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VACUNAS (VACCINES) UPDATE

National Alliance for Hispanic Health

THE U.S. EXPERIENCED ITS FIRST WINTER WITHOUT A SUBSTANTIAL COVID-19 SURGE

Due to a combination of vaccination and increased immunity, improved COVID-19 treatments, less severe infections, and a portion of people following mitigation measures, the U.S. has experienced its first winter without a substantial COVID-19 surge. According to data from the CDC, during this past winter, cases peaked at 472,601 the week of December 7, 2022, which is the first time a peak in COVID-19 cases has not surpassed 1 million. Health experts note that there are inconsistencies when comparing COVID-19 case rates in past winter surges to the most recent winter due to a decline in testing. However, the lower number of COVID-19 cases, hospitalizations, and deaths this past winter is still a reasonable indication of a less severe winter season compared to previous years.

Nevertheless, it's important to remember that a new COVID-19 variant could emerge and lead to another wave in cases. Even if you have been diagnosed with COVID-19 before, reinfection is possible as we know that protection from infection-related immunity wanes over time, just like protection from vaccination.

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The CDC encourages anyone who has not received their primary series or updated booster dose to do so now to better protect themselves from severe illness and death. This is particularly true for adults ages 50 and over who are immunocompromised or have weakened immune systems, and people with underlying health conditions. Stay up to date with your COVID-19 vaccines and visit www.vacunashelp.org for more information and www.vaccines.gov to find a COVID-19 vaccine near you.

FDA ANALYSIS SHOWS COVID-19 REBOUND OCCURS REGARDLESS OF PAXLOVID USE

Paxlovid is an authorized COVID-19 treatment for adults and children 12 years of age and older who are at high risk for severe COVID-19 health outcomes. It is an oral antiviral drug that should be taken as soon as possible after being diagnosed with COVID-19 and within 5 days of symptom onset. According to federal data, around 8 million doses of Paxlovid have been administered in the U.S. In some cases, patients who have taken Paxlovid report a rebound in COVID-19 symptoms and test positive for COVID-19 after previously testing negative. Despite these cases of COVID-19 rebound, FDA officials continue to support the use of Paxlovid citing an analysis that shows rates of COVID-19 rebound were similar between patients who received Paxlovid and those who received a placebo. The FDA analysis could not identify a clear association between Paxlovid treatment and COVID-19 rebound stating that rebound may occur as part of the natural progression of COVID-19.

CDC AUTHORIZES ADDITIONAL UPDATED (BIVALENT) COVID-19 BOOSTERS FOR VULNERABLE PEOPLE

The CDC has authorized additional updated (bivalent) COVID-19 boosters for adults 65 and older and those who are immunocompromised. Adults over the age of 65 are now eligible for an additional bivalent booster if it has been at least four months since their previous updated booster. Immunocompromised individuals may obtain a bivalent dose if at least two moths have passed since their last dose, and they may obtain additional doses at the recommendation of their healthcare provider. The CDC has authorized the additional updated booster without specifically recommending it for eligible populations, leaving the decision to the discretion of people and their healthcare providers. The updated booster would continue to be free, regardless of insurance coverage, until the U.S. government has depleted its current supply of updated boosters. In addition, the CDC simplified COVID-19 vaccinations for everyone. Going forward, anyone who will receive a Pfizer-BioNTech or Moderna shot, whether for an initial shot or a booster, will receive a single bivalent dose as the original monovalent mRNA vaccines are no longer authorized.

While this new authorization is a welcome change and will offer additional protection for older adults and immunocompromised persons, the reality is that only 27% of Hispanic adults and only 39% of non-Hispanic white persons have received a bivalent booster shot. Therefore, much work can still be done to educate your communities about the importance of staying protected against COVID-19.

CDC COVID-19 TESTING LOCATOR WEBSITE

The CDC has launched the COVID-19 Testing Locator to help people find free COVID-19 testing sites near them. The locator is available in English and Spanish. It is part of the CDC's Increasing Community Access to Testing (ICATT) program, which provides COVID-19 testing at no cost to people with or without health insurance who are experiencing symptoms or have been exposed to someone with COVID-19.

RISK FACTORS ASSOCIATED WITH LONG COVID

A recent analysis of research conducted between the beginning of the pandemic and December 5, 2022 found that being female, being over 40, having a higher body mass index, smoking, having previous health issues, and experiencing severe COVID-19 infection were risk factors significantly associated with developing long COVID. The analysis also showed that people who received two doses of a COVID-19 vaccine prior to infection were 43% less likely to develop long COVID, even in people with risk factors.

Findings showed that women were 1 ½ times as likely as men to develop long COVID. Patients with long COVID in the analysis were about 20% more likely to be older than 40. People who were obese or smoked were also found to be at increased risk for long COVID. Patients who were immunocompromised exhibited the greatest increased risk of long COVID. Those diagnosed with chronic obstructive pulmonary disease, ischemic heart disease, or asthma experienced the next highest levels of increased risk. People who suffered from chronic kidney disease, diabetes, anxiety, or depression also had an increased risk of long COVID. Patients in the analysis who were hospitalized were almost 2 ½ times as likely to develop long COVID than those were not hospitalized.

FDA AUTHORIZES BIVALENT PFIZER-BIONTECH COVID-19 VACCINE AS BOOSTER DOSE FOR CERTAIN CHILDREN AGES 6 MONTHS THROUGH 4 YEARS

The U.S. Food and Drug Administration authorized and CDC updated its guidance to allow children ages 6 months through 4 years to now receive a booster dose of Pfizer's updated (bivalent) COVID-19 vaccine. Children must have completed the full 3-dose monovalent Pfizer COVID-19 primary series more than 2 months ago. The updated vaccine contains a bivalent formula that both boosts immunity against the original COVID-19 strain and adds an Omicron BA.4 and BA.5 spike protein component to protect against newer variants.

This update only applies to children ages 6 months through 4 years who completed Pfizer's 3-dose monovalent COVID-19 primary series. Children who received Pfizer's updated (bivalent) COVID-19 vaccine as third dose in their 3-dose primary series are not eligible for a booster dose at this time and are expected to have protection against the most serious COVID-19 outcomes.

It is important to note that there are different recommendations for COVID-19 vaccines, including boosters, for people who are moderately or severely immunocompromised. Parents should talk with their child's healthcare provider about keeping their child up to date on their COVID-19 and other vaccines. The CDC definition of up-to-date for COVID-19 vaccination, including boosters, is available by clicking here and may be updated as CDC monitors data.