



Massachusetts Adult Immunization Coalition Meeting

Virtual Meeting, June 25, 2024 - 1:00pm - 3:00pm

MAIC Meeting Minutes

43 Virtual Attendees

	Name	Organization
1	Alexandra Burke	MAIC
2	Ali Lydon	Merck
3	Alisha Sullivan	Franklin Health Dept.
4	Amanda Wilhoit	MAIC
5	Amy Sgueglia	MAIC
6	Andrew Rennekamp	CSL Seqirus
7	Angela Fowler	MA DPH
8	Angela Kramer	Ludlow Board of Health
9	Bill Hagan	
10	Brett Lown	Dynavax
11	Camille Scott	N.A.H.S.E Greater Boston Chapter
12	Christy Norton	MA DPH
13	Cynthia McReynolds	MCAAP, MVCP
14	Deanna Mazina	Office of Elder Affairs
15	Debra Vescera	Blackstone Valley Partnership for Public Health (BVPPH)
16	Dee Smith	N.A.H.S.E Greater Boston Chapter
17	Gisela Yeboah	City of Lowell
18	Joyce Cohen	MA DPH
19	Judith Melin	Lahey Health
20	Kassandra Mendez	Brockton Neighborhood Health Center
21	Kathleen Talbot	Pfizer
22	Katie Betts	Sudbury Board of Health
23	Katie Kelley	AstraZeneca
24	Kelly Welch	MVCP, Team Maureen
25	Kim Balasco	The Wellness Company
26	Kim Daly	Merck
27	Kirsten Krieger	Quabbin Health District
28	Kristen Van Epps	Quabbin Health District
29	Lesa Volpe	The Wellness Company
30	Mary Ellen Casey, MSN, RN, M.Ed., CIC	Healthcentric Advisors



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31	Michele Wojtowicz	UMass
32	Nancy Molloy	
33	Pamela Worthington	MA DPH
34	Rich Aceto	Novavax
35	Rich Baker	MAIC
36	Robert Fontenelli	Pfizer
37	Sherry Schilb	Sanofi
38	Sreyduong Leng	City of Lowell
39	Stephanie Putnam	Bentley University
40	Susanne Bachle	Sanofi
41	Ted Clark	MA DPH
42	Tess Bub	Sanofi
43	Tim Temple	Pfizer

Adult Immunization Update

Angela Fowler, MD, MPH - MA Department of Public Health

[Presentation Slides](#)

ACIP Updates

- Upcoming ACIP meeting on June 26-28, 2024
- COVID-19
 - Trends in hospitalization have decreased from last year and the three years prior
 - Recommendations - everyone 6 months and older should get an updated 2023-2024 COVID-19 vaccine
 - People aged 65 years and older who received 1 dose of any updated 2023-2024 dose should receive 1 additional dose of an updated vaccine at least 4 months after the previous updated dose
 - Hybrid immunity has increased and 97% of the population has some type of immunity
 - Current guidance seems to have benefit → updated 2023-2024 COVID-19 vaccination provided significant protection against COVID-19-associated ED/UC encounters and hospitalization, compared with not receiving an updated vaccine
 - Low COVID-19 vaccine uptake this year
 - Overall, only ~20% of the population got the updated 2023-24 COVID-19 vaccine
 - Kp.2 variant has been selected to be the focus variant for the 2024-25 vaccine
- Pneumococcal Vaccine
 - Pneumococcal meningitis or bacteremia kills more than 3,000 US adults each year
 - Can result in lifelong disability including deafness, brain damage, and limb amputation
 - New Vaccine = PCV21 (Capvaxive, produced by Merck)

