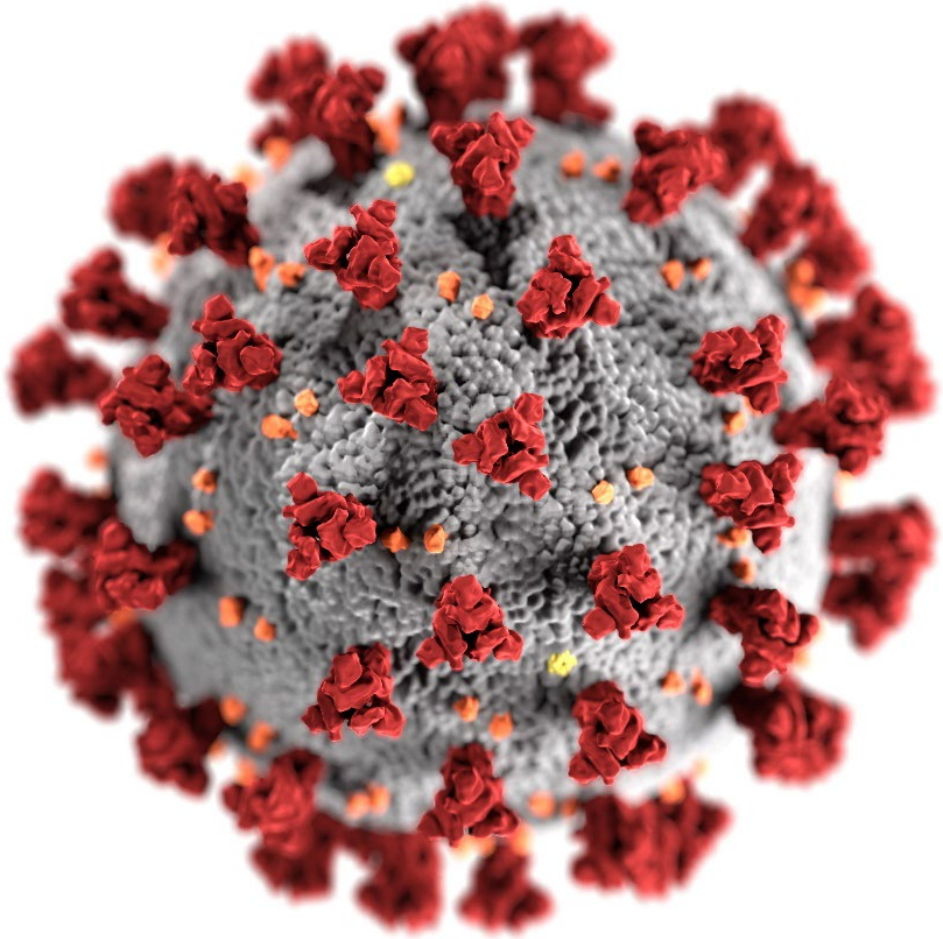
ACIP COVID-19 Vaccines Work Group

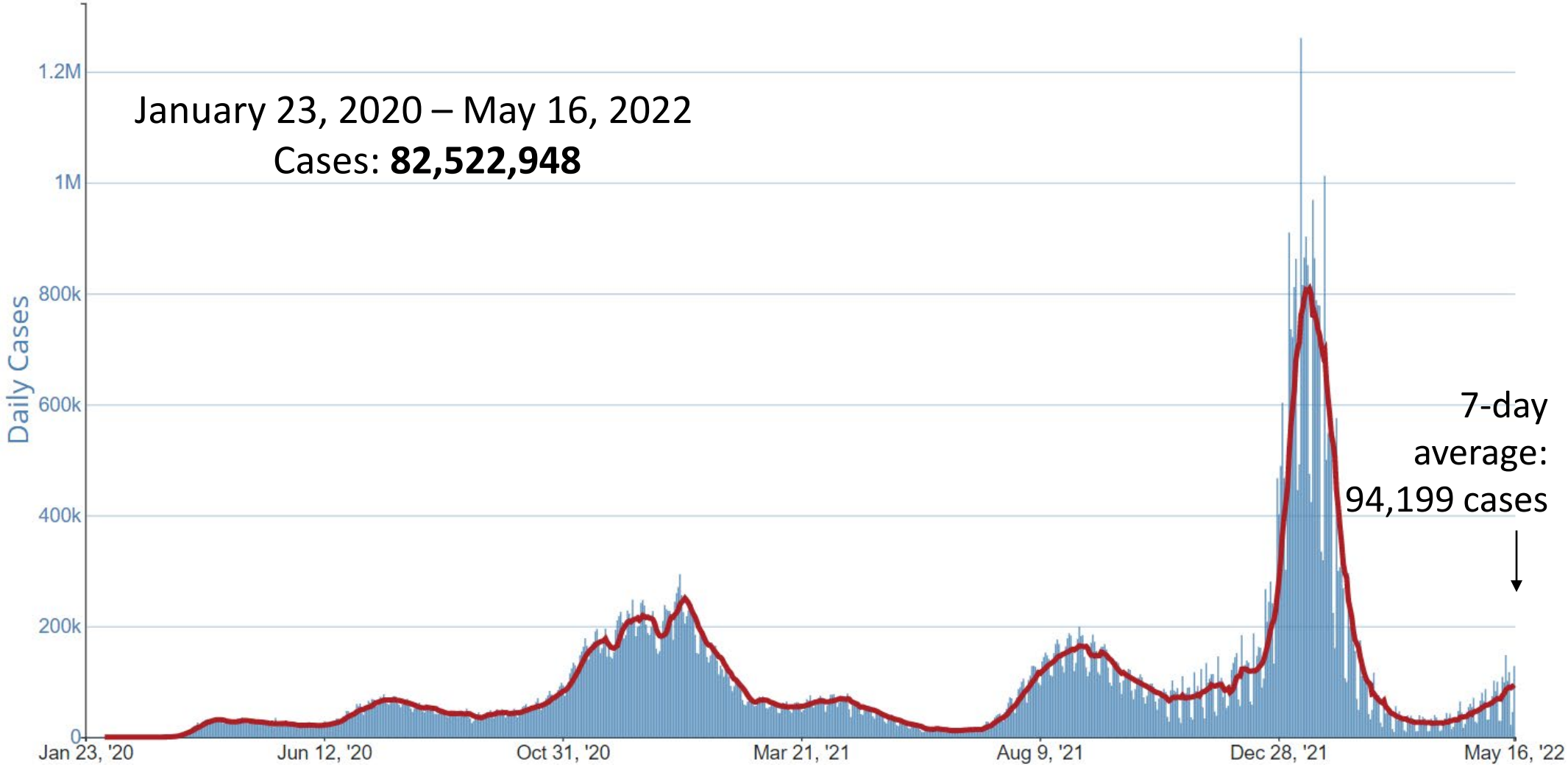


Dr. Matthew F. Daley, Work Group Chair

