Health officials are recommending everyone 6 months and older get an updated COVID-19 vaccine this fall for protection during the upcoming respiratory virus season.

The recommendation comes as protection from the previous vaccines has waned and circulating virus strains have changed.

Members of the Centers for Diseases Control and Prevention’s (CDC’s) Advisory Committee on Immunization Practices (ACIP) voted 11-0 in favor of the universal recommendation Thursday despite some hesitation about cost-effectiveness in children and adolescents. CDC Director Mandy Cohen, M.D., M.P.H., approved the recommendation.

ACIP also voted in favor of minor updates to flu vaccine recommendations for fall.

**COVID-19 vaccines**

Earlier this month, the FDA’s vaccine committee voted in favor of updating the COVID-19 vaccines to include the omicron JN.1 lineage that has been circulating in recent months. The FDA has asked manufacturers to specifically target the KP.2 strain from that lineage if feasible.

While COVID-19 rates aren’t as high as they were a couple of years ago, there still are thousands of COVID-associated hospitalizations and hundreds of deaths each week, according to the CDC.
Members of ACIP’s COVID-19 work group have been discussing whether to recommend the updated vaccines for everyone or focus on people at highest risk like those who are older or have underlying medical conditions. It ultimately recommended the full committee adopt a universal recommendation, which is projected to prevent about 30,000 more hospitalizations over the next year than a risk-based recommendation.

The universal recommendation will cover more people in case future virus mutations cause more severe or widespread disease and will give people without underlying conditions access to a vaccine.

ACIP member Jamie Loehr, M.D., FAAFP, a family physician, noted the committee received written comments from several thousand people in favor of a universal recommendation.

“It seems at least the public who are commenting are in favor of a universal recommendation and want the opportunity to get their vaccination,” Dr. Loehr said.

Dr. Loehr was one of several members who expressed concerns about data showing vaccinating children and adolescents is not as cost-effective as vaccinating older adults who have higher rates of illness. However, he and Denise J. Jamieson, M.D., M.P.H., said they were swayed by data showing there are numerous vaccines the CDC recommends for children that had lower hospitalization and death rates than COVID when they were approved.

“I think it’s really important that we not get too caught up in cost effectiveness,” said Dr. Jamieson, vice president for medical affairs and dean at the Carver College of Medicine at the University of Iowa. “Currently, if we compare it to other vaccine-preventable disease(s) it seems like a really good investment.”

ACIP COVID-19 vaccine work group Chair Matthew F. Daley, M.D., FAAP, senior investigator at the Institute for Health Research at Kaiser Permanente Colorado, lamented that some parents are under the mistaken impression COVID-19 doesn’t cause severe illness in children.

“It does cause bad disease in children, just less frequently than it does in older groups, and I think that narrative, we need to change,” he said. “… There’s significant burden in pediatric age groups that can be prevented through vaccination.”

Half of children and adolescents hospitalized with COVID-19 have no underlying conditions, according to the CDC. In addition, just 5% of those with a COVID-associated hospitalization since last fall had received a 2023-'24 COVID-19 vaccine.

Dr. Loehr and ACIP Chair Helen Keipp Talbot, M.D., urged manufacturers to lower the cost of COVID vaccines, which are a financial burden for health care providers when demand is low.

“We’re in a position where we still have a lot of morbidity and mortality in kids,” said Dr. Talbot, professor of medicine at Vanderbilt University in Tennessee. “We feel compelled to make sure we protect them, which is the right thing to do. However, I’m not sure that the cost is sustainable.”

Moderna, Pfizer-BioNTech and Novavax are updating their COVID-19 vaccines and expect to have them ready in August or September pending final sign-off from the Food and Drug Administration.

Uptake of the 2023-'24 COVID-19 vaccines was low — 6% for children ages 6 months-4 years, 13% for ages 5-11 years, 18% for ages 12-17 years and 23% for adults, according to the CDC. ACIP members urged health care providers to talk to their patients about getting an updated vaccine this fall.
Influenza vaccines

ACIP members voted 11-0 in favor of influenza vaccination of all people ages 6 months and older who do not have contraindications for the 2024-'25 season. The recommendation was then approved by CDC Director Cohen.

This year, all influenza vaccines will be trivalent due to the removal of the influenza B Yamagata component for the 2024-'25 season. The strain has not circulated since March 2020. The trivalent vaccines will have an updated influenza A (H3N2) component. The influenza A (H1N1)pdm09 and influenza B Victoria lineage components will remain the same.

The group also reviewed 2023-'24 influenza season data. As of March 5, approximately 158 million doses of influenza vaccine had been distributed in the United States, and no new safety concerns were identified, according to the Vaccine Adverse Event Reporting System.

The AAP’s 2024-'25 flu season recommendations continue to call for everyone 6 months and older to get vaccinated. Any licensed vaccine appropriate for age and health status can be used.

Resources

- CDC clinical considerations for administering COVID-19 vaccines
- AAP COVID vaccination resources
- AAP pediatric COVID-19 vaccine dosing quick reference guide
- CDC COVID Vaccination Field Guide
- AAP/Health and Human Services COVID vaccine toolkit
- Information for parents on COVID vaccines from HealthyChildren.org
- Information for parents on flu vaccine from HealthyChildren.org
- AAP flu toolkit

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