

## VCHIP VDH COVID-19 Q&A Chat February 9, 2022

### 4<sup>th</sup> Round of Boosters

**Q: Bill or Ben, any update on possible booster (4th dose) for high risk groups (with/without healthcare providers) in the US? Do data from Israel support it? Best timing? Other countries now starting to recommend...Thanks**

*A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: The fourth dose was not a game changer. It boosted antibody levels but did not change the risk of Omicron by much. I am a bit dubious that a fourth dose of the original vaccine is the way to go in the future.*

### AOE Protocol Flowchart

C: Becca (Rebecca) Bell, MD, UVM Medical Center: Here it is to click on:  
<https://education.vermont.gov/documents/covid19-jan-2020-protocol-flowchart>

### 6m-4y Vaccine

C: 02.08.2022 Memo: <https://www.healthvermont.gov/sites/default/files/documents/pdf/HS-IZ-Memo-02.07.22-Provider-Preparation-6m-4y-COVID19-Vaccine.pdf>

**Q: At this point, still 2 doses for 6mo-4yr?**

*A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: Yes, still two doses now. It may be that 2-4 will get a third dose (if the data supports it).*

*A: ACIP discussed a ton on 2/4. We're still awaiting official CDC guidance related to what that was discussed including the spacing. We meet with CDC this afternoon and I suspect this will be a topic of conversation.*

**Q: Did it totally not work? Or worked but not well? Just to be sure I have it right.**

*A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics (verbally): They haven't released the neutralizing antibody levels to the best of my knowledge but they're quite clear that children between the ages of 2-4, they didn't have the same titers as the comparative groups. That's what we've been doing. We've been comparing immunologic responses in these children to the 16 – 30 group. Clearly the 2-4 did not meet that. The younger children actually got there. I don't know how much lower. It's not that it not immunogenic. It just wasn't to the same level as we had hoped. We don't have a strong correlative protection, we don't know exactly what to do with that information.*

*A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics (verbally): I'm a bit worried about the messaging for kids 2-4. How do we explain that the vaccine isn't effective in that age group and that we hope a third dose will provide some protection. I'm worried it's going to shake some faith in the process. It's a bit unusual to give emergency use authorization for a product that didn't work. There will be some complexity with some children being on a 2 dose schedule and some being on a 3 dose schedule.*

*A: I wonder how many parents will want to discuss the vaccine with their pediatrician before they sign up for vaccine, and how we will accommodate all those questions.*

*A: Monica Ogelby, Vermont Department of Health (verbally): Not yet, I can say that there is data on a third dose as part of the series that is supposed to be submitted by the end of quarter 1. We'll have to see what that data yields as well.*

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### Grant Support

**Q: Many local independent pediatric offices are short staffed at this time. While we are excited to be the primary site for vaccines for the 6 month - 4 years age group, to meet our patient demand in this age group we will likely need to run additional evening and weekend clinics, which will mean asking more from our providers and staff. Can the state offer independent practices additional funding or support in running these clinics?**

*A: There is grant funding from the AAP state, 1,000/clinic, up to 10k.*

*A: Contact Stephanie Winters.*

*A: Merideth Plumpton, RN, Vermont Department of Health (verbally): The AAP has extended the grant to fund for staffing, renting a location for COVID or flu vaccine, in any way for your office to deliver the COVID vaccine.*

*A: Stephanie Winters, Vermont Medical Society (verbally): You get the money for doing the clinic. How you spend the money is up to you, so I don't need to know what it is used for.*

*A: <http://www.aapvt.org/news/aapvt-chapter-still-accepting-grant-applications-flu-and-covid-19-vaccines>*

*A: We have medical students now who are cleared to give vaccines. Andrew Meshnick and Jess VanNostrand are helping to coordinate this--the state has approved them.*

### Additional Staffing

**Q: Also, would the reserve corps be able to come to private clinics to help?**

*A: These medical students are part of the reserve corps now.*

*A: Medical students are NOT expected to be paid for their volunteer work to give immunizations.*

### Vaccine Intervals

**Q: Have people heard about potential changes in the vaccine interval for Covid vaccines? Wondering about if we know any timing for those changes (and the scheduling changes that will follow).**

*A: Yes. We expect some changes especially related those who are immunocompromised.*

*A: Merideth Plumpton, RN, Vermont Department of Health: For Immunocompromised patients we are waiting for updated guidance from CDC <https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2022-02-04/08-COVID-Hall-508.pdf>.*

**Q: Becca (Rebecca) Bell, MD, UVM Medical Center: What about the discussion about spacing doses from 3 weeks to 8 weeks? I know Canada presented some data on this to reduce myocarditis risk.**

**Q: Right. The FDA approved changing it to 8 weeks, right? Is the ACIP going to be meeting about this?**

*C: Becca (Rebecca) Bell, MD, UVM Medical Center: <https://publications.aap.org/aapnews/news/19540/CDC-panel-supports-longer-interval-between-mRNA>.*

*C: Becca (Rebecca) Bell, MD, UVM Medical Center (verbally): ACIP discussed CA approved immunogenicity and reduced risk of myocarditis if the persons 2<sup>nd</sup> dose of mRNA vaccines are spaced between 3 weeks and 8 weeks. The link has more information.*

*C: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics (verbally): I agree, that has not become official.*

*C: Merideth Plumpton, RN, Vermont Department of Health (verbally): We have not heard anything yet.*