

Updates from the Centers for Disease Control and Prevention

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Advisory Commission on Childhood Vaccines (ACCV) meeting January 29, 2025

Recent CDC vaccine safety publications

Post-licensure Safety Surveillance of 20-Valent Pneumococcal Conjugate Vaccine (PCV20) Among US Adults in the Vaccine Adverse Event Reporting System (VAERS)

- During October 20, 2021 through December 31, 2023 VAERS received 1,976 reports after PCV20 administration in persons aged ≥19 years
- A data mining alert (EB05 = 3.812) for the MedDRA Preferred Term "Guillain-Barre syndrome" (GBS) was observed for serious reports
- The reporting rate of GBS after PCV20 receipt was 0.5 cases per million doses distributed
- CDC and FDA are investigating this further

Syncope after live attenuated influenza vaccine (LAIV): Reports to the Vaccine Adverse Event Reporting System (2003–2024)

- Syncope (fainting) after vaccination has been reported, most commonly among adolescents, and can result in injuries
- From June 17, 2003 (date of LAIV licensure in the US) through May 31, 2024, VAERS received 50 reports of syncope after LAIV
 - 15 people (30%) were injured, most commonly by falling and hitting their head or face
 - 22 people (44%) required evaluation in the emergency department or doctor's office
- Based on approximately 111.9 million doses of LAIV distributed in the US during the same time period, the reporting rate is approximately 0.4 per million doses, suggesting that syncope following LAIV is rare

JYNNEOS vaccine safety surveillance in the Vaccine Safety Datalink during the 2022 mpox outbreak in the United States

- Included 53,583 adults who received JYNNEOS
- Data mining analysis identified statistically significant clusters of health care visits for rash and unspecified adverse effects
- Non-serious medically attended adverse events, such as rash, have been previously reported and occurred infrequently
- No new or unexpected safety concerns were identified

Safety of the Seasonal Influenza Vaccine in 2 Successive Pregnancies

- **Question:** Is there an association between seasonal influenza vaccination across successive pregnancies and adverse perinatal outcomes, and is the association modified by interpregnancy interval (IPI) and vaccination type?
- Findings: In this cohort study of 82,055 people with 2 singleton pregnancies between 2004 and 2018, compared with individuals who were not vaccinated in both successive pregnancies, influenza vaccination in both successive pregnancies was not associated with an increased risk of adverse perinatal outcomes. IPI and vaccine type did not modify the findings.

Safety of Simultaneous Vaccination With Adjuvanted Zoster Vaccine and Adjuvanted Influenza Vaccine: A Randomized Clinical Trial

- Question: What is the safety of the simultaneous administration of 2 vaccines containing novel adjuvants, recombinant zoster vaccine (RZV) and quadrivalent adjuvanted inactivated influenza vaccine (allV4), among adults aged 65 years or older?
- Findings: In this randomized clinical trial comprising 267 older adults, the proportion of participants with at least 1 severe solicited reactogenicity event was noninferior in the simultaneous RZV and allV4 group compared with the simultaneous RZV and quadrivalent high-dose inactivated influenza group.

Safety of Simultaneous vs Sequential mRNA COVID-19 and Inactivated Influenza Vaccines: A Randomized Clinical Trial

- Question: What are the comparative reactogenicity, safety, and short-term effects on health-related quality of life of simultaneous vs sequential receipt of messenger RNA (mRNA) COVID-19 and influenza vaccines?
- Findings: In this randomized, placebo-controlled clinical trial of 335 persons receiving mRNA COVID-19 and inactivated influenza vaccines simultaneously vs sequentially 1 to 2 weeks apart, the proportion of participants with at least 1 moderate or severe reaction of fever, chills, myalgia, or arthralgia was not higher after simultaneous compared with sequential receipt.

CDC COVID-19 vaccine safety publications

- COVID-19 Vaccination in the First Trimester and Major Structural Birth Defects Among Live Births
- Tinnitus after COVID-19 vaccination: Findings from the Vaccine Adverse Event Reporting System and the Vaccine Safety Datalink
- Lack of Evidence for Vaccine-Associated Enhanced Disease From COVID-19 Vaccines Among Adults in the Vaccine Safety Datalink
- COVID-19 Vaccine Reactogenicity Among Young Children
- A Texting- and Internet-Based Self-Reporting System for Enhanced Vaccine Safety Surveillance With Insights From a Large Integrated Health Care System in the United States: Prospective Cohort Study

Advisory Committee on Immunization Practices (ACIP) meeting highlights

Pneumococcal Vaccines

• ACIP recommends a pneumococcal conjugate vaccine (PCV) for all PCVnaïve adults aged ≥50 years

