FALL NEWSLETTER (OCT/NOV 2024), ISSUE 23





VACUNAS (VACCINES) UPDATE

National Alliance for Hispanic Health



HEALTH EXPERTS ENCOURAGE COVID-19, FLU, AND RSV VACCINATION IN NOVEMBER



November is an ideal time for everyone 6 months and older to get vaccinated against COVID-19 and flu. and for older adults. pregnant women, and infants to get vaccinated against RSV (Respiratory Syncytial Virus) if they had not previously gotten the **RSV** vaccine. Although respiratory virus levels are at their highest between December and March, getting vaccinated earlier in the fall can help provide protection as viruses begin to circulate at the beginning of the season. Health experts advise following CDC immunization recommendations and talking with a healthcare provider about receiving vaccines for all three of these viruses to help protect against severe illness, hospitalization, and death. The latest CDC data show that as of October 5, 2024, only 6.1% of Hispanic adults 18 years and older have received the updated 2024-2025 COVID-19 vaccine, compared to 11.2% overall. The flu vaccination rate is higher, with 17.1% of Hispanics receiving the flu vaccine as of October 5, 2024, compared to 19.6% overall.

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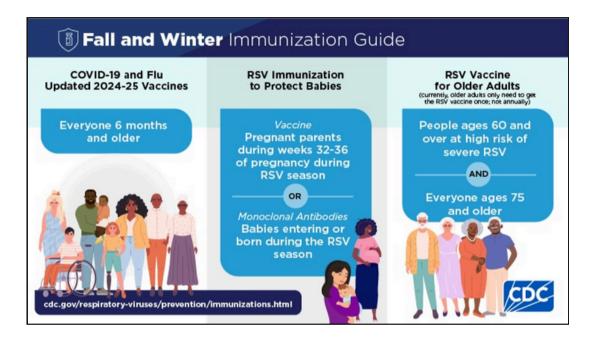
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Encourage family and friends to get vaccinated! People with insurance can visit <u>www.vaccines.gov</u> to find a local pharmacy offering updated COVID-19, flu, and RSV vaccines. Individuals should contact their chosen pharmacy directly to confirm if vaccines are available and schedule vaccination appointments. For people without health insurance, some federally qualified health centers and local health departments are still offering the COVID-19 vaccine for free or at a discount. Contact your local health center or health department to confirm if free or low-cost COVID-19 vaccines are currently available. For more information or help finding a vaccine call the National Alliance for Hispanic Health's toll-free, bilingual Su Familia Helpline at 1-866-783-2645 or visit <u>www.vacunashelp.org</u>.



CDC REVISES COVID-19 VACCINATION SCHEDULE, RECOMMENDING A SECOND DOSE OF NEW 2024-2025 VACCINE FOR PEOPLE 65 YEARS OF AGE AND OLDER OR AT INCREASED RISK.

Following guidance of the Advisory Committee on Immunization Practices (ACIP), <u>CDC now</u> <u>recommends a second dose of 2024-2025 COVID-19 vaccine</u> for adults 65 years and older and for people who are moderately or severely immunocompromised. The recommendation is to receive a second dose 6 months after the first dose of the 2024-2025 COVID-19 vaccine. The updated recommendation also allows for a third dose to be administered, if recommended by their healthcare provider, for persons who are moderately or severely immunocompromised.

Receiving recommended 2024-2025 COVID-19 vaccines can restore and enhance protection against the virus variants currently responsible for most infections and hospitalizations in the United States. COVID-19 vaccination also reduces the chance of suffering the effects of Long COVID.

CDC LOWERS RECOMMENDED AGE FOR ADULT PNEUMOCOCCAL VACCINATION FROM 65 TO 50 YEARS OLD

The <u>CDC lowered the recommended age</u> for adult pneumococcal vaccination from age 65 to 50 years of age and older, based on guidance from the Advisory Committee on Immunization Practices (ACIP). This change was made to protect more people against pneumococcal bacteria, which can cause serious illness and death. Illnesses caused by pneumococcal bacteria include pneumonia, meningitis, and bloodstream infections.

Data from 2022 show that 70% of U.S. adults aged 65 and older were vaccinated against pneumococcal disease, compared to only 57.7% of Hispanics. The recommendation to vaccinate people as young as 50 provides an opportunity to raise awareness of the risks and increase protection for a larger segment of older adults. While the new CDC recommendation is for older adults, the recommendation for children under 5 years of age to receive the pneumococcal vaccine still stands.

If you are 50 years of age or older and have not received a pneumococcal vaccination, talk with your health care provider about getting one at your next appointment. Most private health insurance plans cover the cost of pneumococcal vaccines at low or no cost. With the new ACIP and CDC recommendation, Medicare Part B now covers the cost of the pneumococcal vaccine for adults 50 years of age and older. If you don't have health insurance, contact your local health department or community clinic to learn if they offer free or low-cost vaccines. For more information or assistance locating vaccines in your community, call the toll-free bilingual Su Familia Helpline at 1-866-783-2645.

