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Immunization Works March 2020

March 25, 2020: Content on this page kept for historical reasons.



Top Stories

Maintaining Childhood Immunizations During COVID-19 Pandemic: The COVID-19 pandemic is changing rapidly and continues to affect communities across the U.S. differently. Some of the strategies used to slow the spread of disease in communities include postponing or canceling non-urgent elective procedures and using telemedicine instead of face-to-face encounters for routine medical visits.

Ensuring the delivery of newborn and well-child care, including childhood immunization, requires different strategies. Health care providers in communities affected by COVID-19 are using [strategies to separate well visits from sick visits](#) . Examples include:

- Scheduling well visits in the morning and sick visits in the afternoon.
- Separating patients spatially, such as by placing patients with sick visits in different areas of the clinic or another location from patients with well visits.
- Collaborating with providers in the community to identify separate locations for holding well visits for children.

Because of personal, practice, or community circumstances related to COVID-19, some providers may not be able to provide well child visits, including provision of immunizations, for all patients in their practice. **If a practice can provide only limited well child visits, health care providers are encouraged to prioritize newborn care and vaccination of infants and young children (through 24 months of age) when possible.** CDC is monitoring the situation and will continue to provide guidance.

2020 Immunization Schedules: The [child and adolescent immunization schedule](#) and the [adult immunization schedule](#) are now available for [order](#) on the CDC website.

CDC encourages organizations to also syndicate content rather than copy a PDF version of the schedule onto their websites to share with visitors. Content syndication allows other organizations' websites to mirror CDC web content, with automatic updates whenever changes are made on the CDC site. This helps ensure that all schedules are current across the Internet. See how to [display the schedules on your site](#).

National Immunization Conference (NIC) and National Adult Influenza Immunization Summit (NAIIS) Canceled: The NIC and the NAIIS have been canceled because of the COVID-19 response. Efforts are being made to schedule the NIC during 2021 and leadership is considering the best options for moving forward with the NAIIS. More information will be provided as it becomes available. We continue to appreciate all those who are helping to meet the challenges of the COVID-19 response and those who continue to cover ongoing public health activities while colleagues assist with the response.

Influenza

With High Influenza Hospitalization Rates for Young Children and Young Adults, CDC Urges Preventive Steps: Hospitalization



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- Stay home when you are sick.
- Avoid close contact with people who are sick.
- Avoid touching your eyes, nose, and mouth.
- Cover your coughs and sneezes.
- Wash your hands frequently with soap and water for at least 20 seconds. When soap and water are not available, use alcohol-based hand sanitizer with at least 60% alcohol.
- Clean and disinfect frequently touched objects and surfaces.

More information on important preventive actions you can take to stop the spread of flu and other respiratory illnesses is available on the [seasonal influenza](#) site.

2020–2021 Flu Vaccine Updates Announced: The FDA Center for Biologics Evaluation and Research's (CBER) Vaccines and Related Biological Products Advisory Committee (VRBPAC) met March 4, 2020, to discuss available influenza surveillance data and make recommendations for the vaccine viruses to be included in the composition of U.S. influenza vaccines for the 2020–21 flu season. VRBPAC recommended 2020–21 Northern Hemisphere influenza vaccines contain the following components:

- Influenza A (H1N1) component:
 - The egg-based H1N1 vaccine component was updated from an A/Brisbane/02/2018 (H1N1)pdm09-like virus to an A/Guangdong-Maonan/SWL1536/2019 (H1N1)pdm09-like virus.
 - The cell- or recombinant-based H1N1 vaccine component was updated from an A/Brisbane/02/2018 (H1N1)pdm09-like virus to an A/Hawaii/70/2019 (H1N1)pdm09-like virus.
- Influenza A (H3N2) component:
 - The egg-based H3N2 vaccine component was updated from an A/Kansas/14/2017 (H3N2)-like virus to an A/Hong Kong/2671/2019 (H3N2)-like virus.
 - The cell- or recombinant-based H3N2 vaccine component was updated from an A/Kansas/14/2017 (H3N2)-like virus to an A/Hong Kong/45/2019 (H3N2)-like virus.
- Influenza B/Victoria component:
 - The B/Victoria lineage vaccine component was updated from a B/Colorado/06/2017 (B/Victoria lineage)-like virus to a B/Washington/02/2019 (B/Victoria lineage)-like virus.
- Influenza B/Yamagata component:
 - The influenza B/Yamagata lineage vaccine component was not updated. It remains a B/Phuket/3073/2013-like virus (Y3).