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- Indicated for the prevention of invasive disease and pneumonia in adults 18 years of age and older
- Based on CDC data from 2018-2021, the serotypes covered by the new vaccine are responsible for more cases of IPD in adults compared to PCV20
- In adults 50 years of age and older, Capvaxive covers 84% of IPD cases compared to 52% covered by PCV20
- Approved on the basis of immune response elicited → in individuals 18 through 49 years of age, Capvaxive elicited non-inferior immune responses compared to individuals 50 through 64 years of age
- RSV
 - RSVPreF3 (Arexvy, GSK)
 - FDA granted an expanded age indication this month
 -
 - RSVpreF (Abrysvo, Pfizer)
 - RSVpreF mRNA (mResvia, Moderna) → New!
 - Uses the same lipid nanoparticles as Moderna COVID-19 vaccines
 - Vaccines showed no safety signals
- Influenza
 - Everyone 6 months and older, with rare exception, should get an influenza vaccine every season
 - Multistate outbreak of H5N1 in dairy cows was first reported on March 25, 2024
 - This is the first time that bird flu viruses had been found in cows
 - Why is this worrisome?
 - Concern about the health of agricultural workers. H5N1 is highly pathogenic to domestic birds and to humans. Sporadic human infections with H1N1 virus have been reported in 23 countries since 1997
 - Development of pandemic strain. Antigenic shift can occur (Birds → another animal → humans). Good news is that the current circulating H5N1 lack the ability to preferentially bind to receptors in the human upper respiratory tract of humans and therefore do not currently have the ability to easily infect or transmit among people. Human to human spread has not been detected.
 - Seasonal influenza vaccine will be recommended at the ACIP meeting. This will not protect against (hypothetical) pandemic flu, but is considered a part of pandemic preparedness.
- Summary of ACIP Meeting Discussion
 - 2024-2025 COVID-19 vaccines
 - New PCV21 vaccine for adults
 - mRNA RSV vaccine
 - Extended indication for preF RSV vaccine
 - Influenza vaccine and HPAI (H5N1) surveillance

Questions



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- **Can someone explain what they mean by saying a vaccine is “noninferior” to another?**
 - When you are evaluating a new product/vaccine, you want to compare your new product to a vaccine/other products that have already been approved/proven. Oftentimes you do not necessarily have the ability to say your product is superior, you say “noninferior” to say your product performs just as well as others on the market.

Pfizer Presentation

Kathleen Talbot and Susanne Bachle - Pfizer

COVID-19 Medical Update

- Overall, the 2024 COVID-19 vaccine was effective in lowering symptomatic infection, ED/UC visits, hospitalization, and critical illness
- Vaccine had higher effectiveness at the end of 2023 compared to the beginning of 2024, particularly among preventing hospitalization
- SARS-CoV-2 surveillance and genomic analysis indicated continues evolution and diversification
- JN.1 variant lineage of the virus is taking over
 - XBB lineage viruses were almost completely displaced by JN.1 lineage viruses in wearily 2024
- JN.1 lineage viruses are NOT the direct descendants of the XBB lineage viruses, hence are antigenically distinct
 - Supports the development of a new vaccine formula

FDA’s VRBPAC Meeting on June 5, 2024

- Have currently circulating virus variants become, or are they expected to become, dominant and displace earlier variants?
- Are these circulating variants antigenically distinct from current vaccines?
- Is there evidence that current vaccines are less effective against new circulating virus variants than against previous variants?
- Voting Question: For the 2024-2025 formula of COVID-19 vaccines in the U.S., does the committee recommend a monovalent JN.1 lineage vaccine composition?
 - 16 Votes, 16 Voted Yes
 - Update on June 13 → The preferred JN.1 lineage for the COVID-19 vaccines (2024-2025 Formula) is the **KP.2 strain, if feasible**. This change is intended to ensure that the vaccines more closely match circulating SARS-CoV-2 strains.

Comment from Rich Aceto - Novavax

- If you think of JN.1 as the trunk of the tree and KP.2 and KP.3 as branches of the tree, we feel confident that a JN.1-focused formula will still be effective in preventing KP.2 and KP.3 variants.

Study Presentation from National Association of Health Services Executives (NAHSE) Greater Boston Chapter

Camille Scott - NAHSE

[Presentation Slides](#)

- Primary Goals of Study
 - Bring to light the role of retail pharmacies and grocers compared to top pharmacy chains
 - Assess immunization rates within retail grocers and pharmacies to determine the gap in care
- Objectives
 - Measure immunization access in retail pharmacies
 - Collect data on uninsured and non-covered customers
 - Design marketing material to distribute during check-out
- Impact of Study
 - As the Black population in Greater Boston continues to grow, it's crucial to assess healthcare inequities and biases
- Purpose of Study
 - Aimed to investigate healthcare disparities faced by Black individuals in Greater Boston, with a focus on health insurance, vaccine access, and information sources.
 - Help improve health outcomes for Black population
- Facts & Stats
 - Population growth of 64% since 1980 in Greater Boston Area, with more Haitian, Nigerian, Cape Verdean, and Jamaican residents providing a robust cultural diversity within the Black community
 - 50% of consumers rely on social media for health information
- Study Population
 - 155 participants, aged 19 to 65
 - Stratified by race, Black participants n= 63
- Results
 - "If you want a vaccine, do you find it easy to get them?" 55% said no
 - "How easy is it for you to learn about vaccines?" 44% said it was difficult.
 - "Do you have primary health insurance?" 44% have insurance through their employer, 24% do not have health insurance
 - "What makes it most difficult to receive vaccines?"
 - 24% said they were concerned about getting vaccinated due to trust
 - 23% said availability issues (work, school, childcare)
 - 31% of people search websites for up-to-date health information (Google/WebMD)
 - 21% refer to family and friends for health information
 - 61% said they do not have a primary care physician, family doctor, or nurse practitioner
- Barriers & Challenges
 - Losing participation from Star and Shaw Markets



