



VACCINE: RUBELLA



1. Vaccine indication

Rubella vaccine is indicated for the active primary prevention of rubella in persons not previously infected with the rubella virus.

2. Rationale for vaccination

The primary objective of rubella vaccination is the prevention of infection with rubella virus, thereby preventing the occurrence of congenital rubella infection including congenital rubella syndrome (CRS), which is an important cause of deafness, blindness, and mental retardation.

3. Type of vaccine

Live-attenuated viral vaccine.

4. Composition of the vaccine

Rubella vaccine is developed from the live-attenuated RA 27/3 strain of rubella virus, prepared by serial passaging in human diploid cells. The vaccine is highly stable at -70°C . Potency is maintained for at least five years when the vaccine is stored at 4°C . The vaccine should be stored at 2°C to 8°C and be protected from light. The vaccine is available as a monovalent; a bivalent in combination with measles or mumps vaccines, MR; or a trivalent in combination with measles and mumps vaccines, MMR.

5. Immunogenicity of the vaccine

Following vaccination with the RA27/3 vaccine, immune response is the same as in natural infection. There is seroconversion in more than 95% of vaccinees. Immune response to revaccination depends on the response of the individual following initial vaccination. Nonresponders to initial vaccination generate primary immune response to revaccination with elevated levels of antibodies.

6. Efficacy and long-term protection

Rubella vaccine is very efficacious and studies have shown that about 97% of vaccinees remain seropositive up to 15 years following vaccination.

7. Candidates for vaccination

Rubella vaccine is not available as part of the EPI (SA) schedule, however there are persons who are at an increased risk of rubella virus infection and should be vaccinated. They include the following:

- Women of childbearing age
- Adolescents
- Childcare personnel
- Health care workers
- Military personnel

8. Vaccination regimen and route of administration

- Rubella vaccine is administered subcutaneously to the anterolateral aspect of the thigh for infants, or the deltoid muscle for older children and young adults
- Rubella vaccine is given to a separate limb is administered simultaneously with other vaccines
- The vaccine is administered as a monovalent; a bivalent, MR; or a trivalent MMR

9. Side effects and special precautions

Reactions to the rubella vaccine are usually mild, although in rare events, cases of allergic reaction to the vaccine have been observed. In such cases, vaccination should be discontinued. Rubella vaccine should not be given to persons with severe immune deficiency, and active tuberculosis. Asymptomatic HIV positive persons can be vaccinated.

Common side-effects following rubella vaccination include:

- Pain at the site of injection
- Fever that usually lasts for a day or two
- Rash lasting two days.

Where to find us:

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