

VACUNAS (VACCINES) UPDATE

National Alliance for Hispanic Health



CDC'S BRIDGE ACCESS PROGRAM WILL SUNSET IN AUGUST



CDC's Bridge Access Program, a federal program launched in 2023 to provide free COVID-19 vaccines to uninsured and underinsured adults, is [expected to end in August](#) due to discontinued funding. Since September 2023, the program has provided more than 1.4 million free COVID-19 vaccines across the country, including more than 812,000 uninsured individuals. The Bridge Access Program was originally scheduled to end in December 2024, but the fiscal 2024 government funding bill rescinded \$4.3 billion in COVID-19 supplemental funding which brought a premature end to the program. The latest [CDC data](#) show that only 16.2% of Hispanic adults 18 years and older in the U.S. have received the updated 2023-2024 COVID-19 vaccine. Uninsured and underinsured individuals who have not yet received the 2023-2024 updated COVID-19 vaccine should visit www.vaccines.gov to find a free COVID-19 vaccine near them before the vaccine supply runs out in August.

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CDC RECOMMENDS UPDATED 2024-2025 COVID-19 AND FLU VACCINES FOR UPCOMING RESPIRATORY HEALTH SEASON

CDC has endorsed the Advisory Committee on Immunization Practices' (ACIP) [recommendation](#) that everyone ages 6 months and older should receive an updated 2024-2025 COVID-19 vaccine to help protect against severe illness, hospitalization, and death from COVID-19 this fall and winter. Updated COVID-19 vaccines from Pfizer, Moderna, and Novavax will be made available later this year and are recommended whether an individual has been vaccinated for COVID-19 in the past or not. In 2023, more than 916,300 people were hospitalized due to COVID-19 and more than 75,500 people died from the virus. Receiving an updated vaccine will provide increased protection against COVID-19 and reduce the chance of suffering the effects of Long COVID, particularly for older adults and immunocompromised individuals. CDC's definition of being up-to-date on the COVID-19 vaccination is available [online](#), and may be updated in the months ahead as CDC continues to monitor virus data.

CDC also endorsed ACIP's recommendation that everyone ages 6 months and older, with rare exceptions, should receive an updated 2024-2025 flu vaccine to help protect against severe influenza-related complications. All updated flu vaccines will be trivalent and protect against [H1N1, H3N2, and a B/Victoria lineage virus](#). Most individuals should receive the flu vaccine this September and October, although anyone who does not receive their vaccine in those months can still obtain a flu vaccine throughout the flu season. More information on updated flu vaccines can be found [here](#).



STUDY SHOWS REPEAT COVID-19 VACCINATION COULD SHIELD AGAINST WIDE RANGE OF VIRUSES

A [recent study](#) published in the journal **Nature** showed that individuals repeatedly vaccinated for COVID-19 with the initial vaccines, followed by boosters and updated monovalent vaccines, were able to generate antibodies against COVID-19 variants and other related coronaviruses. This phenomenon is known as imprinting which takes place when the first vaccine an individual receives causes a strong primary immune response that influences their responses to subsequent infection or vaccination. Imprinting can have a positive, negative, or neutral effect. The results from this study show strong imprinting that has a positive effect and works well with the COVID-19 vaccine. The [researchers note](#) that individuals who only received the initial COVID-19 vaccines showed weak protection against other coronaviruses, but after receiving the Omicron-era booster exhibited stronger antibodies. These findings alleviate concerns that annual COVID-19 vaccinations might hinder immune response in subsequent years. They also suggest that repeated COVID-19 vaccination with updated vaccines may protect individuals against new COVID-19 variants and other distantly-related coronaviruses as well.

