

Coadministering COVID-19 vaccines with Influenza vaccines – JUST DO IT!

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Disclosures

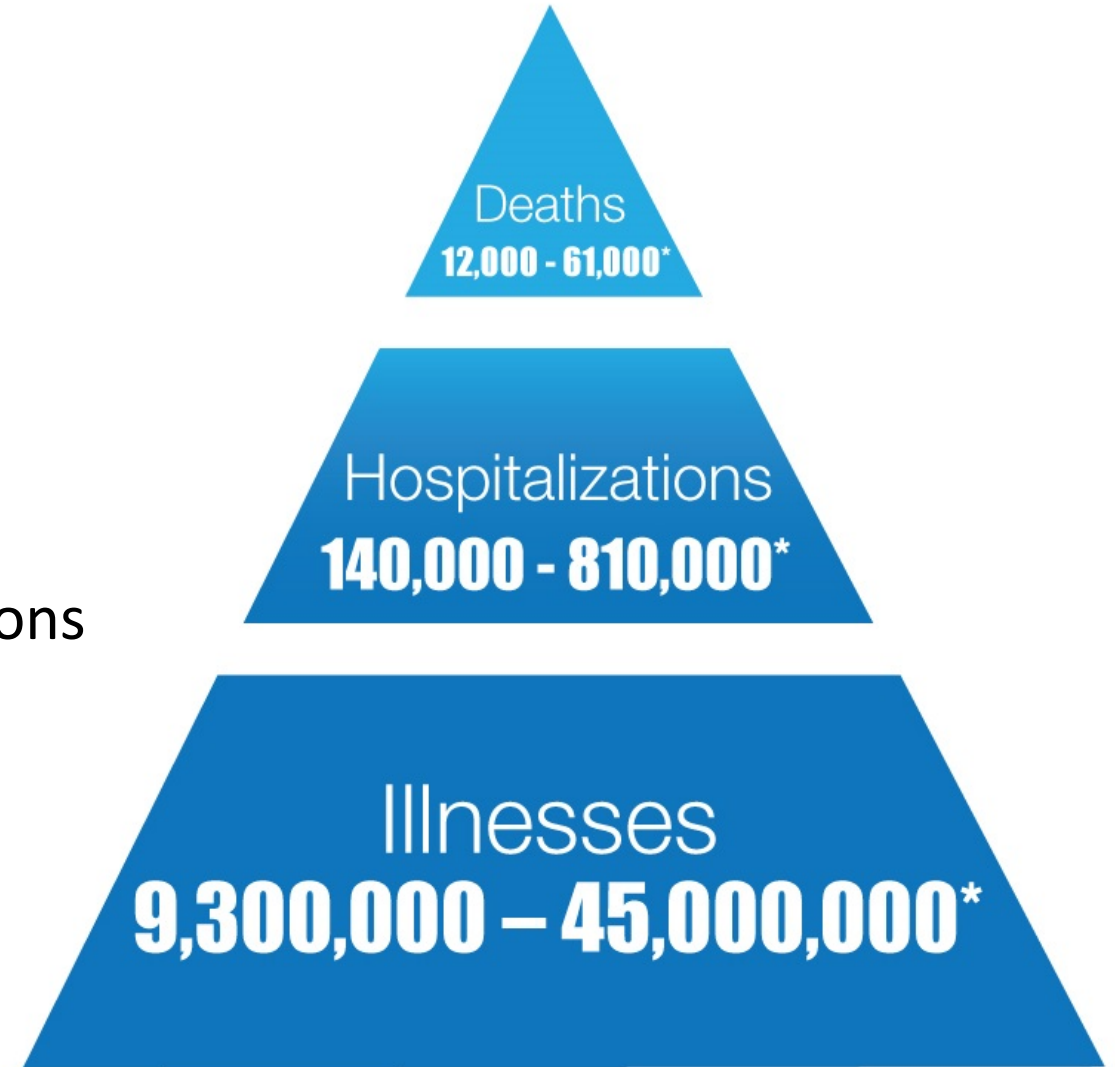
- I have no conflicts of interest.
- I do NOT intend to discuss an unapproved or investigative use of a commercial product/device in my presentation

Outline

- Opportunities to co-administer influenza (and other adult) vaccines with COVID-19 vaccines exist
- Why co-administration is important, safe and effective
- How I assure my patients on the safety of co-administration of influenza and COVID-19 vaccines