May 19, 2022

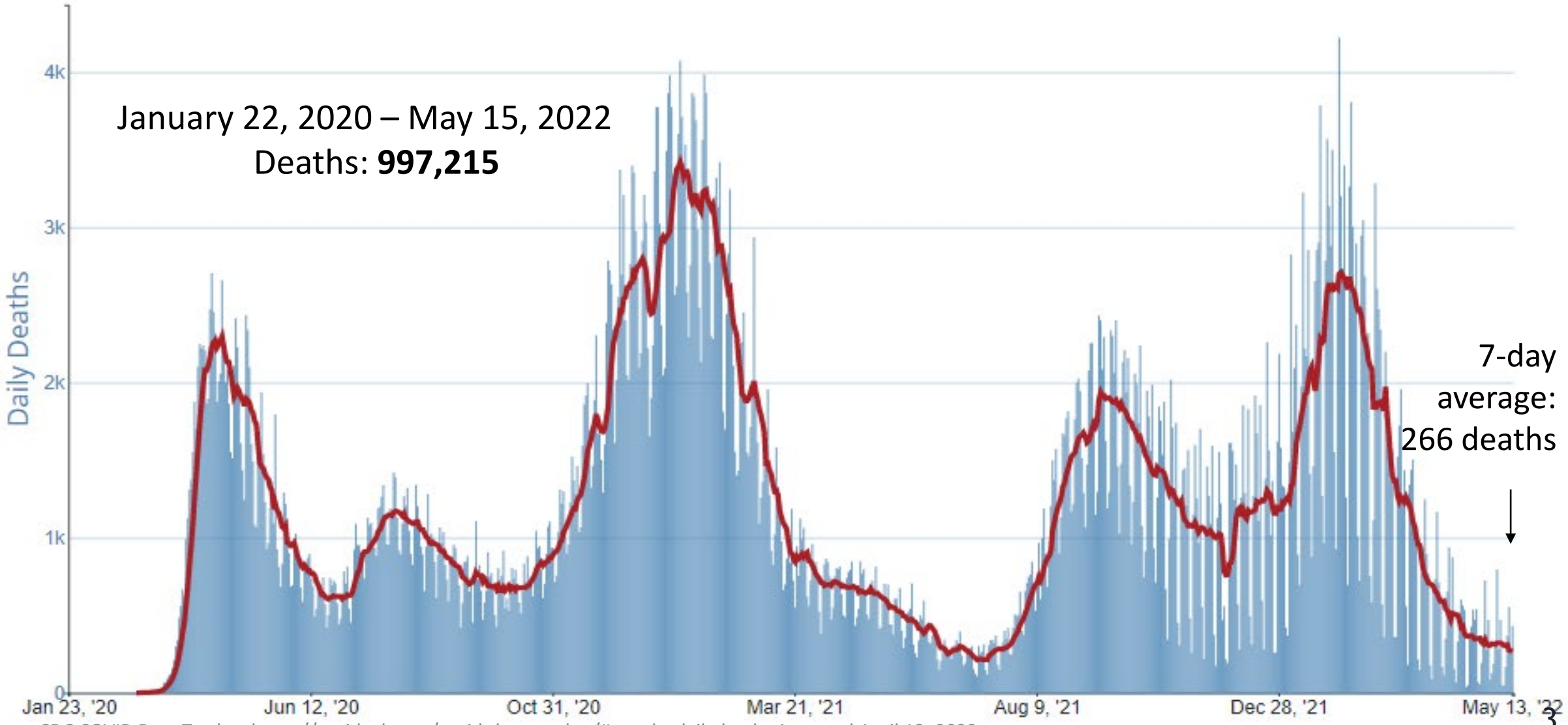
cdc.gov/coronavirus

Trends in number of COVID-19 cases in the United States among all persons



Source: COVID Data Tracker, https://covid.cdc.gov/covid-data-tracker/#trends_dailytrendscases , accessed 5/18/2022

