ACIP Changes for 2022 Immunizations Schedules

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Kentucky Public Health
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ACIP Changes
2022 Immunization Schedule

- ACIP Role and language surrounding vaccine recommendations
- Pneumococcal Vaccine updates
- Zoster
- Hepatitis B

Role Of ACIP

The Advisory Committee on Immunization Practice (ACIP) is a federal advisory committee that provides advice and guidance to the Director of the Centers for Disease Control and Prevention (CDC) on the most effective means to prevent vaccine-preventable diseases in the civilian population of the United States.

Vaccines and related agents (e.g., antisera, immune globulins, antiviral agents) … Food and Drug Administration (FDA)-licensed vaccines and unlicensed vaccines, if warranted

Publishes two immunization schedules annually:

- Child & Adolescent: Birth through 18 years
- Adult: 19 years and older

ACIP Charter Language

For each vaccine, the committee advises on population groups and/or circumstances in which a vaccine or related agent is recommended.

Committee deliberations on use of vaccines to control disease in the US shall include consideration of **disease epidemiology and burden of disease, vaccine efficacy and effectiveness, vaccine safety, the quality of evidence reviewed, economic analyses and implementation issues.**

The committee may revise or withdraw their recommendation(s) regarding a particular vaccine as new information on disease epidemiology, vaccine effectiveness or safety, economic considerations or other data becomes available

Affordable Care Act

ACIP recommendations become policy following approval by CDC Director and MMWR publication.

The Affordable Care Act (ACA) requires private insurance coverage for immunizations included in the approved immunization schedules without copays/deductibles when provided by an in-network provider.

Health plans have one plan year from the MMWR publication date to implement recommendations according to CDC Immunization schedules.

ACIP Recommendations

Two types of recommendations:

- ACIP does not recommend the intervention

  ACIP recommends the intervention for individuals based on shared clinical decision-making

- ACIP recommends the intervention

  ACIP recommendations that are approved by the CDC Director are considered CDC policy once published in MMWR

Centers for Disease Control and Prevention. Morbidity and Mortality Weekly Report (MMWR). Advisory Committee on Immunization Practices Recommended Immunization Schedule for Adults Aged 19 years or Older – United States, 2021. (February 12, 2021) https://www.cdc.gov/mmwr/volumes/70/wr/mm7006a2.htm

PCV15, PCV20 and PPSV23

Current

- 23-valent pneumococcal polysaccharide vaccine (PPSV23), Merck
- 13-valent pneumococcal conjugate vaccine (PCV13), Pfizer

New

- **20-valent pneumococcal conjugate vaccine (PCV20), Pfizer**
  Licensed for use in adults aged ≥18 years on June 8, 2021
- **15-valent pneumococcal conjugate vaccine (PCV15), Merck**
  Licensed for use in adults aged ≥18 years on July 16, 2021

1. www.pfizer.com/news/press-release/press-release-detail/us-fda-approves-prevnar-20tm-pfizers-pneumococcal-20-valent

2. www.merck.com/news/merck-announces-u-s-fda-approval-of-vaxneuvance-pneumococcal-15-valent-conjugate-vaccine-for-the-prevention-of-invasive-pneumococcal-disease-in-adults-18-years-and-older-caused-by-15-serot/

Age-Based Recommendation

- Adults 65 years of age or older who have not previously received a pneumococcal conjugate vaccine, or whose previous vaccination history is unknown, should receive a pneumococcal conjugate vaccine (either PCV20 or PCV15).

- If PCV15 is used, this should be followed by a dose of PPSV23.

https://www.cdc.gov/mmwr/volumes/71/wr/mm7104a1.htm?s_cid=mm7104a1_w

Risk-Based Recommendation

Adults aged 19 to 64 years with certain underlying medical conditions or other risk factors* who have not previously received a pneumococcal conjugate vaccine or whose previous vaccination history is unknown should receive a pneumococcal conjugate vaccine (either PCV20 or PCV15)

If PCV15 is used, this should be followed by a dose of PPSV23

https://www.cdc.gov/mmwr/volumes/71/wr/mm7104a1.htm?s_cid=mm7104a1_w

At-Risk Recommendations

- Alcoholism
- Chronic heart/liver/lung disease
- Cigarette smoking
- Diabetes mellitus
- Chronic renal failure/nephrotic syndrome
- Immunodeficiency, iatrogenic immunosuppression, generalized malignancy, human immunodeficiency virus, Hodgkin disease, leukemia, lymphoma, multiple myeloma, solid organ transplants
- Congenital or acquired asplenia, sickle cell disease or other hemoglobinopathies
- CSF leak or cochlear implants