These updated viruses were selected based on surveillance data indicating which viruses circulated in the recent Northern and Southern Hemisphere seasons, forecasts about the viruses that will circulate during the coming season, and the immunity induced by available vaccine viruses.

New Study Sheds Light on Non Respiratory Complications of Influenza: A [study published](#)  in JAMA Network Open examines the number and impact of people hospitalized for non respiratory complications from flu. Researchers looked at medical records of over 76,000 adult flu patients hospitalized from 2010 through 2018. Results showed that most had an acute respiratory complication as expected, but nearly half also had a non respiratory complication from their flu infection. The most common non-respiratory complications reported were sepsis, acute kidney injury, and acute cardiovascular events. In many cases, severe outcomes and the demand for hospital resources were greater for cases with non respiratory complications. The study also found that patients with only acute non respiratory complications were less likely to receive antivirals (81%) compared to those with respiratory complications (89%), suggesting possible missed opportunities to more effectively manage influenza infections in hospitalized patients.



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MMWR

Global Epidemiology of Tuberculosis and Progress Toward Meeting Global Targets—Worldwide, 2018: Worldwide, tuberculosis (TB) is the leading cause of death from a single infectious disease agent, including among persons living with human immunodeficiency virus (HIV) infection. A World Health Organization (WHO) initiative, the End Tuberculosis Strategy, set ambitious targets for 2020–2035, including 20% reduction in TB incidence and 35% reduction in the absolute number of TB deaths by 2020, and 90% reduction in TB incidence and 95% reduction in TB deaths by 2035, compared with 2015. The [March 20 MMWR](#) evaluated global progress toward these targets based on data reported by WHO. Annual TB data routinely reported to WHO by 194 member states were used to estimate TB incidence and mortality overall and among persons with HIV infection, TB-preventive treatment (TPT) initiation, and drug-resistant TB for 2018. In 2018, an estimated 10 million persons had incident TB, and 1.5 million TB-related deaths occurred, representing 2% and 5% declines from 2017, respectively. The number of persons with both incident and prevalent TB remained highest in the WHO South-East Asia and African regions. Decreases in the European region were on track to meet 2020 targets. Globally, among persons living with HIV, 862,000 incident TB cases occurred, and 1.8 million persons initiated TPT. Rifampicin-resistant or multidrug-resistant TB occurred among 3.4% of persons with new TB and 18% among persons who were previously treated for TB (overall, among 4.8% of persons with TB). The modest decreases in the number of persons with TB and the number of TB-related deaths were consistent with recent trends, and new and substantial progress was observed in increased TPT initiation among persons living with HIV. However, to meet the global targets for 2035, more intensive efforts are needed by public health partners to decrease TB incidence and deaths and increase the number of persons receiving TB curative and preventive treatment. Innovative approaches to case finding, scale-up of TB preventive treatment, use of newer TB treatment regimens, and prevention and control of HIV will contribute to decreasing TB.

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Resources and Information

Epidemiology and Prevention of Vaccine-Preventable Diseases, 13th Edition (the Pink Book): Published by CDC, NCIRD, and the Public Health Foundation (PHF), the Pink Book provides health care professionals with the most comprehensive information available on vaccines and vaccine-preventable diseases. The Pink Book is available for [purchase from the PHF Learning Resource Center](#) [↗](#), and the [chapters and appendices can be viewed or downloaded](#) from the NCIRD vaccines site.

2019 Pink Book Webinar Series: This 2019 [online series of 15 webinars](#), which concluded on September 25, 2019, provides an overview of vaccination principles, general recommendations, immunization strategies, and specific information about vaccine-preventable diseases and the vaccines that prevent them. Each webinar explored a chapter from the 13th edition of the Pink Book. The webinars can be viewed online at the [Pink Book webinar web page](#). Continuing Education (CE) is available for each webinar.

“Keys to Storing and Handling Your Vaccine Supply” Video: Two of the most important safeguards for the nation’s vaccine supply are proper vaccine storage and handling. An updated [web-on-demand video](#), titled “Keys to Storing and Handling Your Vaccine Supply,” is designed to decrease vaccine storage and handling errors by demonstrating recommended best practices and addressing frequently asked questions. Continuing Education (CE) is available.

