



#### VCHIP CHAMP VDH COVID-19

#### August 4, 2021 | 12:15-12:45pm Call Questions and Answers\*

Wendy Davis, MD, FAAP, Vermont Child Health Improvement Program, UVM Breena Holmes, MD, FAAP, Vermont Child Health Improvement Program, UVM

#### **Questions/Discussion**

## Q: Is there any data that shows if the increased cases are community acquired verses summer school/summer camps?

A: Breena Holmes, MD, VCHIP (verbally): Dr. Levine speaks about this. There are no outbreaks in Vermont accounting for cases. There are people who get it from someone in their family and there are people who have traveled to other parts of the country and then return and have tested positive.

# Q: Would love to hear from primary care folks here if you are giving Covid vaccine in the office. How is it going? How is the counseling going? Any success stories? Also curious if folks are running into the issue of eligible adolescents wanting the vaccine but parents say no.

A: Sarah Weidhaas, MD, Springfield Health Center: Still hearing concerns from parents having a hard time finding Pfizer in our area (Springfield). I am wondering what the holdup is for Moderna (which we have in the office)? Monday we would have been able to give three kids their vaccine but they needed Pfizer.

A: Becca (Rebecca) Bell, MD, UVM Medical Center: Yikes Sarah - this is not ok. Thank you for this update. Is there anyone on the call from VDH can help get Pfizer into Sarah's office? Access should not be an issue at this point.

A: Sarah Weidhaas, MD, Springfield Health Center: It has to do with the amount we need to order per admin. A: Nathaniel Waite, RN, Vermont Department of Health: The school liaison for Springfield is on, Kate Roome. A: Breena Holmes, MD, VCHIP: Sarah- thank you for continued feedback on this frustrating situation. Have you tried talking to Becky Thomas at Springfield district health office?

*A: Ilisa Stalberg, Vermont Department of Health: I am trying to get confirmation on the infant testing question. Thanks.* 

A: Judy K. Orton, MD, Green Mountain Pediatrics: It feels like in my practice, those willing/wanting the vaccine (eligible peds patients and parents) have either had it, or have scheduled with us in the past 6 weeks. No surprise, those parents (mostly 20 - early 30 somethings) who are not vaccinated do not allow their 12+ children to get it. Parents not vaccinated are adamant about not getting vaccinated. Those non-vaccinators are the ones who frequently show up without a mask and/or not wearing a mask very well (though their young children rock the mask wearing). We have some positive tests among parents or daycare contacts this past week, so our testing rate is ramping back up.

*A:* Sarah Weidhaas, MD, Springfield Health Center: No, I have only asked our health center director *A:* Becca (Rebecca) Bell, MD, UVM Medical Center: Thank you for the update Judy.

A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: Are practices able to batch giving Pfizer? There are six doses in a vial.

A: Elizabeth Hunt, MD, Timber Lane Pediatrics: We have been testing LOTS of kids for a variety of symptoms and it's going well. Those we send to Fanny Allen are being tested efficiently. Results are still quick. Some of the pop up sites are not open on Fridays or they do not have slots that fit the family's schedule so the asymptomatic families who need testing have been asking for Fanny Allen referrals from us a bit more lately.





A: Kate Roome, RN, VDH: Hi All, we did our first walk-in clinic at the VDH Springfield yesterday. They will offer Pfizer and are held Tuesdays, 9-1.

A: Michelle Dorwart, MD, UVM Medical Center: At CHCB we are giving Pfizer and J&J. An email gets sent when vials are open to notify of when the vial must be used.

A: Michelle Dorwart, MD, UVM Medical Center: We have also had pretty good success with testing all ages of patients - but we are close to UVMMC and that's where our samples go - results have been very quick.

#### Q: Is there any data about breakthrough cases and when vaccines were given (waning immunity)?

A: Benjamin Lee, MD, UVM Children's Hospital & Larner COM Dept. of Pediatrics: Elliot, that is a good question. I believe the data are currently scarce, but we do know that antibody levels start to dip 6 months after vaccination, but how much the increased breakthrough infection rate is purely due to that, due to Delta, or more likely both, is still being worked out

A: Benjamin Lee, MD, UVM Children's Hospital & Larner COM Dept. of Pediatrics: FYI: here is some further info on waning immunity: <u>https://www.medrxiv.org/content/10.1101/2021.07.28.21261159v1.full.pdf</u>

A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: The Israeli experience is illuminating. It would appear that even though the vaccine remains effective against severe disease, there is waning protection against infection. Based on the most recent cohort, prevention against infection may be only 40% more than six months after dosing.