NATIONWIDE PEDIATRIC VACCINATION RATES RAISE CONCERN

A recent <u>CDC report</u> showed that during the 2023-24 school year nationwide vaccination coverage among kindergarten children decreased for all reported vaccines compared to the year before. Declining vaccination rates included a low of 92.3% for diphtheria, tetanus, and acellular pertussis vaccine (DTaP), and a low of 92.7% for measles, mumps, and rubella vaccine (MMR). The overall percentage of kindergarten children who received an exemption from one or more required vaccines increased from 3.0% during the 2022-23 school year to 3.3% during the 2023-24 school year, marking the highest exemption rate ever reported in the U.S. Fourteen states are now reporting an exemption rate greater than 5%, an increase from ten states the previous year. <u>Health experts note</u> that some diseases, like measles, require 95% coverage to maintain herd immunity. Herd immunity occurs when a large portion of the population is immune to a specific disease which limits how widely the disease can spread. Exemptions greater than 5% increase the risk of outbreaks of vaccine-preventable diseases.

The vaccination trends in this report also raise concern as the <u>reported</u> cases of individuals with pertussis, also known as whooping cough, have been increasing. <u>According to June 2024 CDC data</u>, reported pertussis cases were more than twice as high compared to the same time period in 2023. The <u>CDC also reported</u> the total number of U.S. pediatric deaths for the 2023-2024 influenza season reached 200, exceeding the previous high of 199 reported during the 2019-2020 season. It is estimated that 80% of the children who died from flu last season were not fully vaccinated.



Immunization programs, schools, and healthcare providers should prioritize strategies that ensure children are fully vaccinated to reduce exemptions, increase vaccination coverage, and protect children from severe health outcomes. More information on strategies and policy options for increasing routine childhood vaccinations is available from the <u>Kaiser</u> Family Foundation.

FDA APPROVES NASAL SPRAY INFLUENZA VACCINE FOR SELF- OR CAREGIVER-ADMINISTRATION

The U.S. Food and Drug Administration (FDA) has approved FluMist, a nasal spray flu vaccine manufactured by AstraZeneca, for self- or caregiver-administration, FluMist has been used safely and effectively for many years to protect against influenza virus subtypes A and B in individuals 2 through 49 years of age. This approval allows the option for adults 18 years and older to self-administer the nasal vaccine, and the option for individuals 2 through 17 years of age to receive the nasal vaccine with the help of an adult caregiver. AstraZeneca plans to make the vaccine available for self-administration through a third-party online pharmacy that will include a screening and eligibility assessment requirement. If an individual meets eligibility criteria, the pharmacy will write the prescription and ship the vaccine to the intended vaccine recipient. AstraZeneca expects this option to be available by the start of next year's respiratory health season. Health experts note that this new option provides a safe and effective seasonal flu vaccine that is more convenient and accessible as it does not require delivery by a health care provider.



STUDY AIMS TO EXAMINE LOW RSV VACCINE UPTAKE WITH HISPANICS IN THE U.S.

RSV is a contagious respiratory virus that usually causes mild infections, but can cause serious illness in infants and older adults. While there are now three RSV vaccines approved by the U.S. Food and Drug Administration to protect adults ages 60 and older in the U.S. against severe illness from RSV infection, disparities have emerged in vaccine uptake over the past year that the vaccines have been available. According to CDC data, as of September 28, 2024, only 18.3% of Hispanic adults 75 years and older have received the RSV vaccine compared to 34.1% for all adults in this age group, and only 17.5% of Hispanic adults 60-74 years with high-risk conditions have received the RSV vaccine, compared to 29% overall. These data concern health experts as the COVID-19 pandemic demonstrated that lower rates of vaccine uptake are correlated with higher rates in hospitalization and death. Dr. Carina Marquez, an associate professor of medicine at the University of California, San Francisco, is launching a five-year National Institutes of Health study to research how best to motivate older Hispanic adults to get vaccinated against RSV. The study will assess the effectiveness of multiple interventions to increase RSV vaccine uptake such as community health worker counseling, text-message reminders from communitybased organizations, and targeted discussions about RSV vaccination among older adults within their social and family networks.

REMINDER: FREE AT-HOME COVID-19 TESTS ARE NOW AVAILABLE THROUGH U.S. POSTAL SERVICE

The U.S. Department of Health and Human Services (DHHS) <u>resumed a program</u> that provides free at-home COVID-19 test kits to households through the U.S. Postal Service. Every U.S. household is eligible to order 4 free at-home tests. Individuals can visit <u>www.covid.gov/tests</u> to order their free kits for the 2024-2025 respiratory health season. It is important to check the expiration dates on the box of home tests as the <u>FDA has extended</u> <u>the expiration dates on certain authorized at-home</u> <u>COVID-19 test kits.</u> To do this, check the name of the manufacturer of the test and the lot number printed on the box against the <u>list of FDA authorized at-home</u> <u>COVID-19 tests</u> to confirm if the tests have expired or if their expiration dates have been extended.



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