Vaccine Administration e-Learn: An [e-Learn on vaccine administration](#) is now available. Proper vaccine administration is critical for ensuring that vaccines are both safe and effective. Vaccine administration errors happen more often than you might think. Of the average 36,000 reports received annually by the [Vaccine Adverse Event Reporting System \(VAERS\)](#) [↗](#), about 1,500 are directly related to administration error. Some of the most common vaccine administration errors include:

- Not following the recommended immunization schedule
- Administering improperly stored or expired vaccine and/or diluent
- Administering the wrong vaccine—confusing look-alike or sound-alike vaccines such as DTaP/Tdap or administering products outside age indications



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for those that complete the training.

Updated Vaccine Storage and Handling Toolkit Now Available: The [Vaccine Storage and Handling Toolkit](#) has recently been updated. The toolkit is a comprehensive guide that reflects best practices for vaccine storage and handling from Advisory Committee on Immunization Practices (ACIP) recommendations, product information from vaccine manufacturers, and scientific studies. The toolkit has been updated to clarify language, including:



- Beyond use date (BUD)
- Routine maintenance for vaccine storage units
- New definition added to the glossary

Current Issues in Immunization Webinars: The 2020 child and adolescent immunization and the adult immunization schedules were the topic of the most recent Current Issues in Immunization webinar on March 18, 2020. These webinars, held several times during the year are designed to provide clinicians with the most up-to-date information on immunizations. The webinars are live, one-hour events combining an online visual presentation with simultaneous audio via telephone conference call, along with a live question-and-answer session. Registration, Internet access, and a separate phone line are needed to participate. View the [webinar web page](#) for additional information and archived webinars.

***You Call the Shots* Modules:** *You Call the Shots* is a series of interactive, web-based training courses developed through the Project to Enhance Immunization Content in Nursing Education and Training. These courses are ideal for medical or nursing students, new vaccination providers, or seasoned health care providers seeking a review. The [Pneumococcal](#) and [Hepatitis B](#) modules have recently been updated. Please visit the [You Call the Shots web page](#) to view all the modules. Continuing Education (CE) is available for viewing a module and completing an evaluation.

New Handout: “Talking to Pregnant Women about Vaccines”: Vaccines are an important part of a healthy pregnancy and pregnant women may have questions about them. Addressing their questions and any concerns about vaccines—including side effects, safety, and vaccine effectiveness—in plain and understandable language is key. CDC created the [“Talking to Pregnant Women about Vaccines handout”](#)  [1 page] for prenatal care providers to help address commonly asked questions about vaccines during pregnancy.

Redesigned HPV Vaccine Website for Health Care Professionals: As part of its effort to optimize digital content for use on multiple devices, CDC has redesigned the [HPV vaccine website for health care professionals](#). The new website includes HPV cancer statistics, continuing education resources, tips for answering parents’ questions, and more. It also features a new page on HPV vaccine safety and effectiveness data, which outlines the key data that health care professionals need to know as they address questions from parents. Please share this new resource with colleagues or members of your health care professional association.

CDC and Medscape: This special [series of commentaries](#) , part of a collaboration between CDC and Medscape, is designed to deliver CDC’s authoritative guidance directly to Medscape’s physicians, nurses, pharmacists, and other health care providers. In this series, CDC experts offer video commentaries on current topics important to practicing clinicians. NCIRD has contributed to a variety of commentaries. Check out the newest video titled [“Updated Pneumococcal Vaccine Recommendations for Older Adults](#)  ” to hear considerations for this shared clinical decision-making recommendation. You will need to sign up and log in as a member to view the commentaries and registration is free.

Immunization Resources: Various publications are available for ordering at [CDC-INFO On Demand](#). You can search for immunization publications by using the “Programs” drop-down menu and selecting “Immunization and Vaccines,” or you can search by “Title.” Hard copies of the 2020 [recommended immunization schedules](#) are now available for ordering and the schedules are free of charge.

CDC Job Openings: CDC is committed to recruiting and hiring qualified candidates for a wide range of immunization and other positions. Researchers, medical officers, epidemiologists, and other specialists are often needed to fill positions within CDC. For a current listing, including international opportunities, please visit [CDC’s employment web page](#).



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[ACIP Meeting, June 24–25, 2020, Atlanta, GA](#)

[North Dakota Immunization Conference](#) [↗](#), North Dakota Department of Health, July 14–15, 2020, Bismarck, ND

[American Immunization Registry Association \(AIRA\) National Meeting](#) [↗](#), August 11–13, 2020, Portland, OR

[ACIP Meeting](#), October 28–29, 2020, Atlanta, GA

[NCIRD Calendar of Events](#)

[Immunization Action Coalition \(IAC\) Calendar](#) [↗](#)

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