Clinical Considerations

https://www.cdc.gov/vaccines/vpd/pneumo/hcp/pneumoapp.html

Clinical decision app for smartphone (updated on 2/9/22)

- When PCV15 is used, the recommended interval between administration of PCV15 and PPSV23 is ≥1 year

- A minimum interval of 8 weeks can be considered for adults with an immunocompromising condition for PCV15 and PPSV23

- Adults who have only received PPSV23 may receive a PCV (either PCV20 or PCV15) ≥1 year after their last PPSV23 dose. When PCV15 is used in those with history of PPSV23 receipt, it need not be followed by another dose of PPSV23

Clinical Consideration

- PCV15, PCV20, or PPSV23 can be coadministered with other vaccines including Covid-19 and influenza

- Adults with previous PCV13: These adults should complete the previously recommended PPSV23 series

- For adults who have received PCV13 but have not completed their recommended pneumococcal vaccine series with PPSV23, one dose of PCV20 may be used if PPSV23 is not available

PCV15

- VAXNEUVANCE™ (Pneumococcal 15-valent Conjugate Vaccine) MERCK, FDA approved July 2021

- Supplied as a single-dose prefilled syringe

- VAXNEUVANCE; PCV15; SYR; 10-pack, NDC: 00006-4329-03 Price: $149.90

- Providers can begin ordering in *March,2022*

STORAGE AND HANDLING

- Store refrigerated at 2°C to 8°C (36°F to 46°F)
- Do not freeze
- Protect from light
- The tip cap and plunger stopper of the prefilled syringe are not made with natural rubber latex

PCV 20

- PREVNAR 20 (Pneumococcal 20-valent Conjugate Vaccine), approval July2021
- For adults 19 years of age and older
- 0.5 mL suspension for intramuscular injection, supplied in a single-dose pre-filled syringe
- Provider ordering to begin in *March 2022*
- PFIZER PREVNAR 20; PCV20; SYR; 10-pack, NDC: 00005-2000-10; price $ 173.69

Preparation

Do not mix Prevnar 20 with other vaccines/products in the same syringe.

1. **Resuspend drug product: Shake Vigorously**
2. Visually inspect; don't use if not resuspended
3. Immediately use attaching a sterile needle to the luer lock syringe.

Each 0.5 mL dose is to be injected intramuscularly using a sterile needle attached to the supplied pre-filled syringe.

Storage and Handling

- Upon receipt, store refrigerated at 2 ºC to 8 ºC (36 ºF to 46 ºF)
- Syringes should be stored in the refrigerator horizontally to minimize the resuspension time.
- Do not freeze. Discard if the vaccine has been frozen.
- Prevnar 20 should be administered as soon as possible after being removed from refrigeration.
- The tip cap and plunger stopper of the pre-filled syringe are not made with natural rubber latex.

Contraindications

- Do not administer to individuals with a severe allergic reaction (e.g., anaphylaxis) to any component of vaccine or to diphtheria toxoid.

Precautions

- **Altered Immunocompetence:** Individuals with altered immunocompetence may have reduced immune responses.
- **Pregnancy:** Defer until after delivery
- **Breastfeeding:** Benefit of vaccination to mother should be assessed
- **Pediatric Use:** Data Not Established

VAERS

Report any serious adverse reactions.

- Vaccine manufacturer and/or
- The U.S. Department of Health and Human Services through the Vaccine Adverse Event Reporting System (VAERS) at
  - 1-800-822-7967,
  - Report online at www.vaers.hhs.gov.

Zoster Vaccine

- Two doses of recombinant zoster vaccine are recommended for:

  Adults aged >19 years who are or will be immunodeficient or immunosuppressed due to disease or therapy for the prevention of herpes zoster and its complications.

- Should be vaccinated before becoming immunosuppressed or consider the best timing for patient to have the best immune response

https://www.cdc.gov/mmwr/volumes/71/wr/mm7103a2.htm

Clinical Guidance

- RZV may be administered while patients are taking antiviral medications.
- Coadministration with other vaccines is permissible.
- RZV may be administered to patients who previously received varicella vaccine or have a history herpes zoster infection.
- Persons with no documented history of varicella, varicella vaccination, or herpes zoster may receive the vaccine.

