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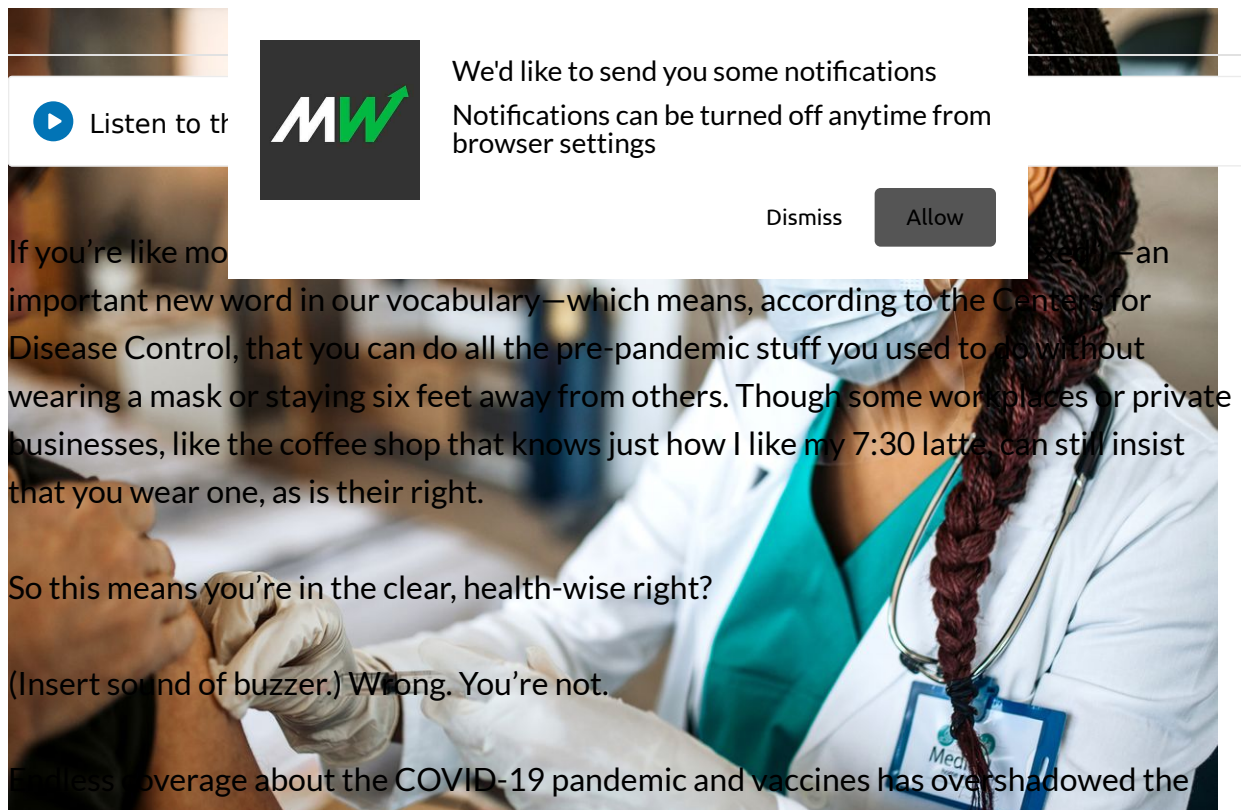
Got your COVID-19 vaccine? Now roll up your sleeve to protect yourself against these other diseases

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By [Paul Brandus](#)

Here are all the other vaccines you should check out



fact that there are plenty of other, more common health threats out there that haven't exactly gone away over the past year or so.

AARP recommends that you focus on the following:

Influenza: Flu season runs from fall to spring, and (along with children under age 5 and particularly infants), older people are at greater risk. A vaccination isn't a guarantee against getting the flu, but it will lower your odds of falling ill by as much as 60%. Since it takes about two weeks for a vaccine to take hold in your body, get vaccinated as soon as possible this fall.

Shingles: "I wouldn't wish it on my worst enemy," says one person I know who got it. "It's that painful." It's also incredibly common: One in three people will get it, usually after age 50, and the older you get, the odds worsen. If you're older than 50, the CDC recommends that you get a new vaccine—Shingrix—even if you've gotten a prior vaccine—Zostavax—which isn't as effective.

[Read: How to avoid these common retirement pitfalls](#)

Meantime, here's a question for you: Did you have chicken pox as a kid? Then "congratulations:" shingles, which comes from the same virus, has been in your body for decades, and could hit you anytime, particularly if your immune system has been weakened by stress, medication or another disease. Don't know whether you got chicken

pox? Notes AAR
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Pneumonia: The CDC estimates that pneumococcal pneumonia kills approximately 1 in 20 older adults who get it, so if you're over 65, you need to be vaccinated. But if you're younger and have risk factors like smoking, lung or heart disease, leukemia, lymphoma or alcoholism, you need to be vaccinated as well.

The CDC recommends two [pneumococcal vaccines](#). If you fall into the first group—the 65+ crowd—you should get a dose of what's called pneumococcal conjugate vaccine (PCV13), followed by a dose of pneumococcal polysaccharide vaccine (PPSV23) one year later. But if you're in the second group—someone younger with one of the risk categories—you should get one dose each of PCV13 and PPSV23 as soon as possible, with eight weeks in between. As always, consult your healthcare provider.

Tdap (tetanus, diphtheria, pertussis) vaccine and/or the Td (tetanus, diphtheria)

booster: This wonder vaccine protects you against many things, including whooping cough (a.k.a. pertussis), which has been on the rise in the United States. You only need the basic Tdap vaccine once, but the Td booster every 10 years after that. The vaccine is particularly important, [AARP says](#), if you come into close contact with infants younger than 12 months of age. But first consult your doctor if you have epilepsy or other nervous system problems, have ever experienced swelling or pain after a previous dose of either vaccine, or have (or have had) Guillain-Barré syndrome.

Hepatitis A and B: Hepatitis A is a liver infection which tends to strike people 50 and over, but primarily those who travel to countries where transmission is more common. Check with your doctor.

Meantime, Hepatitis B, also a liver infection, can be transmitted when body fluids are shared between one person who is infected and someone who is not. This can happen through sexual contact (blood, semen, saliva), or coming into contact with someone else's blood (an open sore, perhaps), or by the sharing of things as innocuous as a toothbrush or razor blade.

[Read: Will we need COVID-19 booster shots?](#)

COVID-19: Of course, millions of Americans still haven't (presumably) not opposed to getting vaccinated. Not out COVID-19? Nearly 100 million people have died over the past year and counting. The vaccines work. Please do yourself and your loved ones a favor and get vaccinated.



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