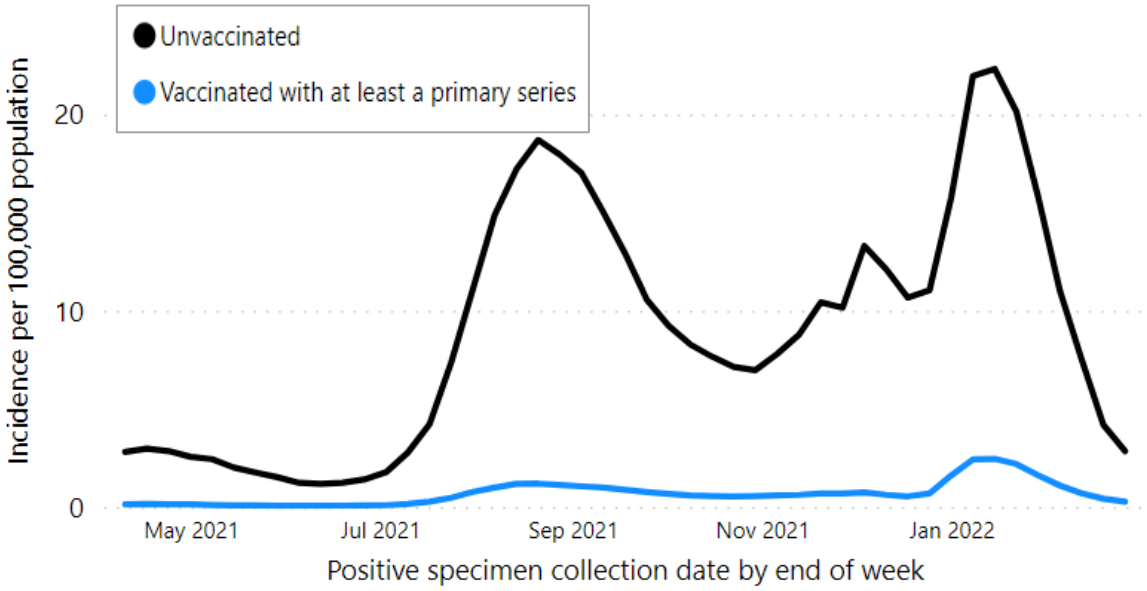
Daily Trends in Number of COVID-19 Deaths, United States



CDC COVID Data Tracker. https://covid.cdc.gov/covid-data-tracker/#trends_dailydeaths Accessed April 13, 2022

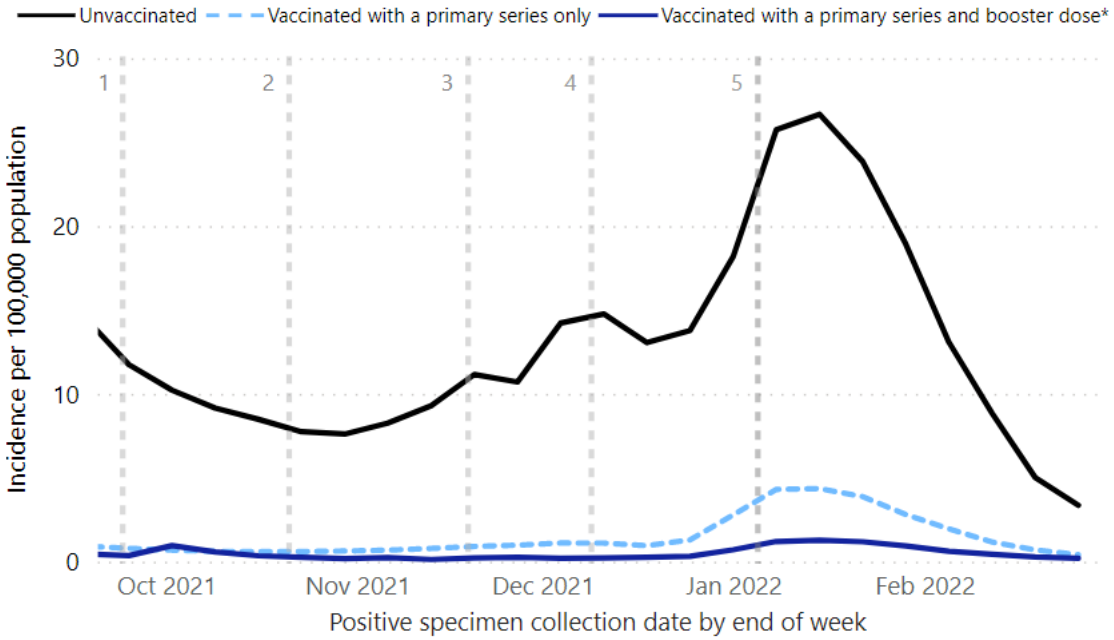
Rates of COVID-19-associated deaths by vaccination status

Persons ages ≥ 5 years
April 4, 2021 – February 26, 2022 (25 U.S. jurisdictions)



Unvaccinated people ages ≥5 years had **10X** the risk of dying from COVID-19 in February compared to people vaccinated with at least the primary series.