Current Status of Hepatitis B In The US

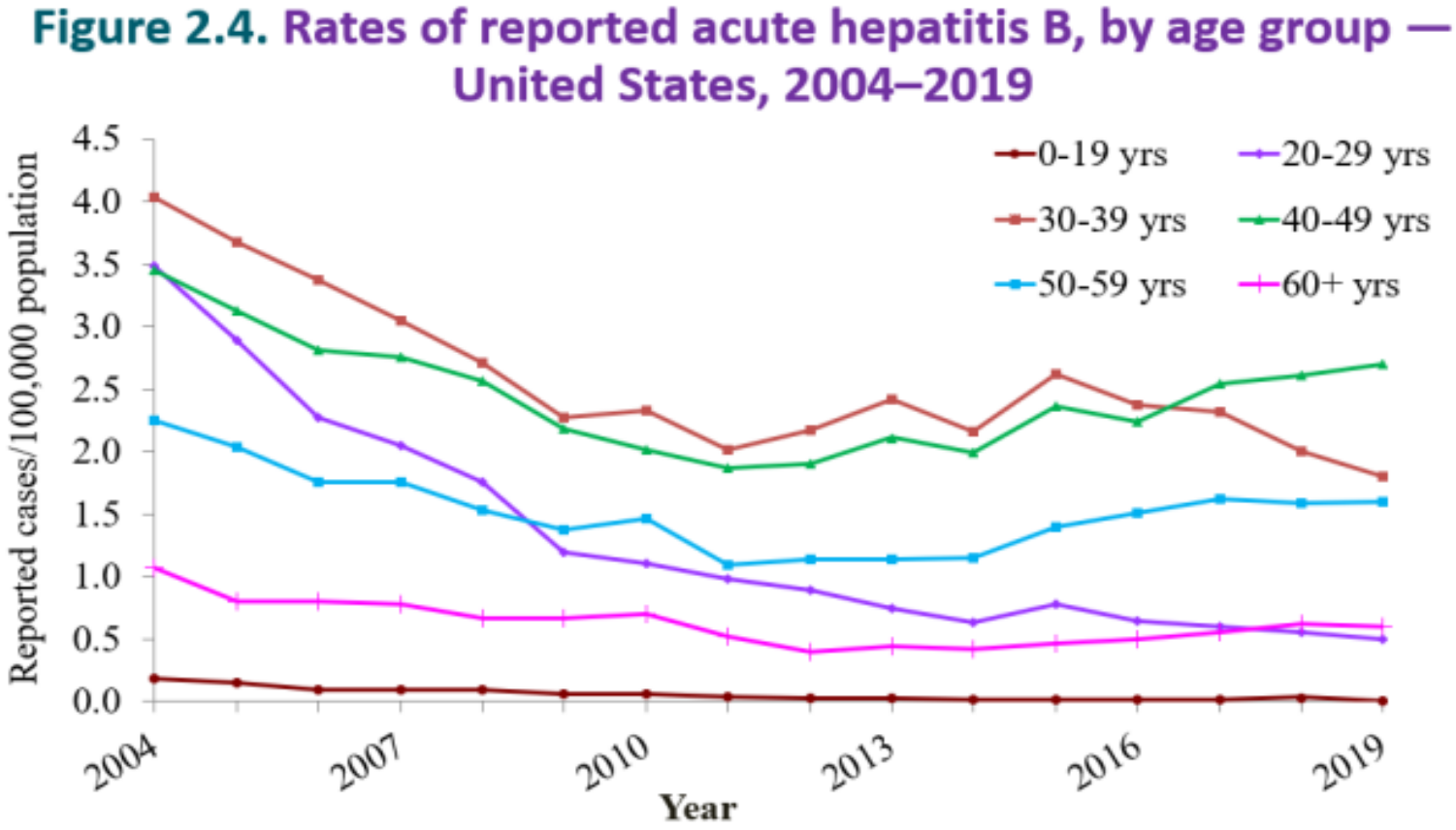
For the past 10 years:

- Total number of acute hepatitis cases have plateaued.
- Rates have been *increasing among* middle-aged and older adults.

Risk-based Hepatitis B vaccination strategy among adults has fallen short:

- Numerous risk factors; not easily integrated into provider screening
- Assumes patient recognition and disclosure of risk
- Exacerbates health disparities

Rates Of Acute Hepatitis B In The US Are Highest Among Adults And Are Rising Among >40-Year-Olds



https://www.cdc.gov/hepatitis/statistics/2019surveillance/index.htm

Hepatitis B Vote

The Advisory Committee on Immunization Practices (ACIP) recommends the following groups should receive hepatitis B vaccines:

- Adults 19 through 59 years
- Adults 60 years and older with risk factors for hepatitis B infection

The ACIP recommends the following group may receive hepatitis B vaccines

- Adults 60 years and older without known risk factors for hepatitis B infection

- ACIP Vote Changes to the Schedule Pending Release of MMWR

Thank you!

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https://chfs.ky.gov/agencies/dph/dehp/Pages/immunization.aspx

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