Burden of Influenza, 2010-2020*

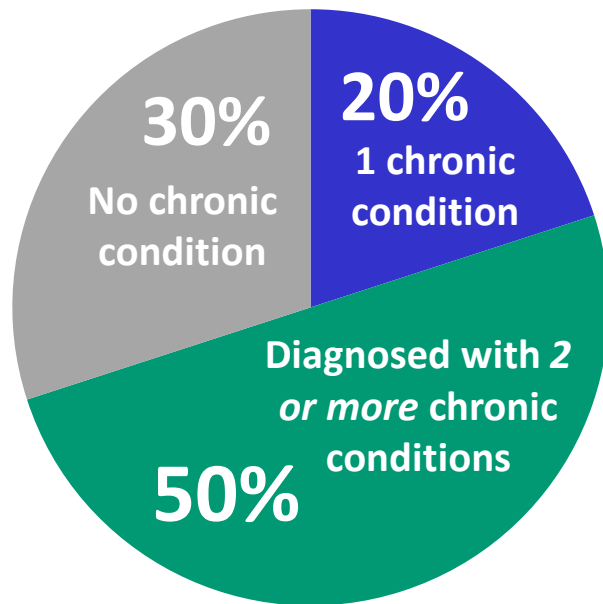
- From 2010-2020, adults 65 years and older accounted for:
 - 45–67% of influenza-related hospitalizations
 - 62–87% of influenza-related deaths



*The top range of these burden estimates are from the 2017-2018 flu season. These are preliminary and may change as data are finalized.

Prevalence of Chronic Conditions and Their Association With Influenza Hospitalizations in Adults 50 Years of Age and Older

Prevalence of Chronic Conditions US Adults 50-64 Years of Age¹



Americans with chronic conditions are a priority for influenza vaccination.²

- In a study covering the 2005-2006, 2006-2007, and 2007-2008 influenza seasons, >80% of adults hospitalized with lab-confirmed influenza had 1 or more underlying medical condition; half had 2 or more conditions³
- In the 2016-2017 influenza season, 94.2% of hospitalized adult patients with influenza had at least 1 underlying medical condition⁴

References: 1. CDC, AARP, American Medical Association. <https://www.cdc.gov/aging/pdf/promoting-preventive-services.pdf>. Accessed November 17, 2021. 2. CDC. <https://www.cdc.gov/flu/highrisk/chronic-conditions/index.htm>. Accessed November 17, 2021. 3. Dao CN, et al; Emerging Infections Program Network. *J Infect Dis.* 2010;202(6):881-888. 4. CDC. <https://www.cdc.gov/flu/weekly/weeklyarchives2016-2017/Week20.htm>. Accessed November 17, 2021.

ACIP Influenza Recommendations (2021-22)

- All persons 6 months of age or older should receive influenza immunization (unchanged)
 - Influenza vaccination should not be delayed to procure a specific vaccine preparation if an appropriate one is already available
- Vaccination should be offered as long as influenza viruses are circulating, and unexpired vaccine is available
 - Vaccine administered in December or later, even if influenza activity has already begun, is likely to be beneficial in the majority of influenza seasons
- Final 2021–22 recommendations (released 8/27/2021):
<https://www.cdc.gov/mmwr/volumes/70/rr/rr7005a1.htm>

Why Flu Vaccination Matters

- Flu vaccination reduces flu illnesses, hospitalizations and deaths.
- Flu vaccination reduces the burden of flu on health care systems.
- Flu vaccination protects pregnant women from flu and protect their babies from flu for several months after birth.
- Flu vaccination reduces the rates of some cardiac events among people with heart disease.
- Flu vaccination reduces the rate of hospitalizations related to diabetes and chronic lung disease.