A: Benjamin Lee, MD, UVM Children's Hospital & Larner COM Dept. of Pediatrics: It is worth noting that the breakthrough rate in Israel is a bit of an outlier. Rates have been much higher there than observed elsewhere, unclear to me why. At any rate, as Bill said, the vaccines are highly effective against severe illness and it is worth remembering that rates of breakthrough infections still remain low overall.

### Q: All of us health care providers started getting vaccinated in Oct/Nov, so we are more than 6 months out. Will that be addressed by the state or CDC?

A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: There is some talk of booster doses for those over 65 but I have not heard about health care workers. Pfizer and the FDA are still working through the data and what the next steps may be. A: Benjamin Lee, MD, UVM Children's Hospital & Larner COM Dept. of Pediatrics: Liz, so far, the stance from CDC and others here is that for most boosters are not necessary, although there is discussion about immunocompromised/advanced age. I am not aware of health care workers specifically being considered at this time.

Re: Benjamin Lee, MD, UVM Children's Hospital & Larner COM Dept. of Pediatrics: I would NOT advise offlabel use of COVID-19 vaccine in younger children. I think there is too much at stake in terms of "getting this right"...

## Q: Ben, any info on why Moderna approval for 12 and up delayed? It is already approved in the EU. The internet is silent on this lol!

A: Benjamin Lee, MD, UVM Children's Hospital & Larner COM Dept. of Pediatrics: Sarah, I have no idea. I agree it has been two months since submission and crickets... I wonder if part of the challenge is if FDA is overwhelmed right now, trying to get the full approval reviewed as quickly as possible (just me speculating).

Q: Thoughts from the Infectious disease Docs: With many cafeteria tables being round, should school nurses advice to administration be avoiding face-to-face when eating lunches (no masks, obviously)?





A: Benjamin Lee, MD, UVM Children's Hospital & Larner COM Dept. of Pediatrics: Hi Soph! Meals will continue to be a challenge. Yes, I think not having face-to-face eating is advisable (if possible), and distancing when masks are off and kids are eating.

A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: We still recommend distancing indoors when unmasked. Schools will have to use space wisely, including classrooms.

A: Soph Hall, MEd, BSN, RN, NCSN, VSSNA: Ben & Bill--thanks! You can imagine the school nurses are stressing with the vagueness and confusion coming from AOE.

*A: Ilisa Stalberg, Vermont Department of Health: I just heard that the guidance is expected to come out this afternoon.* 

A: Ilisa Stalberg, Vermont Department of Health: CDC put out some guidance and VDH is considering this now. A: Becca (Rebecca) Bell, MD, UVM Medical Center: Here are the general messages we can give to parents right now re: school

1. Kids should go to school. Benefits outweigh the risks. We are lucky in VT and can have a good school year with careful attention to the school setting.

2. Everyone should wear a mask in schools. Buy some masks. Get used to masks.

*3. Everyone should be vaccinated. 27,000 Vermont adolescents have been vaccinated. Over 10 million adolescents in the U.S. have been vaccinated. Now's the time.* 

4. Be prepared for sick days/quarantine days.

A: Stephanie Winters, Vermont Medical Society: <u>http://aapvt.org/news/aapvt-feedback-return-school-guidance</u>

# Q: With recent reports suggesting asymptomatic transmission possible by vaccinated with the Delta variant, any data on how much asymptomatic vaccinated are contributing to transmission chain?

A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: K: We are not sure. Clearly it occurs but I do not know to what degree. In P-town most were not symptomatic. The viral load data is sobering but directly linking viral load to contagiousness is challenging.

A: Benjamin Lee, MD, UVM Children's Hospital & Larner COM Dept. of Pediatrics: An additional challenge is that breakthrough infections may be underreported. Most vaccinated individuals who have asymptomatic breakthrough infections will not be getting tested unless there was a known exposure. In addition, the extent to which those individuals can still transmit is still very unclear.

# Q: Will there be changes in guidelines for quarantining and testing for asymptomatic school aged children who are close contacts of a COVID positive person (and different guidelines for vaccinated students and non-vaccinated students)?

A: Breena Holmes, MD, VCHIP (verbally): They are very clear on that in the Provincetown story and the CDC report on that but VT has not pulled out vaccinated asymptomatic people as a risk factor as of yet.