Clinical Update

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COVID-19 Vaccine Safety Data

 CDC and FDA continuing to analyze data regarding coadministration of mRNA bivalent booster and flu vaccine

- Consulting with other surveillance systems to understand:
 - Possible role of simultaneous high-dose or adjuvanted flu vaccine with COVID-19 vaccine
 - Possible decreased rate of stroke in 3-6 weeks post-vaccination
- CDC continues to recommend everyone that is eligible for a COVID-19 mRNA bivalent booster or flu vaccine get vaccinated



COVID-19 Bivalent Booster Vaccine Effectiveness Summary

- Provides added protection against symptomatic infection in individuals 5 years of age and older
 - Early evidence of waning of relative VE
- Provides added protection against ED/UC visits and hospitalizations in adults 18 years of age and older



Policy considerations for bivalent primary series

 Policy on bivalent primary series will be coordinated with FDA for regulatory action, and CDC/ACIP for recommendations for use





CDC Workgroup Considerations for Future Planning

- Simplify COVID-19 vaccine recommendations
 - Improve communication
 - Reduce barrier to vaccination
- Continue to discuss ideal dose and timing
- Supportive of Fall/annual COVID-19 vaccine program
 - Ongoing reviews of bivalent booster VE & safety data
 - Cost effectiveness analyses
 - COVID-19 epidemiology, genomic surveillance, virus evolution



Preliminary 2022-2023 Influenza Vaccine Effectiveness

- Data through January 2023
- Pediatrics: New Vaccine Surveillance Network (NVSN)
 - Vaccine effectiveness against lab-confirmed influenza A
 - 68% (95% CI: 46, 81) against pediatric hospitalizations
 - 42% (95% CI: 25, 56) against pediatric ED visits
- Adults: Investigating Respiratory Viruses in the Acutely III (IVY Network)
 - 43% (95% CI: 30, 54) against adult hospitalizations

