREPTOCOC CAPSULAR POLYSACCHARIDE ANTIGEN -	CUS PNEUM	TOCOCCUS IONIAE TYPE 22F JLAR POLYSACCHAR EN	25 ug DE in 0.5 mL		
POLYSACCHARIDE ANT	UMONIAE TYPE 20 CAPSULAR FIGEN (UNII: V3FC0DK9XS) (STREPTOCOC APSULAR POLYSACCHARIDE ANTIGEN -	CUS PNEUM	TOCOCCUS IONIAE TYPE 20 JLAR POLYSACCHAR EN	25 ug DE in 0.5 mL		
POLYSACCHARIDE ANT	UMONIAE TYPE 19A CAPSULAR FIGEN (UNII: 9W2T4OSF98) (STREPTOCOC CAPSULAR POLYSACCHARIDE ANTIGEN -	CCUS PNEUM	TOCOCCUS IONIAE TYPE 19A JLAR POLYSACCHARI EN	25 ug DE in 0.5 mL		
POLYSACCHARIDE ANT	UMONIAE TYPE 19F CAPSULAR FIGEN (UNII: 5K0VU709JD) (STREPTOCOC CAPSULAR POLYSACCHARIDE ANTIGEN -	CUS PNEUM	TOCOCCUS IONIAE TYPE 19F JLAR POLYSACCHARI EN	25 ug DE in 0.5 mL		
POLYSACCHARIDE ANT	<b>UMONIAE TYPE 18C CAPSULAR</b> FIGEN (UNII: 23036553F6) (STREPTOCOC CAPSULAR POLYSACCHARIDE ANTIGEN -	CUS PNEUM	TOCOCCUS IONIAE TYPE 18C JLAR POLYSACCHAR EN	25 ug DE in 0.5 mL		
POLYSACCHARIDE ANT	<b>UMONIAE TYPE 17F CAPSULAR</b> FIGEN (UNII: 3RED79E75R) (STREPTOCOC CAPSULAR POLYSACCHARIDE ANTIGEN -	CUS PNEUM	TOCOCCUS IONIAE TYPE 17F JLAR POLYSACCHAR EN	25 ug DE in 0.5 mL		
POLYSACCHARIDE ANT	EUMONIAE TYPE 15B CAPSULAR FIGEN (UNII: 667Y1EG6EW) (STREPTOCOC CAPSULAR POLYSACCHARIDE ANTIGEN -	CCUS PNEUM	TOCOCCUS IONIAE TYPE 15B JLAR POLYSACCHAR EN	25 ug DE in 0.5 mL		
POLYSACCHARIDE ANT	EUMONIAE TYPE 14 CAPSULAR FIGEN (UNII: G1GFK9898U) (STREPTOCOG APSULAR POLYSACCHARIDE ANTIGEN -	CCUS PNEUM	TOCOCCUS IONIAE TYPE 14 JLAR POLYSACCHARI EN	25 ug DE in 0.5 mL		
POLYSACCHARIDE ANT	UMONIAE TYPE 12F CAPSULAR FIGEN (UNII: S46U1CM432) (STREPTOCO CAPSULAR POLYSACCHARIDE ANTIGEN -	CCUS PNEUM	TOCOCCUS IONIAE TYPE 12F JLAR POLYSACCHARI EN	25 ug DE in 0.5 mL		
POLYSACCHARIDE ANT	EUMONIAE TYPE 11A CAPSULAR FIGEN (UNII: N967BGT6XW) (STREPTOCO CAPSULAR POLYSACCHARIDE ANTIGEN -	CCUS PNEUM	TOCOCCUS IONIAE TYPE 11A JLAR POLYSACCHAR EN	25 ug DE in 0.5 mL		
POLYSACCHARIDE ANT	UMONIAE TYPE 10A CAPSULAR FIGEN (UNII: 328VNB72T8) (STREPTOCOC CAPSULAR POLYSACCHARIDE ANTIGEN -	CUS PNEUM	TOCOCCUS IONIAE TYPE 10A JLAR POLYSACCHARI EN	25 ug DE in 0.5 mL		

-	Marketir Categor		Marketing Start Date	Marketing End Date		
			Markating Start			
Marketing Information						
1	NDC:0006- 4837-01	0.5 mL in 1 SYRINGE, GLASS; Type 3: Prefilled Biologi Device/System (syringe, patch, etc.)	nL in 1 SYRINGE, GLASS; Type 3: Prefilled Biologic Delivery ce/System (syringe, patch, etc.)			
-	NDC:0006- 4837-03	10 in 1 CARTON				

Labeler - Merck Sharp & Dohme LLC (118446553)

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Merck Sharp & Dohme LLC