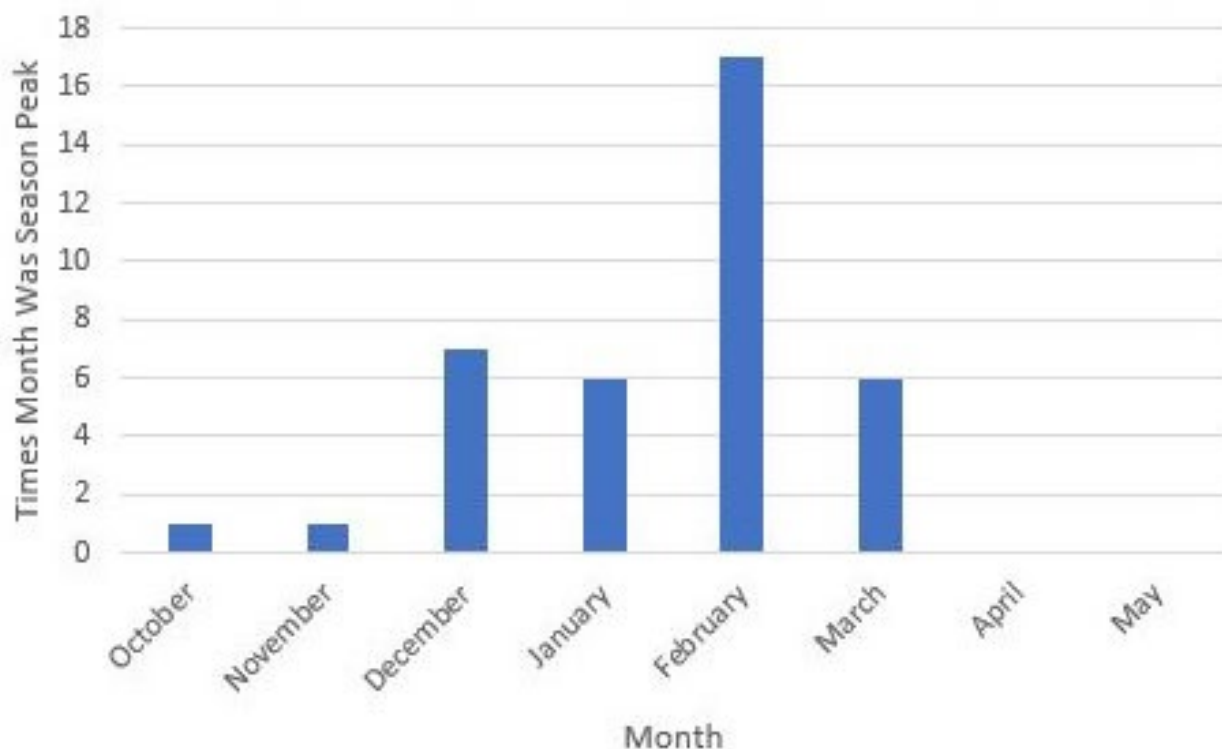
Universal influenza recommendation still demands that we not forget those at higher risk of complications from influenza*

- Target people who are at higher risk for flu complications, for example people of any age with a chronic condition like a breathing or lung problem, heart disease a weakened immune system, or pregnancy, for flu vaccination
 - In the past, 9 out of 10 people hospitalized from flu have had at least one underlying health condition.
- CDC received reports of 199 children dying from flu during 2019-2020.
 - Record-breaking number of reported pediatric flu deaths.
 - 80% were not vaccinated.
 - Flu can be serious for kids and a flu vaccine is the best way to protect children from flu.

* <https://www.izsummitpartners.org/2021-08-12/>

There remain plenty of opportunities to protect against influenza this season!

Flu Activity By Month in the U.S. for the 1982-1983 through 2019-2020 Flu Seasons

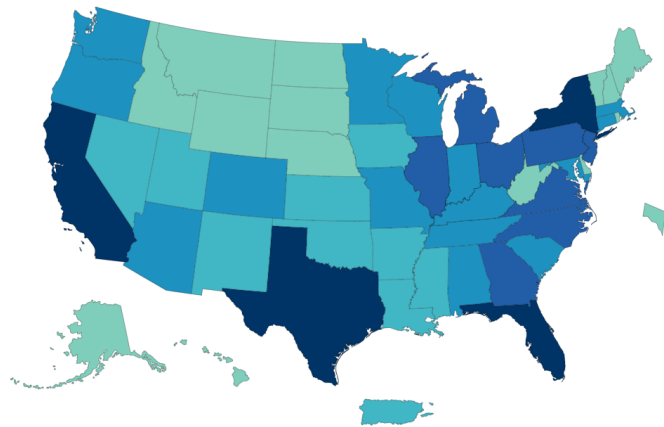


- Over the 36 seasons between 1982-83 and 2017-18, peak activity occurred in:
 - December: 7 seasons (19%)
 - January: 6 seasons (17%)
 - February: 15 seasons (42%)
 - March: 6 seasons (17%)
- 76% of flu season peaks in past 36 seasons occurred after December

COVID-19 vaccination efforts open up opportunities to protect against influenza

As of 11/16/2021, the U.S. has administered more than 443 million doses of COVID-19 vaccine

Total Doses Administered Reported to the CDC by State/Territory and for Select Federal Entities for the Population 65 Years of Age and Older

