

VCHIP CHAMP VDH COVID-19

April 21, 2021 | 12:15-12:45pm Call Questions and Answers*

Wendy Davis, MD, FAAP, Vermont Child Health Improvement Program, UVM
Breena Holmes, MD, FAAP, Physician Advisor, Maternal & Child Health, Vermont Department of Health (VDH), VCHIP Senior Faculty

COVID-19 Data: School-Aged Children

Breena Holmes, MD, VCHIP, VDH: The last weeks have been much better for school-aged children, and I am just hopeful it is a trend. People asked Commissioner Levine if that is based on healthier behavior, i.e. less gathering, and he said he thinks it is a result of more people being vaccinated.

COVID-19 and Summer Plans

Breena Holmes, MD, VCHIP, VDH: We will take the high points of these revisions and summarize them on Friday's call. They very much mirror Vermont Forward and lots of removal of parameters in these guidance documents.

Questions/Discussion

Q: Are new cases assessed for whether they were vaccinated? Is that data being collected?

A: Wendy Davis, MD, VCHIP: Yes, we have some numbers from the media briefing in a moment. I am not sure how they are putting those two data collection systems together though.

Q: Were they only considered breakthrough if > 2 weeks after second dose or anyone who had a single dose?

A: Breena Holmes, MD, VCHIP, VDH: It has to be 2 weeks after second dose to be labeled break through

A: Benjamin Lee, MD, UVMCH & Larner COM Dept. of Pediatrics: Typically it would only be considered breakthrough if it occurred in a fully vaccinated person.

A: Becca Bell, MD, UVMCH PICU: Moving forward - would be great if Dr. Levine/VDH are reporting "breakthrough cases" that there is some more detail of asymptomatic, mild, mod, severe disease. Big difference in a positive test with mild symptoms and ICU admission. I worry that some portion of the population will just hear the number of breakthrough cases and think the vaccine "doesn't work".

A: Benjamin Lee, MD, UVMCH & Larner COM Dept. of Pediatrics: That is a good point. We do have to be careful here though as well, because there have been severe illnesses and deaths reported in vaccinated individuals too. The challenge on a population level is that these are more likely cases in patients who may have had an inadequate immune response to vaccine (e.g. immunocompromised individuals in whom vaccine immunogenicity is expected to be lower).

Q: Are there any emerging data re waning vs persisting immunity for those who are over 6 months out?

A: Breena Holmes, MD, VCHIP, VDH: That has been looked at extensively in the Pfizer early child, but so far so good. At 6 months out, the antibody level is as high as at the outset.

A: Wendy Davis, MD, VCHIP: Commissioner asked that during the Q&A yesterday, but now we are moving beyond the 6 month point for the folks in the clinical trials, so we are expecting more data.

A: Benjamin Lee, MD, UVMCH & Larner COM Dept. of Pediatrics: So far, the mRNA vaccines look good 6 months out.

A: Ann Guillot, MD, UVMCH: I am wondering about those who are well over 6 months out.

*Note: This is a paraphrased synopsis of the call and is not a word-for-word transcription.

Q: Can you be specific about “prepared.” We can be prepared if we have lead-time and some guidance.

A: Alex Bannach, MD, North Country Pediatrics: I agree. Particularly as guidance has been changing.

A: Kathleen Geagan, MD, Mt. Ascutney Hospital and Health Center: We need a do not know option on this one. As a hospital based practice, I am unsure what our capabilities are.

A: Lisa Gannon, MA, Primary Care Health Partners: The Pfizer vaccine for 16+ requires the deep freeze, correct? -50 degrees C? We will not be able to comply with that but could probably give Moderna to 18+.

A: Elliot Rubin, MD, University Pediatric Associates: Also, split by Moderna and Pfizer.

A: Alex Bannach, MD, North Country Pediatrics: Well, and I thought Pfizer was now just normal freezer?

A: Pfizer can be stored in the refrigerator between 2-8 C for 120 hours. In the freezer between -25 and -15 C for 2 weeks.

A: Elliot Rubin: Not looking like private Peds offices in NJ doing vaccines soon.

A: Kathleen Geagan, MD, Mt. Ascutney Hospital and Health Center: I am also hearing that they have changed some of the storage requirements for both, so it would be good to have the updated requirements.

A: Benjamin Lee, MD, UVMCH & Larner COM Dept. of Pediatrics: the challenge here is that even with slightly less restrictive storage requirements, it will still be a very different scenario than storing typical vaccines that are stable the fridge for months.

A: Ellen Gnaedinger, APRN, South Royalton Health Center: If South Royalton Health Center partnered w/ Gifford could we have unfrozen Pfizer for 5 days & store at 2-8 degrees C & use that supply & then get re-supplied from Gifford/VDH?

A: Benjamin Lee, MD, UVMCH & Larner COM Dept. of Pediatrics: It is possible, but the greatest concern I have in general is the potential for much more wastage if not all the doses get use up once they are moved to higher temperature storage.

A: Alex Bannach, MD, North Country Pediatrics: I’m thinking the same, NCH for backup storage and keep 2 week supply in office, could start creating a call list of patients interested to be called if leftover doses.

A: Ellen Gnaedinger, APRN, South Royalton Health Clinic: Our clinic would have patients signed up ahead of time, we do that w/ our school flu clinic; it might work. :)