Some factors that affect your health are outside of your control. However, many important risk factors are within your power to change. This includes getting shots, called vaccinations, that help protect you from certain illnesses. Vaccines are some of the safest therapies around. Although all therapies, including vaccines, pose the rare chance of serious side effects, for most people, the risks from the diseases are far greater than the risks from the vaccines. Contact your healthcare provider or local health department for a list of doctors who give these shots. Your city or county health department or local hospital may operate clinics that provide these vaccines. The American Geriatrics Society's Health in Aging Foundation recommends the following vaccinations for most older adults.

### Flu Shot

<table>
<thead>
<tr>
<th>What it does</th>
<th>Protects against annual influenza viruses.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who needs it</td>
<td>The Centers for Disease Control and Prevention (CDC) recommends any type of flu shot licensed for persons aged ≥65 years (standard or high-dose, adjuvanted or unadjuvanted or recombinant influenza vaccines). Two new influenza vaccines, Fluzone High-Dose Quadrivalent and Flud Quadrivalent, are licensed for persons aged 65 years and older. While everyone should get a flu vaccine, the CDC notes that it is especially important for the following people to get flu shots because they are at high risk for having serious flu-related complications: anyone who is 65 years of age or older; nursing home residents; and people with serious health conditions such as heart disease, diabetes, asthma, lung disease or HIV. Caregivers for older adults should also get vaccinated to avoid spreading the flu.</td>
</tr>
<tr>
<td>Who should not get it</td>
<td>People who have had allergic reactions to flu shots in the past, or have been diagnosed with Guillain-Barre Syndrome.</td>
</tr>
<tr>
<td>When to get it</td>
<td>Because new strains of the flu develop constantly, the flu vaccine must be given yearly. You should get your flu shot in the fall.</td>
</tr>
</tbody>
</table>

### Pneumococcal Shot

<table>
<thead>
<tr>
<th>What it does</th>
<th>Protects against pneumococcal bacteria, which can cause pneumonia and blood and brain infections.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who needs it</td>
<td>Anyone 65 years or older.</td>
</tr>
<tr>
<td>When to get it</td>
<td>Ask your healthcare provider. Two different types of pneumococcal vaccine are available. They are called pneumococcal conjugate vaccine (PCV)13 and pneumococcal polysaccharide vaccine (PPSV)23. The decision to receive PCV13 is now based on shared decision making between the patient and provider.</td>
</tr>
</tbody>
</table>
**Tetanus/Diphtheria Shot**

**What it does**
Protects against two potentially deadly bacterial infections. A second, and different, form of the vaccine (called “Tdap”) protects against tetanus, diphtheria, and pertussis (whooping cough).

**Who needs it**
Everyone. It is now recommended to get a one-time dose of the Tdap version if you are 65 or older to be protected from whooping cough.

**When to get it**
Once every 10 years.

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**Shingles (Herpes Zoster) Shot**

**What it does**
The Recombinant Zoster Vaccine (RZV) and the older live zoster vaccine protect against the development of shingles. The recombinant zoster vaccine reduces the risk by 97% in persons 50 years of age or older, and about 90% in persons 70 years of age or older. The RZV protects against the development of chronic pain from shingles (also called postherpetic neuralgia), reducing the risk by 85% in persons 70 years of age or older. The live zoster vaccine is no longer available in the United States.

**Who needs it**
The CDC recommends the recombinant zoster vaccine over the live zoster vaccine for persons age 50 years and older.

**Who should not get it**
People who have a history of a severe allergic reaction to any component of the vaccine.

**When to get it**
The recombinant zoster vaccine requires two doses with the second dose given any time between 2-6 months after the first dose. If more than 6 months have elapsed since the first dose, it’s okay to get the second dose at the next available time. There is no need to restart the series.

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The Centers for Disease Control and Prevention (CDC) also recommends additional shots for older adults who run an increased risk of these diseases because they have certain health problems, occupations, or lifestyles. These include the Measles, Mumps, Rubella (MMR) vaccination, and shots for Varicella, Hepatitis A and B, and Meningococcal disease. Ask your healthcare provider if you should get any of these additional shots.

For additional information, visit the CDC website at www.cdc.gov.