



Key points and updates

- The Australian Technical Advisory Group on Immunisation (ATAGI) has reviewed pneumococcal vaccines on the current childhood immunisation schedule. Based on ATAGI's advice, the government has made changes to the National Immunisation Program (NIP).
- From 1 September 2025, Prevenar 20 will be introduced into the NIP to replace Prevenar 13 and Pneumovax 23 on the childhood schedule.
- The introduction of Prevenar 20 simplifies the vaccine schedule, reduces the number of doses and covers more strains of the disease.
- All First Nations children will receive 4 doses, making the program consistent across all states and territories.
- From 1 September 2025, children under 5 years, who have:
 - not yet started their pneumococcal schedule should receive 3 doses of Prevenar 20.
 - previously received 1 or 2 doses of Prevenar 13 should receive Prevenar 20 for all subsequent doses to complete the recommended vaccination course (where required).
 - already completed a Prevenar 13 vaccination course who are due for a Pneumovax 23 booster should receive 1 dose of Prevenar 20 instead. Do not delay vaccination, if required, Pneumovax 23 can still be used (while stock is available).

About pneumococcal disease

Pneumococcal disease is caused by the bacterium *Streptococcus pneumoniae*. It can cause severe [invasive disease](#), including meningitis, pneumonia and bacteraemia, and non-invasive disease, including otitis media.

Who is most at risk of pneumococcal disease

Anyone can develop pneumococcal disease. Those at greatest risk of disease and severe outcomes are:

- Infants and children
- Aboriginal and Torres Strait Islander people
- Children, adolescents and adults with risk conditions for pneumococcal disease.

Who should receive Prevenar 20

Prevenar 20 vaccine doses are recommended for:

- All infants and children under 5 years
- Aboriginal and Torres Strait Islander infants and children under 5 years
- Children aged 2 to 12 months diagnosed with any risk conditions listed in the Australian Immunisation Handbook
- Children aged 12 months to less than 17 years newly diagnosed with any risk conditions listed in the Australian Immunisation Handbook.

ATAGI recommendations

Pneumococcal vaccine schedule for non-First Nations children

- Non-First Nations children who do not have health conditions that put them at risk, the current schedule of 2 doses plus 1 booster (2+1) will stay the same when using Prevenar 20.

Pneumococcal vaccine schedule for First Nations children

- All First Nations children should get 4 doses of Prevenar 20:
 - 3 primary doses plus 1 booster (called a 3+1 schedule).
 - This continues the current approach in NT, QLD, SA, and WA where First Nations children already get 4 doses.
 - In ACT, NSW, VIC, and TAS, an extra dose at 6 months will be added, making it 4 doses in total.
- This change is based on higher rates of disease in some First Nations communities, especially near state borders where different vaccine schedules were used.

Removing Pneumovax 23 from the childhood vaccine schedule

- Eligible children should receive 1 dose of Prevenar 20 instead of the Pneumovax 23 vaccine they are due next (i.e. a single dose of Prevenar 20 instead of dose 1 and 2 of Pneumovax 23 **OR** a single dose of Prevenar 20 instead of dose 2 of Pneumovax 23).

Childhood pneumococcal schedule

Age	Cohort	NIP-funded schedule
2–12 months	Non-First Nations children without risk conditions	Prevenar 20 at 2, 4 and 12 months of age
	All First Nations children and Children diagnosed with any risk conditions listed in the Australian Immunisation Handbook	Prevenar 20 at 2, 4, 6 and 12 months of age
≥ 12 months – ≤17 years	Children newly diagnosed with any risk conditions listed in the Australian Immunisation Handbook*	Prevenar 20 at diagnosis

*First Nations children who have received four PCV doses as part of their routine schedule do not require an additional dose of PCV.

Pneumococcal vaccine safety

Evidence from clinical trials found that Prevenar 20 is safe in children and has a similar safety profile to Prevenar 13.

The most common side effect at the injection site was pain. The rates of these local side effects were similar between the two vaccines: Prevenar 20 (25%–60%) and Prevenar 13 (27%–57%).

Contraindications

The only absolute contraindications to pneumococcal vaccines are:

- [anaphylaxis](#) after a previous dose of any pneumococcal vaccine
- anaphylaxis after any component of a pneumococcal vaccine

Adverse events or administration errors

You must notify all adverse events and vaccine administration errors through the reporting mechanisms in your state or territory.

Australian Immunisation Register

Vaccination providers can continue to report Prevenar 13 administrations to the Australian Immunisation Register (AIR) after 1 September 2025.

Prevenar 20 and Prevenar 13 will be considered equivalent vaccines within the AIR. This means that a child can receive either vaccine brand, in any sequence and they will be considered up-to-date for pneumococcal (in line with the AIR due and overdue rules).

Check the AIR before administering Prevenar 20. It is mandatory for you to report to the AIR all NIP vaccinations administered in Australia. This ensures that individuals have a complete and accurate record of their vaccinations.

For more information, go to servicesaustralia.gov.au/hpair.

Keep up to date

Read the advice in this factsheet in conjunction with the Australian Immunisation Handbook at immunisationhandbook.health.gov.au

Subscribe to the NIP update email update service. Search 'NIP updates' on health.gov.au.

State and territory health department contact numbers:			
ACT	02 5124 9800	SA	1300 232 272
NSW	1300 066 055	TAS	1800 671 738
NT	08 8922 8044	VIC	immunisation@health.vic.gov.au
WA	08 9321 1312	QLD	Contact your local Public Health Unit