Immunization Recommendations for the 2023–2024 Respiratory Disease Season: At-A-Glance

INFLUENZA • COVID-19 • RESPIRATORY SYNCYTIAL VIRUS (RSV)



CDC recommends the following for the 2023–2024 respiratory disease season:

- Everyone ages 6 months and older receive influenza vaccination.
- Everyone ages 6 months and older receive COVID-19 vaccination.
- Infants, some young children, and pregnant persons receive RSV immunization routinely.
- Older adults receive RSV immunization using shared clinical decision-making.

It's important that people stay caught up on **all** recommended vaccines. When patients make an appointment for fall and winter vaccination, offer all other routine vaccines that are due.

Influenza

What products are available?

Available vaccines include inactivated injectable, recombinant injectable, and live attenuated nasal spray vaccines.

Note: Live attenuated vaccine is not recommended for people who are pregnant or immunocompromised.

Who should be vaccinated? How many doses?

- **6 months through 8 years:** 1 or 2 doses depending on vaccination history
- 9 through 64 years: 1 dose
- 65 years and older: 1 dose. High-dose inactivated, recombinant, or adjuvanted inactivated vaccines are preferred. If not available, another age-appropriate vaccine should be used.

When is vaccination recommended?

September or October for most people. Vaccination should continue beyond October for those not yet vaccinated.

How effective is vaccination?

Vaccination generally reduces the risk of illness by **40% to 60%** when vaccine matches circulating viruses.

Effectiveness can vary based on multiple factors.

What are the potential side effects?*

Side effects tend to be mild or moderate, temporary, and like those experienced after other vaccinations.

There may be a small increased risk of Guillain-Barré Syndrome (GBS) after inactivated influenza vaccine. Some studies have observed a higher risk for GBS after influenza infection than vaccination.

COVID-19

What products are available?

Updated (2023-2024 Formula) COVID-19 vaccines:

- Novavax (protein subunit)
- Moderna/Spikevax (mRNA)
- Pfizer-BioNTech/Comirnaty (mRNA)

Who should be vaccinated? How many doses?

Most people (not moderately or severely immunocompromised)

- 6 months through 4 years: At least 1 dose (2023–2024 vaccine); may need multiple doses depending on vaccination history
- 5 years and older: 1 dose (2023–2024 vaccine)[†]

Moderately or severely immunocompromised

 At least 1 (2023–2024 vaccine) dose; may need multiple doses depending on vaccination history; optional additional doses

When is vaccination recommended?

As soon as the recipient is eligible

How effective is vaccination?

Last year's vaccine was about **40 to 60%** effective against hospitalization. Data on this year's vaccine is not yet available.

Effectiveness can vary based on multiple factors

What are the potential side effects?*

Side effects tend to be mild or moderate, temporary, and like those experienced after other vaccinations.

There is a rare increased risk of <u>myocarditis</u> and <u>pericarditis</u> after COVID-19 vaccine. The Advisory Committee on Immunization Practices (ACIP) and CDC determined that the benefits of COVID-19 vaccination outweigh the rare risk of myocarditis and pericarditis in all populations.

^{*} As with any medicine or vaccine, there is a remote chance of an immunization causing a severe allergic reaction.

[†] People ages 12 years and older who have not previously received any COVID-19 vaccine doses and choose to receive Novavax should receive an initial series of 2 doses.

RSV (infants)*

What products are available?

Nirsevimab (Sanofi and AztraZeneca), a monoclonal antibody that directly delivers antibodies to provide protection.

Who should be immunized? How many doses?

- Birth through 7 months; first RSV season; mother has no or unknown RSV vaccination history or RSV vaccine was received <14 days prior to birth*1: 1 dose
- Birth through 19 months and at increased risk of severe RSV disease[‡]
 - First RSV season: 1 dose
 - Second RSV season: 1 dose

When is immunization recommended?

Most infants and eligible children: October through March§

- Infants born during RSV season: Administer within 1 week of birth
- Other eligible infants: Administer shortly before the start of RSV season

How effective is immunization?

In clinical trials, nirsevimab was **79%** efficacious in preventing lower respiratory tract infection (LRTI) and **81%** efficacious in preventing LRTI with hospitalization through 150 days after immunization.

What are the potential side effects?

Side effects were uncommon after nirsevimab. The most common side effects in clinical trials were injection site reactions and rash (observed in <1% of recipients).

RSV (pregnant people)*

What products are available?

Recombinant protein vaccine

Available vaccine: Abrysvo (Pfizer)

Who should be vaccinated? How many doses?

1 dose during weeks 32 through 36 gestation*†

When is vaccination recommended?

September through January AND at weeks 32 through 36 gestation

How effective is vaccination?

