

Excerpts from peer-reviewed abstracts concerning breakthrough varicella disease among vaccinees and the importance of exogenous re-exposures

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Abstract

When the varicella vaccine was licensed by the Food and Drug Administration (FDA) on March 17, 1965 cost-benefit analyses that had been previously performed concerning the universal varicella vaccination program assumed there would be no deleterious effects on the closely related herpes zoster (shingles, HZ) epidemiology and that a single dose would confer life-long immunity. Physicians debated whether or not outside or exogenous exposures to varicella played a significant role in boosting cell-mediated immunity to help suppress the reactivation of HZ. As early as 1965, Dr. Hope-Simpson suggested that the curve of increasing HZ incidence with advancing age might have some correlation to the “frequency with which the different age groups encounter cases of varicella.” Several epidemiological studies in recent years have demonstrated such a correlation.

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