Persons ages ≥ 12 years
September 19, 2021 – February 26, 2022 (23 U.S. jurisdictions)

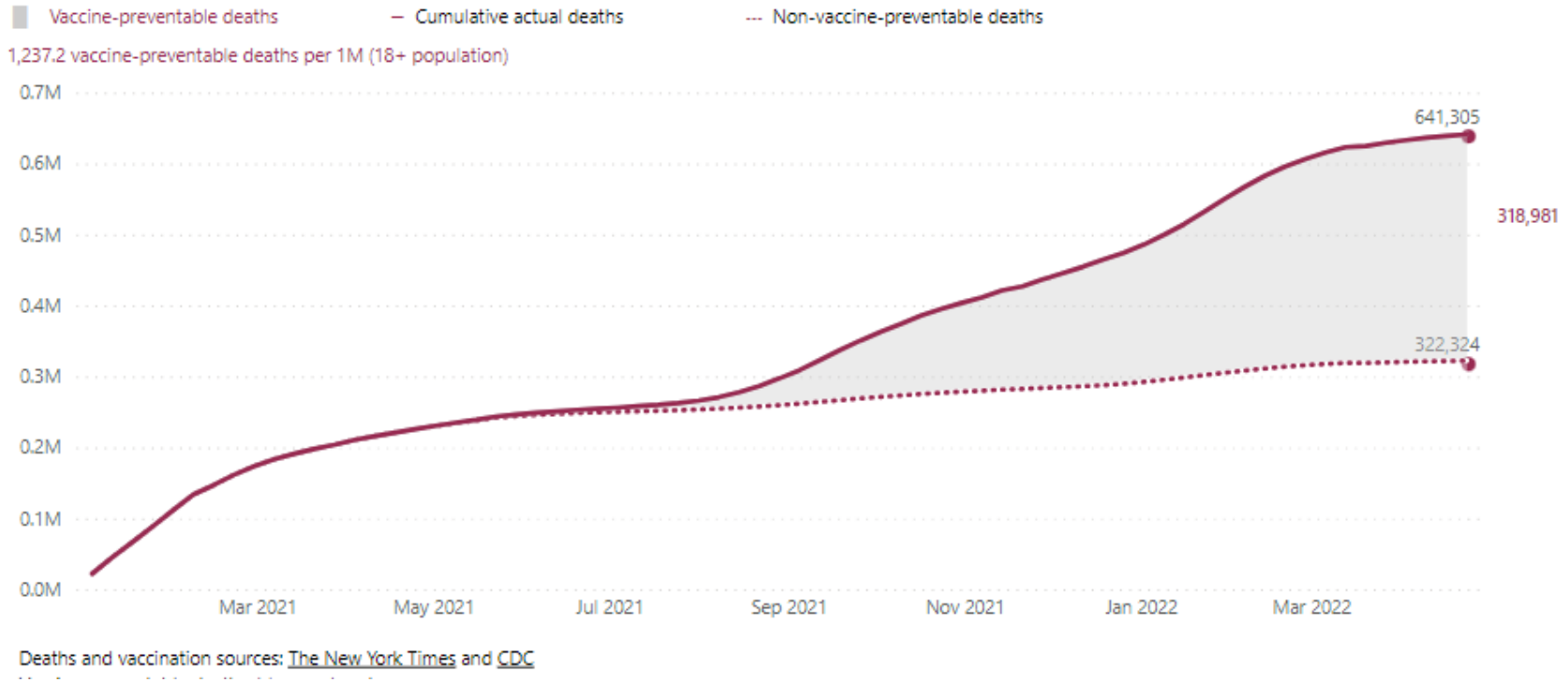


Unvaccinated people ages ≥12 years had **20X** the risk of dying from COVID-19 in February compared to people vaccinated with a primary series and booster dose.

https://covid.cdc.gov/covid-data-tracker/#rates-by-vaccine-status. Accessed May 9, 2022.