CDC UPDATES RSV VACCINATION RECOMMENDATION FOR OLDER ADULTS AHEAD OF UPCOMING RESPIRATORY HEALTH SEASON

CDC released [updated recommendations](#) on how adults ages 60 and older can protect themselves from Respiratory Syncytial Virus (RSV) this upcoming respiratory health season. It is important to note that the RSV vaccine is not an annual vaccine, so this recommendation is for individuals who did not get an RSV vaccine last year. The CDC recommends:

- Adults ages 75 and older receive the RSV vaccine.
- Adults ages 60-74 who are at increased risk of severe RSV complications receive the RSV vaccine, particularly those with certain chronic health conditions, such as lung or heart disease, or those living in nursing homes.

This new guidance is meant to simplify RSV vaccine decision-making for healthcare providers and individuals, and replaces the 2023 recommendation. Eligible older adults should receive the RSV vaccine in late summer or early fall before RSV typically starts to spread in communities, although eligible individuals can still obtain an RSV vaccine at any time of the year. In addition to the previously available RSV vaccines (GSK's AREXVY and Pfizer's ABRYVO) a new mRNA vaccine from Moderna called mRESVIA is now available. Older adults should talk with their healthcare providers about the updated RSV vaccine recommendations to confirm their eligibility.



UPDATED COVID-19 VACCINES TO TARGET KP.2 STRAIN THIS FALL

The U.S. Food and Drug Administration's (FDA) Vaccines and Related Biological Products Advisory Committee (VRBPAC) unanimously voted to [recommend](#) that the 2024-2025 COVID-19 vaccines be updated to a formula targeting KP.2, a currently circulating strain of the virus. The FDA has [advised](#) vaccine manufacturers to develop a monovalent JN.1-lineage COVID-19 vaccine specifically targeting the KP.2 strain, if feasible. This updated vaccine will drop protection against the XBB.1.5 strain since it is no longer circulating and adjust the formula to target the JN.1 variant (Novavax), or KP.2, a descendant of the JN.1 variant (Pfizer and Moderna). The updated vaccines are expected to be ready for use beginning in the fall of 2024 as part of the fall vaccination campaign.

CDC ESTIMATES COVID-19 INFECTIONS ARE RISING IN THE U.S.

Ahead of the fall vaccination season, [CDC estimates](#) that COVID-19 infections are likely increasing in 45 states and territories based on data from emergency department visits. [CDC wastewater surveillance](#) also suggests that on a national level COVID-19 viral activity is relatively high and has been steadily rising over the past few weeks. Health experts note that the summer uptick in COVID-19 infections can be partially attributed to the appearance of new COVID-19 variants. [According to CDC](#), the KP.2 and KP.3 strain are currently the most prevalent COVID-19 variants in the U.S. and account for nearly half of all infections. [CDC officials pointed out](#) that there is, “no evidence that KP.2, KP.3, or any other recent variant, causes more severe disease.”

STUDY SHOWS UNFLAGGED VACCINE-SKEPTICAL CONTENT ON SOCIAL MEDIA MAY CAUSE VACCINE HESITANCY

A [recent study](#) published in the journal **Science** examined the impact of flagged social media vaccine misinformation and unflagged social media vaccine-skeptical content on COVID-19 vaccine hesitancy in the U.S. Researchers defined “vaccine-skeptical” as deceptive content that raised questions about vaccines without containing outright false information. The results showed that unflagged vaccine-skeptical content significantly reduced COVID-19 vaccination intention by 2.3 percentage points per Facebook user, compared to 0.05 percentage points for flagged misinformation – a 46-fold difference. Although flagged vaccine misinformation also lowered COVID-19 vaccination intentions, it had much less of a role in driving vaccine hesitancy compared with vaccine-skeptical content not flagged by fact-checkers. The researchers note that while limiting the spread of misinformation is important, these findings suggest that it is also important to scrutinize factually-accurate but misleading content as well.



Vacunas para todos (Vaccines for All)[™] National Hispanic Network is funded in part by the Hispanic Family Equity Fund of the Healthy Americas Foundation and by the U.S. Department of Health and Human Services (HHS) as part of an award from the Centers for Disease Control (CDC). The contents of this newsletter are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by CDC, HHS, or the U.S. Government.