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- Restarting search for new grocer/retail pharmacies to participate in survey collection
- Meeting data collection time frame
- Survey Implementation
 - Outreach efforts included contacting local churches, information faith leaders and congregations about the study's objectives, and encouraging their participation
- Next Steps
 - Looking for additional resources and support to connect with other grocery stores and retail pharmacies
 - Conducting a market analysis of available pharmacies in the research service areas
 - Expanding outreach by bringing the survey to other spaces beyond local grocers and pharmacies
- Optimal Outcomes
 - Help produce easier access to immunizations within local grocery stores and pharmacies for quicker and more efficient access
 - Improved identification of gaps in care within the community
 - Data collected helps to inform targeted interventions and policies aimed at addressing the identified needs of the community
- Questions:
 - When you were looking at your responses, did you see any differences between age groups?
 - Younger participants opted for social media to find updated health insurance and were less likely to have health insurance than older participants.
 - Is there any data for rural regions and if so how does it measure against the data you collected?
 - We have not expanded out to rural areas at this time. We are focusing on areas with higher Black and Brown populations to measure accessibility to care.
 - Certain vaccines for people covered under Medicare, for example, have coverage if administered in a pharmacy, but not in a physician office. (Ex. TDAP)

Massachusetts Vaccine Confidence Project (MVCP) Updates

Kelly Welch - MVCP/Team Maureen

[Presentation Slides](#)

- MVCP started in 2018, it is a collaboration between MAIC, MCAAP, and the Immunization Division at MDPH
- 2024 Project Funding
 - MDPH received a CDC vaccine confidence grant to enhance current MVCP activities during 2024
 - Focus areas:
 - Identify, build, and enhance relationships with trusted community partners and organizations to improve vaccine confidence with their populations
 - Develop multi-language patient-focused resources



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- Create and participate in campaigns to increase vaccine confidence
- Resource Development
 - Building Vaccine Confidence Presentation (for Health Care Providers)
 - Measles Vaccination Flier
 - Patient-facing to address vaccination before international travel
 - Take the Shot Night Manual
 - Guidebook and resource materials for organizations who want to host their own Take the Shot Night
- Provider Education
 - MCAAP Immunization Initiative Webinar Series
 - MAIC Conference
 - MA DPH Oral Health in the Commonwealth Meeting
 - 2024 MDPH Immunization Updates

29th Annual MA Adult Immunization Conference Summary

Alexandra Burke - MAIC

- Held in person on Tuesday, April 2, 2024
- 247 total attendees
- 7 Plenary Speakers
 - Vaccine Confidence, Sexual Health & Vaccines, Vaccine Equity, National and State Immunization Updates, Vaccine Hesitancy
- 62% of attendees were registered nurses
- 41% of attendees' specialities were public health, followed by family practice at 19%
- 97% of attendees rated the conference as "Excellent or Good"
- 44% of attendees were first time MAIC conference attendees!
- [Conference Website](#) is still accessible if you would like to see the slide decks from our Plenary Speakers

Updates/Questions from the Field

MAIC Members

- **Cynthia McReynolds, MCAAP** - Save the Date! The 29th Annual MIAP Pediatric Immunization Skills Building Conference will be held on Wednesday, October 30, at the DCU Center, Worcester. Conference registration will open in August. Please contact me with questions (cmcreynolds@mcaap.org). Thanks!
- **Sherry Schilb, Sanofi** - Just sending a reminder not to forget to send your flu vaccines back from the 23-24 season! Feel free to reach out if you have any questions. sherry.schilb@sanofi.com
- **Dr. Judith Melin** - Asked a question about if COVID-19 recommendations have changed for folks aged 65 and older. Dr. Fowler stated that the recommendation has not changed from February - people aged 65 and older should receive 2 doses of the 2023-24 vaccine.