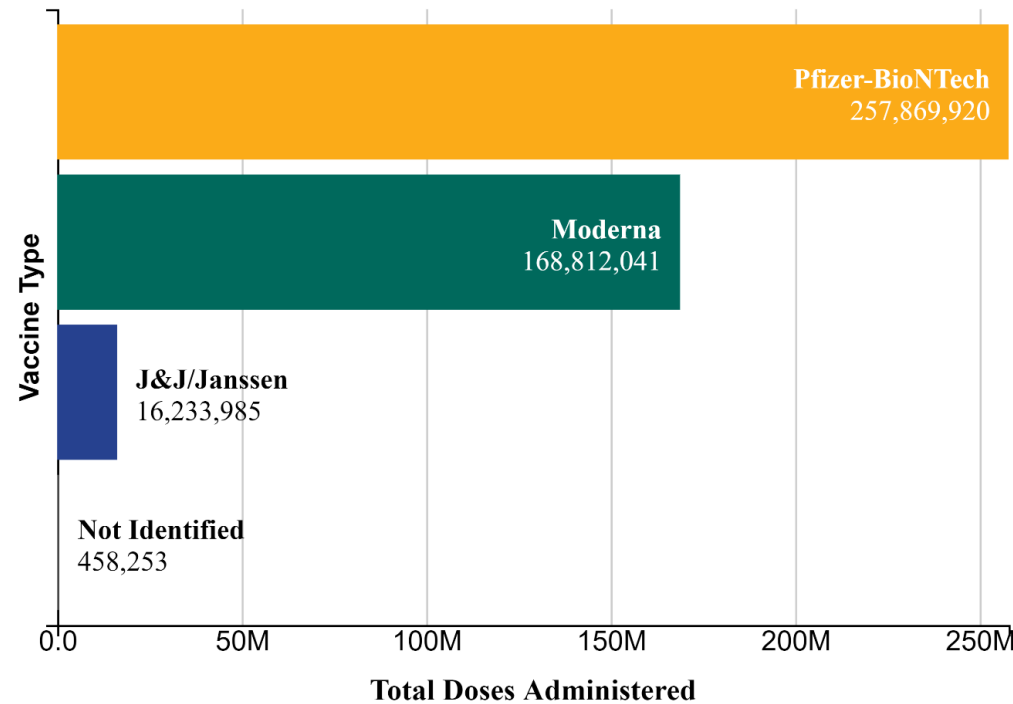


Data for Federal Entities are presented here and are also incorporated into the respective jurisdictional totals

Total Doses Administered by Population aged 65+

○ No Data ○ 0 ○ 1 - 750,000 ○ 750,001 - 1,500,000 ○ 1,500,001 - 3,000,000 ○ 3,000,001 - 6,000,000 ● 6,000,001 +

U.S. COVID-19 Vaccine Administration by Vaccine Type



Among 18+

- 81.6% received at least one dose
- 70.6% fully vaccinated

Among 65+ year old

- 99.4% received at least one dose
- 86.1% fully vaccinated

Continued need to vaccinate against COVID-19 provides opportunities to vaccinate against influenza

- Among 65+ population, only 36.6% have received their COVID-19 boosters
- Boosters are now approved and any person who wants one may get one
 - High risk populations are recommended for boosters, including those over 50
- And the country continues to focus on getting COVID-19 unvaccinated persons vaccinated
- Any person coming in for a COVID-19 vaccine should be evaluated for, recommended and given, the influenza vaccine

Co-administration of Other Vaccines with COVID-19 Vaccines

- Current CDC guidance indicates that COVID-19 vaccines and other vaccines, including influenza, may be co-administered without regard to timing
- Providers should check current CDC COVID-19 vaccination guidance for updated information concerning co-administration
- Significant number of adults >65 years of age are getting COVID-19 boosters and should be offered flu (and other appropriate) vaccinations at the same time

Why Co-administration of COVID-19 Vaccines with Influenza Vaccines is Important

Why Now?

