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COVID-19 Pandemic, Update # 60 Booster Dose Recommended for Children Aged 5-11 Years Outpatient Prescribing of COVID-19 Therapeutics

Key Points and Recommendations:

- A Pfizer-BioNTech COVID-19 vaccine booster dose is now <u>recommended</u> for all children 5-11 years of age starting at least 5 months after completion of their primary series.
 - The total number of doses a child is able to receive depends on their immunocompromised status (see CDC's COVID-19 vaccination schedules).
 - For children who are moderately or severely immunocompromised, the <u>recommended</u> primary series is 3 doses of an mRNA vaccine followed by a booster (4th dose).
 - For children NOT moderately or severely immunocompromised, the <u>recommended</u> primary series is 2 doses of an mRNA vaccine followed by a booster (3rd dose).
 - Review CDC's <u>Interim Clinical Considerations for Use of COVID-19 Vaccines</u> (pending update).
 - A booster dose in children 5-11 years of age resulted in a 22-fold increase in geometric mean neutralizing antibody titers against Omicron compared with levels after 2 doses (see updated <u>FDA Fact Sheet</u> and <u>ACIP meeting presentation</u>).
 - COVID-19 vaccines remain safe for children (see <u>Hause et al., Pediatrics. May 2022</u> and <u>ACIP meeting presentation</u>).
 - Rates of myocarditis after COVID-19 vaccination were very low in children 5-11 years of age and were near background population rates.
 - Risk of cardiac complications (e.g., myocarditis/pericarditis) in all age groups is significantly higher after SARS-CoV-2 infection compared with vaccination, including for adolescent males (<u>Block et al., MMWR. April 2022</u>).
- Currently, all persons 5 years of age and older are recommended to receive a "primary" mRNA vaccine series followed by an mRNA "booster".
 - The "Prime + Boost" vaccination series should be recommended by all providers as part of the necessary initial vaccination series.
 - A booster dose produces higher antibody levels, a durable immune response, greater protection against infection and severe outcomes, protection from long-COVID, and results in a broader immune response that is able to protect against emerging variants (<u>Muecksch et</u> <u>al., Nature. April 2022</u>).
 - People previously infected should still receive all recommended COVID-19 vaccine doses immunity from infection alone is insufficient, and vaccination is necessary for more consistent, durable, and cross-variant protection (<u>Suryawanshi et al., Nature. May 2022</u>).

- CDC is also strengthening their <u>recommendations</u> for second booster doses persons 12 years of age or older who are moderately or severely immunocompromised, and persons 50 years of age or older (based on age alone) are now recommended to receive a second booster dose (see CDC's <u>guidance</u> for details when updated).
- Oral COVID-19 therapeutics, like Paxlovid, are available for healthcare providers to prescribe through many NH pharmacies (check the <u>COVID-19 Therapeutics Locator</u>).
 - Refer to <u>NIH</u> and <u>IDSA</u> treatment guidelines.
 - See prior CDC HAN on <u>Availability and Use of Treatments for Outpatients with Mild to</u> <u>Moderate COVID-19 Who are at Increased Risk for Severe COVID-19</u>.
 - <u>Paxlovid</u> is the preferred outpatient treatment for persons 12 years of age or older (weighing at least 40 kg) who have mild-moderate COVID-19, test positive for SARS-CoV-2 infection (e.g., by antigen or PCR test), and who are at risk for progressing to severe disease.
 - Providers should assess patients with even mild COVID-19 for treatment and, if appropriate, prescribe Paxlovid to prevent severe disease.
 - Refer to IDSA Resource for Clinicians on <u>Management of Drug Interactions with</u> <u>Nirmatrelvir/Ritonavir (Paxlovid)</u>.
 - If a patient has a contraindication to oral Paxlovid, then consider referral for an intravenous therapy (e.g., remdesivir or monoclonal antibodies), or evaluate appropriateness for oral molnupiravir (with appropriate counseling).
- NH Division of Public Health Services (DPHS) continues to host <u>monthly</u> Healthcare Provider and Public Health Partner webinars on the 2nd Thursday of each month from 12:00 – 1:00 pm (next webinar 6/9):
 - o Zoom link: https://nh-dhhs.zoom.us/s/94059287404
 - Call-in phone number: (646) 558-8656
 - o Meeting ID: 940 5928 7404
 - Password: 353809

- For any questions regarding this notification, please call the NH DHHS, DPHS, Bureau of Infectious Disease Control at (603) 271-4496 during business hours (8:00 a.m. 4:30 p.m.).
- If you are calling after hours or on the weekend, please call the New Hampshire Hospital switchboard at (603) 271-5300 and request the Public Health Professional on-call.
- To change your contact information in the NH Health Alert Network, please send an email to <u>DHHS.Health.Alert@dhhs.nh.gov</u>.

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