COVID-19 vaccine-preventable deaths

- New analysis predicts vaccines could have prevented at least **318,000** COVID-19 deaths between January 2021 and April 2022
  - What if the pace of vaccination at the point of highest demand last spring for each state was sustained, until vaccination coverage reached 100% of the adult population?



https://globalepidemics.org/vaccinations/ . Accessed May 15, 2022

Pediatric vaccine preventable diseases:

Hospitalizations per year in the United States prior to recommended vaccines

	Hepatitis A[1]	Varicella[2] (Chickenpox)	Influenza[3]	COVID-19
Age	5–14 years	<20 years	5–17 years	5–11 years
Time period	2005	1988–1995	2003–2007	Oct 2020–Oct 2021
Hospitalization Burden (per 100,000 population)	**<1**	**4-31**	**30-80**	**25**

[1] https://www.cdc.gov/mmwr/preview/mmwrhtml/ss5603a1.htm

[2] Meyer PA, Seward JF, Jumaan AO, Wharton M. Varicella mortality: trends before vaccine licensure in the United States, 1970-1994. *J Infect Dis*. 2000;182(2):383-390. doi:10.1086/315714

[3] https://www.cdc.gov/flu/weekly/weeklyarchives2007-2008/07-08summary.htm

Pediatric vaccine preventable diseases:

Deaths per year in the United States prior to recommended vaccines

	Hepatitis A[1]	Meningococcal (ACWY)[2]	Varicella[3]	Rubella[4]	Rotavirus[5]	COVID-19
Age	<20 years	11–18 years	5–9 years	All ages	<5 years	5–11 years
Time period	1990–1995	2000–2004	1990–1994	1966–1968	1985–1991	Oct 2020–Oct 2021
Average deaths per year	**3**	**8**	**16**	**17**	**20**	**66**

[1]Vogt TM , Wise ME, Bell BP, Finelli L. Declining hepatitis A mortality in the United States during the era of hepatitis A vaccination. J Infect Dis2008; 197:1282–8.
[2]National Notifiable Diseases Surveillance System with additional serogroup and outcome data from Enhanced Meningococcal Disease Surveillance for 2015-2019.
[3]Meyer PA, Seward JF, Jumaan AO, Wharton M. Varicella mortality: trends before vaccine licensure in the United States, 1970-1994. *J Infect Dis*. 2000;182(2):383-390. doi:10.1086/315714
[4]Roush SW , Murphy TV; Historical comparisons of morbidity and mortality for vaccine-preventable diseases in the United States. JAMA2007; 298:2155–63.
[5] Glass RI, Kilgore PE, Holman RC, et al. The epidemiology of rotavirus diarrhea in the United States: surveillance and estimates of disease burden. J Infect Dis. 1996 Sep;174 Suppl 1:S5-11.

FDA update

FDA authorizes a COVID-19 vaccine booster dose for children ages 5-11 years

- On May 17, 2022: FDA expanded eligibility for Pfizer-BioNTech COVID-19 vaccine booster dose to children ages 5-11 years
  - FDA amended the emergency use authorization (EUA) for the Pfizer-BioNTech COVID-19 vaccine, authorizing the use of a single booster dose for administration to individuals 5 through 11 years of age at least five months after completion of a primary series with the Pfizer-BioNTech COVID-19 vaccine

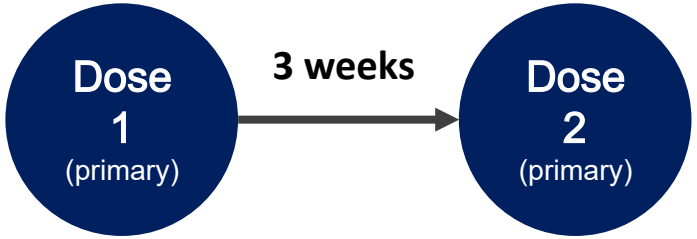
https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-expands-eligibility-pfizer-biontech-covid-19-vaccine-booster-dose