- A previous recommendation to separate COVID-19 vaccines from other vaccines was made out of an abundance of caution during a period when these vaccines were new and not based on known safety or immunogenicity concerns.
- Substantial data have now been collected regarding the safety of COVID-19 vaccines currently approved or authorized by FDA
- It is critical that we protect our patients from both COVID-19 and influenza this ongoing flu season

Co-administration of Influenza Vaccines with COVID-19 Vaccines

- If a patient is due for more than one vaccine, providers are encouraged to offer all of the vaccines at the same visit
- Coadministration of all recommended vaccines, including influenza vaccine, is important because it increases the probability that people will be fully vaccinated
- If a healthcare provider is uncertain that a patient will return, it is important to not miss an opportunity to administer all recommended vaccines to the patient
- There is a lot of experience with co-administration of vaccines
 - Knowledge of how the immune system responds to multiple antigens informs us that co-administration will likely not impact efficacy
 - Experience also indicates that possible side effects are generally similar whether vaccines are given alone or with other vaccines

Co-administration of Influenza Vaccines with COVID-19 Vaccines

ACIP influenza statement cites current Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States*

- COVID-19 vaccines may be administered without regard to timing of other vaccines. This includes simultaneous administration of COVID-19 vaccine and other vaccines on the same day
- If multiple vaccines are administered at a single visit, administer each injection in a different injection site
 - For people ≥ 11 years, the deltoid muscle can be used for more than one intramuscular injection administered at different sites in the muscle
 - For children (5–10 years), if more than two vaccines are injected in a single limb, the vastus lateralis muscle of the anterolateral thigh is the preferred site because of greater muscle mass

*https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fvaccines%2F covid-19%2Finfo-by-product%2Fclinical-considerations.html#Coadministration

How I communicate with my patients on co-administration

The Principles of Motivational Interviewing¹

Resist the righting reflex

Otherwise you run the risk of increasing a vaccine-hesitant parent's commitment to the status quo

Understand motivations

Ask questions that elicit values and concerns

Listen

Realize that simply providing the vaccine-hesitant patient with information doesn't automatically bring about change

Empower

Remember: you are guiding the patient through the process of thinking aloud and deciding whether to change

1. Koh-Knox CP. Motivational Interviewing in Health Care: Helping Patients Change Behavior. Am J Pharm Educ. 2009;73(7):127. Review of: Rollnick S, et al. *Motivational Interviewing in Health Care: Helping Patients Change Behavior*. Guilford Publications; 2008.

The CASE Model for Conversations About Vaccines¹

Corroborate

- Acknowledge the parent's concern
- Find some point of agreement between you and the parent
- Set the tone for a respectful conversation

About me

- Talk about what you've done to enhance your knowledge and expertise (eg, attended a conference)

Science^a

- Describe what science has to say about the topic in question

Explain and advise

- Offer your recommendation, based on the science

^a Note that not every parent will be interested in what science has to say about immunization.

Personal Experience

- Be direct, honest and confident
- Take every opportunity to advise patient and all the vaccines that are needed
- Vaccination is too important to gloss over
- Don't just check the box that the patient declined and you move to the next issue
- Take the time to find out what the hesitancy is
- You are the doctor, be the leader, don't be indecisive
- If the patient agrees to get vaccinated on a different date, make sure it is scheduled before they leave
- Know the guidelines

Conversation Examples

Patient: I don't want to get sick.

Doctor: You won't get sick, but you could have a common reaction that you can treat with over-the-counter analgesics.

Patient: I am waiting for more studies to be done.

Doctor: Millions of doses have already been given out, and the CDC has one of the most robust and effective safety monitoring systems. While some vaccines have extremely rare issues, the benefits of the vaccine far outweigh the risk.

Patient: Thousands of deaths have been reported to VAERS.

Doctor: VAERS does not establish cause, just reports to be investigated. Anyone can report anything. but that doesn't mean it is linked. If you reported that you tripped over a rock after the vaccine, does that mean the vaccine caused it just because you reported it?

More conversations

Patient: I don't want to be microchipped.

Doctor: The microchip won't fit in the needle; you would see it.

Patient: I don't want the government to track me.

Doctor: They already do – it's called your cell phone.

Patient: I don't need to be vaccinated because I am healthy.

Doctor: No one is as healthy as they think they are when it comes to disease. Just because you are a good driver doesn't mean everyone else is, and you still wear a seatbelt to decrease chance of being thrown from your car. Think of the vaccine as a seatbelt. Furthermore, you being vaccinated prevents you from going to the hospital and taking a bed from someone who needs it for an emergency condition like stroke or heart attack.

Visit IAC Resources

- IAC's Influenza Educational Materials
 - <https://immunize.org/influenza>
- Read our publications!
 - <http://www.immunize.org/publications>
- Visit our websites!
 - www.immunize.org
 - www.vaccineinformation.org
 - www.immunizationcoalitions.org
 - www.izsummitpartners.org
- Stay ahead of the game! Subscribe to our updates!
 - <http://www.immunize.org/subscribe>



**KEEP
CALM
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VACCINATE**