

## Immunization Recommendations for Sexually Active People<sup>1,2</sup>



Vaccine	Vaccine Options and Schedule	Recommendations and Considerations <sup>1,3</sup>
<b>Hepatitis A (HepA)</b>	<ul style="list-style-type: none"> <li>▪ <b>Havrix<sup>®</sup>, Vaqta<sup>®</sup></b>: 2 doses, 6 months apart</li> <li>▪ <b>Twinrix<sup>®</sup></b> (combination HepA/HepB; if ages ≥ 18 years): 3 doses, 0, 1, and 6 months apart</li> </ul>	<ul style="list-style-type: none"> <li>▪ Adolescents not vaccinated as young children</li> <li>▪ Adults with <a href="#">risk factors</a>,<sup>4</sup> including:                             <ul style="list-style-type: none"> <li>▫ Men who have sex with men (MSM)<sup>2,5</sup></li> <li>▫ People with HIV (PWH)<sup>6</sup></li> <li>▫ People who use drugs</li> <li>▫ People experiencing homelessness</li> </ul> </li> </ul>
<b>Hepatitis B (HepB)</b>	<ul style="list-style-type: none"> <li>▪ <b>Heplisav-B<sup>®</sup></b> (if ages ≥ 18 years): 2 doses, 1 month apart</li> <li>▪ <b>Engerix-B<sup>®</sup></b> (if ages ≥ 18 years), <b>Recombivax HB<sup>®</sup></b>: 3 doses, 0, 1, and 6 months apart</li> <li>▪ <b>Twinrix<sup>®</sup></b> (combination HepA/HepB; if ages ≥ 18 years): 3 doses, 0, 1, and 6 months apart</li> </ul>	<ul style="list-style-type: none"> <li>▪ Adolescents not vaccinated as young children</li> <li>▪ Adults ages 19-59 years</li> <li>▪ Adults ages ≥ 60 years with <a href="#">risk factors</a>,<sup>4</sup> including:                             <ul style="list-style-type: none"> <li>▫ MSM<sup>5</sup></li> <li>▫ PWH<sup>7</sup></li> <li>▫ People who use drugs</li> <li>▫ People with sexual exposure risk</li> <li>▫ People who are incarcerated</li> </ul> </li> </ul>
<b>Human papillomavirus (HPV)</b>	<ul style="list-style-type: none"> <li>▪ <b>Gardasil 9<sup>®</sup></b>:                             <ul style="list-style-type: none"> <li>▫ ages 9-14 years: 2 doses, 6-12 months apart</li> <li>▫ ages 15-45 years: 3 doses, 0, 1-2, and 6 months apart</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>▪ Adolescents and young adults, starting at ages 11-12 years through age 26 years</li> <li>▪ Adults ages 27-45 years, based on shared clinical decision-making</li> </ul>
<b>Meningococcal A, C, W, Y conjugate (MenACWY)</b>	<ul style="list-style-type: none"> <li>▪ <b>MenQuadfi<sup>®</sup>, Menveo<sup>®</sup></b>:                             <ul style="list-style-type: none"> <li>▫ Adolescents: 2 doses (at ages 11-12 years and 16-18 years); 1 dose (if first dose at ages 16-18 years)</li> <li>▫ Adults at increased risk: 1 or 2 doses depending on risk factors.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>▪ Adolescents, starting at ages 11-12 years</li> <li>▪ Adults with <a href="#">risk factors</a>,<sup>4</sup> including:                             <ul style="list-style-type: none"> <li>▫ PWH (2 doses, 2 months apart)</li> <li>▫ MSM<sup>5,8</sup> (1 dose)</li> <li>▫ Transgender adults who have sex with men<sup>8</sup> (1 dose)</li> </ul> </li> </ul>
<b>Meningococcal B (MenB)</b>	<ul style="list-style-type: none"> <li>▪ <b>Bexsero<sup>®</sup></b>: 2 doses, 6 months apart</li> <li>▪ <b>Trumenba<sup>®</sup></b>: 2 doses, 6 months apart</li> </ul>	<ul style="list-style-type: none"> <li>▪ <a href="#">Adolescents and young adults</a> ages 16-23 years, based on shared clinical decision-making</li> </ul>
<b>Mpox virus<sup>9</sup></b>	<ul style="list-style-type: none"> <li>▪ <b>JYNNEOS<sup>®</sup></b>: 2 doses, 28 days apart</li> </ul>	<ul style="list-style-type: none"> <li>▪ Adults <a href="#">vulnerable</a> to or seeking added protection.</li> <li>▪ If &lt; 18 years, see <a href="#">Minor Consent for Mpox Treatment</a>.</li> </ul>

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## Resources and Special Considerations

1. **Comprehensive care** includes additional routine immunizations not listed above (see [Immunization Schedules | CDC](#)) and a review of both [STI](#) and [HIV](#) risk and prevention strategies (e.g., [doxy-PEP](#), [EPT](#), HIV [PEP/PrEP](#), [U=U/TasP](#)).
2. **California Minor Consent Law:** Adolescents ages  $\geq 12$  years can seek sexual health services without parental consent. See [California Minor Consent and Confidentiality Laws](#).
3. Vaccine doses administered  $\leq 4$  days before the minimum interval or age are considered valid. There is no maximum interval between vaccine doses. See [Recommended and minimum ages and intervals between vaccine doses | CDC](#).
4. For detailed **vaccine-specific risk factors**, see [Adult Immunization Schedule By Medical Indication | CDC](#).
5. See [Men Who Have Sex with Men | CDC](#).
6. **HepA:** Outbreaks & GI syndromes caused by enteric pathogens or common sexually transmitted infections (STIs) can occur among MSM sexual/social networks. See [Proctitis, Proctocolitis, and Enteritis | CDC](#) and [Shigella Infection Among GBMSM | CDC](#). **In people with HIV:** Check titers  $\geq 1$  month after series completion ([Prevention of Hep A Virus Infection in the United States | CDC](#)). If inadequate immune response, consider revaccination after CD4  $\geq 200$  cells/mm<sup>3</sup>. See [Immunizations for Preventable Diseases in Adults and Adolescents with HIV | NIH](#).
7. **HepB vaccination in people with HIV:** Clinicians may consider initial vaccination with double-dose recombinant HepB vaccines (Engerix-B® or Recombivax HB®). Check titers  $\geq 1$  month after series completion ([Who should receive post-vaccination testing? | CDC](#)). For revaccination options following inadequate immune response, see [Immunizations for Preventable Diseases in Adults and Adolescents with HIV | NIH](#).
8. **MenACWY:** [California Department of Public Health recommends MenACWY](#) for MSM and transgender people who have sex with men due to outbreaks of serogroup C invasive meningococcal disease. If a patient is receiving MenACWY and MenB vaccines at the same visit, [MenABCWY](#) (Penbraya™) may be given instead. If a patient receives Penbraya, which includes Trumenba, subsequent Men B dose(s) must include Trumenba since MenB brands are not interchangeable. The minimum interval between MenABCWY doses is 6 months.
9. **JYNNEOS®** can be given [intradermally or subcutaneously \(SC\)](#). If  $< 18$  years or with history of keloid scars, give SC. Rates of mpox are higher among GBMSM, transgender, and non-binary people, with a smaller number of cases among women and men who have sex with only women. See [How It Spreads | Mpox | CDC](#).