Current recommendations for COVID-19 vaccines

Children ages 5-11 years

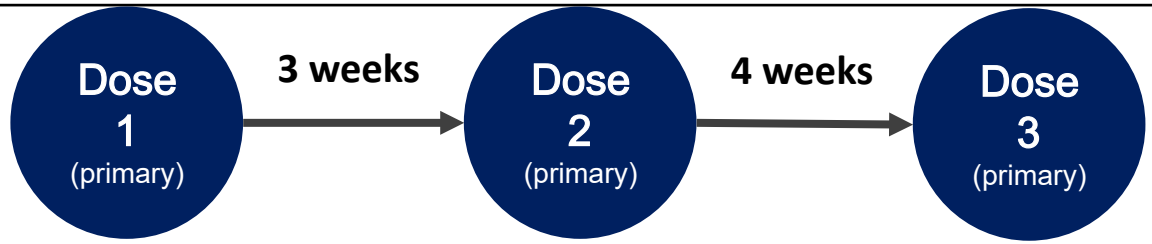
Persons who are <u>not</u> moderately to severely immunocompromised

Pfizer-BioNTech
(ages 5–11 years)



Persons who are moderately to severely immunocompromised

Pfizer-BioNTech
(ages 5–11 years)



Everyone in the age group **SHOULD** receive the dose

COVID-19 vaccine Work Group activities

April-May 2022

Reviewed data:

- Vaccine response by type of immunocompromise in adults
- Seroprevalence of infection-induced SARS-CoV-2 antibodies
- COVID-19 epidemiology in children ages 5-11 years
- Safety and immunogenicity for Pfizer-BioNTech COVID-19 vaccine booster dose in children ages 5-11 years
- VE data for COVID-19 vaccines in children ages 5-11 years
- Safety data for COVID-19 vaccines in children ages 5-11 years
- Policy discussions around booster doses for children ages 5-11 years

Agenda: Thursday May 19, 2022

Updates on vaccine effectiveness of COVID-19 vaccines in children ages 5-11 years	Dr. Link-Gelles (CDC)
Updates on safety of COVID-19 vaccines in children ages 5-11 years	Dr. Shimabukuro (CDC)
VaST assessment	Dr. Talbot (ACIP, VaST Chair)
Break	
PUBLIC COMMENT	
Safety and immunogenicity of BNT 162b2 booster 10mcg dose in children ages 5-11 years	Dr. Sabharwal (Pfizer)
Updates to the EtR Framework: COVID-19 vaccine booster doses in children ages 5-11 years	Dr. Oliver (CDC)
Discussion	

<u>VOTE</u>

COVID-19 vaccine booster doses in children ages 5-11 years

Work Group members

ACIP members

- Matthew Daley (chair)
- Beth Bell
- Grace Lee
- Keipp Talbot
- Oliver Brooks

Ex-officio/government members

- FDA: Doran Fink, Rachel Zhang, Lucia Lee
- NIH: Chris Roberts
- IHS: Uzo Chukwuma
- DOD: Bryan Schumacher
- CMS: Jeff Kelman
- BARDA: Christine Oshansky
- HHS: David Kim

CDC Lead

- Sara Oliver

Liaisons

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- AAP: Sean O'Leary
- ACOG: Denise Jamieson (primary), Laura Riley (alternate)
- ACP: Jason Goldman
- ADS: Emily Kahn
- AGS: Ken Schmader
- AIM: Rob Shechter (primary), Jane Zucker (alternate)
- AMA: Sandra Fryhofer
- ANA: Kendra McMillan (primary), Ruth Francis (alternate)
- APhA: Michael Hogue
- ASTHO: Marcus Plescia
- CSTE: Susan Lett, Paul Cieslak, Christine Hahn
  IDSA: Jeff Duchin (primary)