In clinical trials, vaccination of mothers was 57% efficacious

in preventing RSV hospitalization in infants and **69%** efficacious in preventing severe RSV disease in infants within 6 months of birth.

What are the potential side effects?

Side effects tend to be mild or moderate, temporary, and like those experienced after other vaccinations.

More preterm births and reports of hypertension during pregnancy, including pre-eclampsia, were seen in the vaccine group than placebo group in clinical trials, but it is not known if this was related to the vaccine or simply due to chance. Vaccination during 32 through 36 weeks gestation reduces the potential risk of preterm birth.

RSV (older adults, 60+)

What products are available?

Recombinant protein vaccine

Available vaccines:

- Arexvy (GSK)
- · Abrysvo (Pfizer)

Who should be vaccinated? How many doses?

1 dose, if indicated, based on shared clinical decision making[‡]

When is vaccination recommended?

For the 2023–2024 season, providers should offer RSV vaccination now and continue year-round to eligible adults who remain unvaccinated.

How effective is vaccination?

In clinical trials, vaccination was **83 to 89%** efficacious against lower respiratory tract disease in the first RSV season.

What are the potential side effects?

Side effects are like those experienced after routine vaccinations. However, the GSK vaccine contains an adjuvant, that may be associated with local and systemic reactogenicity.

In clinical trials, six cases of inflammatory neurologic events were reported after RSV vaccination. It is not known whether these events occurred by chance or were related to RSV vaccination.

^{*} Either maternal RSV vaccination during pregnancy or nirsevimab administration for the infant is recommended to prevent RSV disease among infants, but both are not needed for most infants.

[†] Nirsevimab may be considered for infants born to vaccinated mothers in rare circumstances when, based on the clinical judgment of the health care provider, the potential incremental benefit of administration is warranted. See [insert link to MMWR] for more information.

[‡] See RSV vaccine recommendations for information on groups at increase risk of severe disease.

[§] Some localities: Schedules can be adjusted based on local epidemiology. Follow local guidance, when provided.

As with any medicine or vaccine, there is a remote chance of an immunization causing a severe allergic reaction.

Coadministration

Routine administration of all age-appropriate doses of vaccines simultaneously, also known as coadministration, is a recommended best practice. It avoids missed opportunities to vaccinate and increases the chance that a person will be up to date on their vaccinations.

Providers may coadminister COVID-19, influenza, and respiratory syncytial virus (RSV) vaccines. If these vaccines are not administered the same day, there is no required interval between them. Other eligible routine vaccines can also be coadministered following <u>General Best Practice Guidelines for Immunization</u>.

Resources for more information

Influenza

MMWR: Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices — United States, 2023–24 Influenza Season

Clinical guidance and resources:

- <u>Summary: "Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices (ACIP)—United States, 2023-24"</u>
- Information for Health Professionals
- Seasonal Influenza Vaccination Resources for Health Professionals

COVID-19

MMWR: Use of Updated COVID-19

Vaccines 2023–2024 Formula for Persons

Aged ≥6 Months: Recommendations of
the Advisory Committee on Immunization

Practices — United States, September 2023

Clinical guidance and resources:

- Interim Clinical Considerations for Use of COVID-19 Vaccines in the United States
- Interim Immunization Schedule
- U.S. COVID-19 Vaccine Product Information
- Influenza Vaccination: Information for Healthcare Professionals

RSV (infants)

MMWR: Use of Nirsevimab for the Prevention of Respiratory Syncytial Virus Disease Among Infants and Young Children: Recommendations of the Advisory Committee on Immunization Practices — United States, 2023

Clinical guidance and resources:

- Healthcare Providers: RSV Prevention Information
- Frequently Asked Questions About RSV Immunization for Children 19 Months and Younger

RSV (pregnant people)

MMWR: Use of the Pfizer Respiratory Syncytial Virus Vaccine During Pregnancy for the Prevention of Respiratory Syncytial Virus– Associated Lower Respiratory Tract Disease in Infants: Recommendations of the Advisory Committee on Immunization Practices — United States, 2023

Clinical guidance and resources:

• Healthcare Providers: RSV Vaccination for Pregnant People

RSV (older adults)

MMWR: Use of Respiratory Syncytial Virus Vaccines in Older Adults: Recommendations of the Advisory Committee on Immunization Practices — United States, 2023

Clinical guidance and resources:

- Healthcare Providers: RSV Vaccination for Adults 60 Years of Age and Over
- Frequently Asked Questions About RSV Vaccine for Adults
- Shared Clinical Decision-Making (SCDM) RSV Vaccination for Adults 60 Years and Older
- Respiratory Syncytial Virus vaccines (RSV) Fact Sheet for Healthcare Providers