Meningococcal Vaccines

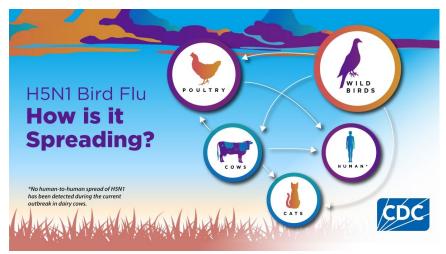
- ACIP recommends MenB-4C (Bexsero[®]) be administered as a 2-dose series at 0 and 6 months when given to healthy adolescents and young adults aged 16–23 years based on shared clinical decision-making for the prevention of serogroup B meningococcal disease
- ACIP recommends MenB-4C (Bexsero[®]) be administered as a 3-dose series at 0, 1–2, and 6 months when given to persons aged ≥10 years at increased risk for serogroup B meningococcal disease (i.e., persons with anatomic or functional asplenia, complement component deficiencies, or complement inhibitor use; microbiologists routinely exposed to N. meningitidis isolates; and persons at increased risk during an outbreak)

COVID-19 Vaccines

- In addition to previously recommended 2024-2025 vaccination:
 - ACIP recommends a second dose of 2024-2025 COVID-19 vaccine for adults ages 65 years and older
 - ACIP recommends a second dose of 2024-2025 COVID-19 vaccine for people ages 6 months-64 years who are moderately or severely immunocompromised
 - ACIP recommends additional doses (i.e., 3 or more doses) of 2024-2025 COVID-19 vaccine for people ages 6 months and older who are moderately or severely immunocompromised under shared clinical decision making

Other topics

H5 Bird Flu: Current Situation



H5 Bird Flu Detections in USA

- Dairy cattle: Ongoing multi-state outbreak
- Wild Birds: Widespread
- Poultry Flocks: Sporadic outbreaks
- Mammals: Sporadic infections
- Person-to-person spread: None
- Current public health risk: Low

Influenza and COVID-19 Vaccination Coverage Among Health Care Personnel — National Healthcare Safety Network, United States, 2023–24 Respiratory Virus Season

- The Advisory Committee on Immunization Practices (ACIP) recommends annual influenza vaccination for health care personnel. In September 2023, ACIP recommended receipt of a 2023–2024 COVID-19 vaccine for all persons aged ≥6 months.
- During the 2023–24 respiratory virus season, influenza vaccination coverage was 80.7% among acute care hospital personnel and 45.4% among nursing home personnel.
- Coverage with 2023–2024 COVID-19 vaccination was 15.3% among acute care hospital personnel and 10.5% among nursing home personnel.

Coverage with Influenza, Respiratory Syncytial Virus, and COVID-19 Vaccines Among Nursing Home Residents — National Healthcare Safety Network, United States, November 2024

- Nursing home residents are at increased risk for severe COVID-19, influenza, and respiratory syncytial virus (RSV) illness. Vaccination reduces risk for severe outcomes from these vaccine-preventable respiratory diseases.
- As of November 10, 2024, 30% of nursing home residents had received a 2024–2025 COVID-19 vaccine. Among residents at nursing home facilities that elected to report vaccination against influenza (59% of facilities) and RSV (52% of facilities), 58% had received influenza vaccination, and only 18% had received RSV vaccination.

Influenza, COVID-19, and Respiratory Syncytial Virus Vaccination Coverage Among Adults — United States, Fall 2024

- The Advisory Committee on Immunization Practices recommends that all persons aged ≥6 months, including adults aged ≥18 years, receive annual influenza and COVID-19 vaccines, and that all adults aged ≥75 years and those aged 60–74 years at increased risk for severe respiratory syncytial virus (RSV) disease receive 1 dose of RSV vaccine.
- By November 9, 2024, an estimated 34.7% and 17.9% of adults aged ≥18 years had received influenza and COVID-19 vaccines, respectively, for the 2024–25 season; 39.7% of adults aged ≥75 years and 31.6% of adults aged 60–74 years at increased risk for severe RSV disease had ever received RSV vaccine. Many unvaccinated adults reported intent to get vaccinated.

Health and Economic Benefits of Routine Childhood Immunizations in the Era of the Vaccines for Children Program — United States, 1994–2023



Immunizations protect America's children every day

CDC estimates that vaccination of children born between 1994 and 2023 will:

- <u>Prevent</u> more than 500 million illnesses
- Avoid more than 1 million deaths

MMM

<u>Save</u> nearly \$3 trillion

bit.ly/mm7331a2 AUGUST 8, 2024

http://dx.doi.org/10.15585/mmwr.mm7331a2

For more information, contact CDC 1-800-CDC-INFO (232-4636) TTY: 1-888-232-6348 <u>cdc.gov</u> Follow us on X (Twitter) @CDCgov & @CDCEnvironment

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the U. S. Centers for Disease Control and Prevention.



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