Liaisons, cont'd

- NACCHO: Matt Zahn (primary), Jeff Duchin (alternate)
- NACI: Matthew Tunis (primary), Kelsey Young (alternate)
- NFID: Bill Schaffner (primary), Marla Dalton (alternate)
- NMA: Patricia Whitley-Williams
- SHEA: Marci Drees

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- Kathy Kinlaw
- Dayna Matthew
- Kathleen Neuzil
- Stanley Perlman
- Peter Szilagyi
- Jose Romero
- Hank Bernstein

CDC participants

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- Tara Anderson
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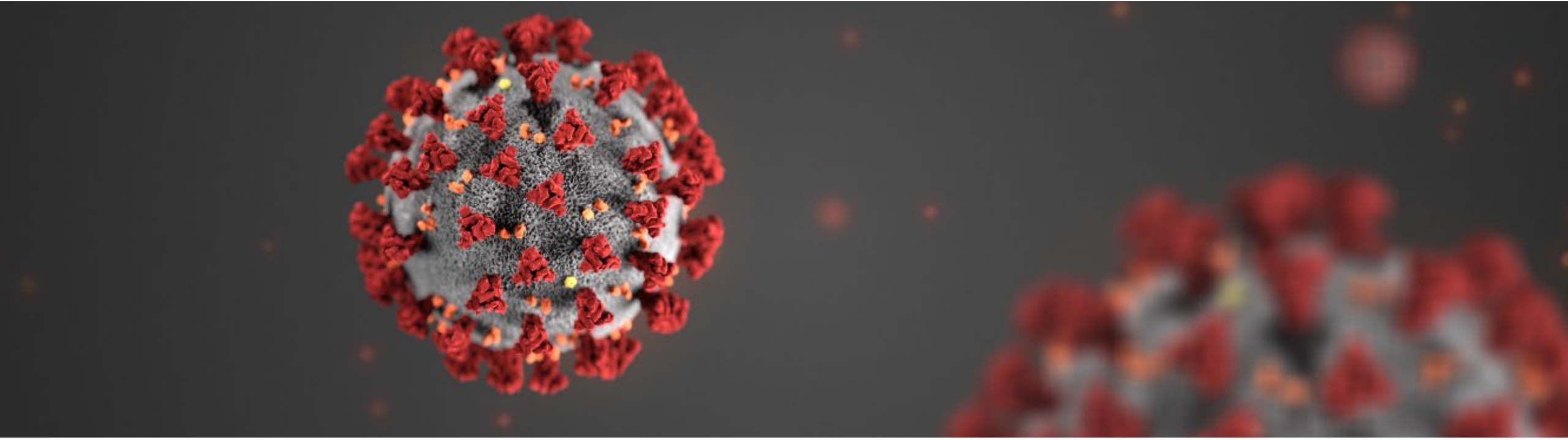
- Mary Chamberland
- Katherine Fleming-Dutra
- Monica Godfrey
- Susan Goldstein
- Stephen Hadler
- Elisha Hall
- Valerie Morelli
- Danielle Moulia
- Lauren Roper
- Edwin Shanley
- Megan Wallace
- JoEllen Wolicki
- Amanda Cohn
- Jessica MacNeil
- Elfriede Agyemang
- Karen Broder
- Allison Ciesla
- Kathleen Dooling
- Ashley Fowlkes
- Samuel Graitcer
- Rebecca Greco Kone
- Katherine Grusich
- Rita Helfand
- Joy Hsu
- Terri Hyde
- Jefferson Jones
- Cynthia Jorgensen
- Andrew Kroger
- Ruth Link-Gelles
- Lauri Markowitz
- Kristen Nordlund
- Tamara Pilishvili
- Heather Scobie
- Tom Shimabukuro
- John Su
- Natalie Thornburg
- Melinda Wharton
- Ryan Wiegand
- Janet Wright
- Patricia Yu
- Yon Yu



For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

Thank you!

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.