

## Latex in Vaccine Packaging

“Immediate-type allergic reactions due to latex allergy have been described after vaccination, but such reactions are rare. If a person reports a severe anaphylactic allergy to latex, vaccines supplied in vials or syringes that contain natural rubber latex should be avoided if possible. If not, if the decision is made to vaccinate, providers should be prepared to treat immediate allergic reactions due to latex, including anaphylaxis. The most common type of latex hypersensitivity is a delayed-type (type 4, cell-mediated) allergic contact dermatitis. For patients with a history of contact allergy to latex, vaccines supplied in vials or syringes that contain dry natural rubber or natural rubber latex may be administered.”

(ACIP General Best Practice Guidelines for Immunization)

Vaccine (Trade Name)	Package Insert Date	Latex (Yes/No) <sup>(a)</sup>
Adenovirus	10/2019	No
Anthrax (Biothrax)	11/2015	Yes
BCG (Tice)	02/2009	No
Cholera (Vaxchora)	06/2016	No
Dengue (Dengvaxia)	06/2019	No
DT (Sanofi)	06/2018	No
DTaP (Daptacel)	01/2021 <sup>(b)</sup>	No
DTaP (Infanrix)	01/2021 <sup>(b)</sup>	Yes – Syringe, No – Vial
DTaP-IPV (Kinrix)	01/2021 <sup>(b)</sup>	Yes – Syringe, No – Vial
DTaP-IPV (Quadracel)	02/2021	No
DTaP-HepB-IPV (Pediatrix)	01/2021 <sup>(b)</sup>	Yes
DTaP-IPV/Hib (Pentacel)	12/2019	No
DTaP-IPV-Hib-HepB (Vaxelis)	10/2020	No
Ebola Zaire (ERVEBO)	01/2021 <sup>(b)</sup>	No
Hib (ActHIB)	05/2019	No
Hib (Hiberix)	04/2018	No
Hib (PedvaxHIB)	01/2021 <sup>(b)</sup>	Yes
Hep A (Havrix)	01/2021 <sup>(b)</sup>	Yes – Syringe , No – Vial
Hep A (Vaqta)	01/2021 <sup>(b)</sup>	Yes – Syringe, Yes – Vial
Hep B (Engerix-B)	01/2021 <sup>(b)</sup>	Yes – Syringe, No – Vial
Hep B (Recombivax)	12/2018	Yes – Syringe, Yes – Vial
Hep B (Heplisav-B)	05/2020	No
Hep A/Hep B (Twinrix)	01/2021 <sup>(b)</sup>	Yes
HPV (Gardasil 9)	08/2020	No
Influenza (Afluria) Quadrivalent <sup>(c)</sup>	07/2020	No
Influenza (Fluad) <sup>(c)</sup>	10/2020	No
Influenza (Fluad) Quadrivalent <sup>(c)</sup>	11/2020	No
Influenza (Fluarix) Quadrivalent <sup>(c)</sup>	07/2020	No
Influenza (Flublok) Quadrivalent <sup>(c)</sup>	06/2020	No
Influenza (Flucelvax) Quadrivalent <sup>(c)</sup>	03/2020	No
Influenza (Flulaval) Quadrivalent <sup>(c)</sup>	2020	No
Influenza (Fluzone) Quadrivalent <sup>(c)</sup>	2020	No
Influenza (Fluzone) High Dose <sup>(c)</sup>	2020	No
Influenza (FluMist) Quadrivalent <sup>(c)</sup>	08/2020	No

# Appendix B

Vaccine (Trade Name)	Package Insert Date	Latex (Yes/No) <sup>(a)</sup>
IPV (Ipol)	01/2021 <sup>(b)</sup>	No
Japanese Encephalitis (Ixiaro)	09/2018	No
MenACWY (Menactra)	04/2018	No
MenACWY(MenQuadfi)	01/2021 <sup>(b)</sup>	No
MenACWY (Menveo)	07/2020	No
MenB (Bexsero)	01/2021 <sup>(b)</sup>	Yes
MenB (Trumenba)	2018	No
MMR (M-M-R II)	12/2020	No
MMRV (ProQuad) (Frozen: Recombinant Albumin)	01/2021 <sup>(b)</sup>	No
PCV13 (Pevnar 13)	08/2017	No
PPSV-23 (Pneumovax)	09/2020	No
Rabies (Imovax)	10/2019	No
Rabies (RabAvert)	2018	No
Rotavirus (RotaTeq)	01/2021 <sup>(b)</sup>	No
Rotavirus (Rotarix)	01/2021 <sup>(b)</sup>	Yes
Smallpox (Vaccinia) (ACAM2000)	03/2018	No
Td (Tenivac)	11/2019	Yes – Syringe, No – Vial
Td (TDVAX)	09/2018	No
Tdap (Adacel)	12/2020	Yes <sup>(d)</sup> – Syringe, No – Vial
Tdap (Boostrix)	09/2020	Yes – Syringe, No – Vial
Typhoid (Typhim Vi)	03/2020	No
Typhoid (Vivotif Ty21a)	09/2013	No
Varicella (Varivax) Frozen	01/2021 <sup>(b)</sup>	No
Yellow Fever (YF-Vax)	02/2019	No
Zoster (Shingles) (Shingrix)	01/2021 <sup>(b)</sup>	No

**Abbreviations:** DT = diphtheria and tetanus toxoids; DTaP = diphtheria and tetanus toxoids and acellular pertussis; Hep A = Hepatitis A; Hep B = Hepatitis B; Hib = *Haemophilus influenzae* type b; HPV = human papillomavirus; IPV = inactivated poliovirus; LAIV = live, attenuated influenza vaccine; MenACWY = quadrivalent meningococcal conjugate vaccine; MenB = serogroup B meningococcal vaccine; MMR = measles, mumps, and rubella; MMRV = measles, mumps, rubella, varicella; PCV13 = pneumococcal conjugate vaccine; PI = Package Insert; PPSV23= pneumococcal polysaccharide vaccine; Td = tetanus and diphtheria toxoids; Tdap = tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis.

<sup>(a)</sup>All information was extracted from manufacturers' package inserts. The date shown in the Date column of the table is the edition date of the PI is use in February 2020. If in doubt about whether a PI has been updated since this table was prepared, check the FDA's website at: <http://www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/ucm093833.htm>

<sup>(b)</sup>The PI was not dated and this is the date the PI was reviewed for this table.

<sup>(c)</sup> All influenza vaccine in this table are 2020-21 northern hemisphere formulation.

<sup>(d)</sup>The most current PI (12/2020) indicates no latex in any presentation of Adacel. Previous PIs indicate tip caps of some lots of Adacel prefilled syringes contain latex while others do not. Check the package insert that came with your vaccine, if necessary.

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