

## Explain Recommendations About Spring COVID-19 "Boosters"

You'll hear buzz about some patients needing an additional dose of COVID-19 vaccine this spring.

CDC now says that patients age 65 or older who already had a 2023-2024 COVID-19 vaccine should get an additional dose.

It's partly because COVID-19 transmission remains substantial year-round and cases tend to go up in the summer...unlike flu or RSV.

And vaccine effectiveness is expected to wane over time.

But some experts aren't convinced that every older adult needs a second dose...and there's concern about increasing vaccine fatigue.

Plus about 60% of patients 65 and up still haven't even received a first 2023-2024 COVID-19 vaccine. Encourage immunization ASAP.

Explain that there are still about 20,000 COVID-19 hospitalizations and 2,000 deaths weekly...and older adults are most at risk. But vaccination may cut the risk of severe illness by about half.

If older patients already got a 2023-2024 vaccine, suggest an additional dose...especially in those at greatest risk, such as over 75 or with chronic conditions (heart disease, diabetes, etc).

Studies from previous years indicate that an additional dose boosts protection against severe outcomes.

Explain that the second 2023-2024 dose should be at least 4 months after their last one...or 3 months since a COVID-19 infection. Any brand of the 2023-2024 COVID-19 vaccine can be used for this dose.

Be aware, there's no change to the recommendations for moderately or severely immunocompromised patients 6 months and older. They'll still use shared decision-making to consider additional vaccine doses.

Don't suggest an additional dose for immunocompetent adults under 65...there's not enough added benefit and it's not cost-effective. But recommend annual COVID-19 vaccination if patients aren't current.

Anticipate that FDA will decide on the strains for the 2024-2025 COVID-19 vaccines in May...and CDC will vote on the fall plan in June.

Check our resource, COVID-19 Vaccines, for updates.

## **Key References:**

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