



HEALTH AFFAIRS

THE ASSISTANT SECRETARY OF DEFENSE

WASHINGTON, DC 20301-1200

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MEMORANDUM FOR ASSISTANT SECRETARY OF THE ARMY (M&RA)
ASSISTANT SECRETARY OF THE NAVY (M&RA)
ASSISTANT SECRETARY OF THE AIR FORCE (MRAI&E)

SUBJECT: Policy for the Use of Varicella (Chickenpox) Vaccine

The Department of Defense policy shall be to immunize with varicella vaccine those military accessions and health care workers that are susceptible to infection with varicella-zoster virus (VZV). Susceptible recruits and other accessions shall receive a first dose of varicella vaccine within the first two weeks of training. Reserve Component personnel who receive the first dose of vaccine during initial military training shall receive the second dose of vaccine before separation at the completion of their initial military training.

Serologic screening of all military accessions is the preferred means of determining those who are susceptible to varicella infection and in need of vaccination. If serologic screening of all accessions is not feasible, accessions may be questioned for indicators of pre-existing immunity to varicella. Those accessions that do not have a personal history of varicella disease, documentation of prior receipt of varicella vaccine, or documentation of immunity based on prior serologic testing should either be identified as susceptible and immunized or be serologically screened and immunized as appropriate.

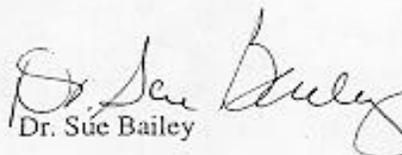
Susceptible health care workers shall receive varicella vaccine in accordance with the recommendations of the Advisory Committee on Immunization Practices (ACIP), Centers for Disease Control and Prevention. Susceptibility may be determined as described for military accessions recruits. Health care workers do not require routine postvaccination testing for antibodies to varicella. In addition, varicella vaccine shall be offered to other susceptible active duty military members, especially nonpregnant women of childbearing age and men living in households with young children.

VZV causes chickenpox and shingles. Immunity to varicella infection is necessary for military members, especially recruits and other accessions, because military training and military settings (e.g., barracks, aircraft, ships) are conducive to person-to-person spread of respiratory diseases like varicella. Although varicella is a common childhood disease, adults may experience more severe illness and have higher complication and case-fatality rates. Adults and adolescents require two doses of the currently licensed varicella vaccine given 4 to 8 weeks apart.

More detailed information and the recommendations for immunization that apply to children and other Military Health System beneficiaries may be found in the published

recommendations of the ACIP. "Prevention of Varicella: Updated Recommendations of the ACIP," *Morbidity and Mortality Weekly Report*, Vol. 48, No. RR-6, May 28, 1999, is available at <http://www.cdc.gov/epo/mmwr/preview/mmwrhtml/mm4806a1.htm>. The primary recommendation is "Prevention of Varicella: Recommendations of the ACIP," in *MMWR*, Vol. 45, No. RR-11, June 12, 1996, at <http://www.cdc.gov/epo/mmwr/preview/mmwrhtml/00042990.htm>.

This policy shall be included in Service plans and policies for immunization of military members and other health care beneficiaries. Any requests for additional funding to provide varicella vaccine should be forwarded through Service channels.


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cc:

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