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NEW MEXICO HEALTH ALERT NETWORK (HAN) HEALTH ADVISORY Urgent Need to Increase Immunization Coverage for Influenza, COVID-19, and RSV Immunizations and Use of Authorized/Approved Therapeutics in the Setting of Increased Respiratory Disease Activity During the 2023 – 2024 Winter Season

December 15, 2023

Summary

NEW MEXICO

Department of Health

Epidemiology And Response Division

The New Mexico Department of Health (NMDOH) and the Centers for Disease Control and Prevention (CDC) have issued a Health Alert Network (HAN) Health Advisory to alert healthcare providers to low vaccination rates against influenza, COVID-19, and RSV (respiratory syncytial virus). Low vaccination rates, coupled with ongoing increases in national and international respiratory disease activity caused by multiple pathogens, including influenza viruses, SARS-CoV-2 (the virus that causes COVID-19), and RSV, could lead to more severe disease and increased strain on healthcare capacity in the coming weeks. Healthcare providers should administer the recommended influenza, COVID-19, and RSV immunizations as soon as possible to patients not immunized. Healthcare providers should prescribe antiviral medications for influenza and COVID-19 for patients at high-risk of progression to severe disease, such as older adults and people with certain underlying medical conditions. Healthcare providers should also counsel patients about testing and other preventive measures, including covering coughs/sneezes, staying at home when sick, improving ventilation at home or work, and washing hands to protect themselves and others against respiratory diseases.

Background:

Reports of increased respiratory disease have been described in multiple countries recently. CDC is tracking increased <u>respiratory disease activity</u> in the United States for several respiratory pathogens, including influenza viruses, SARS-CoV-2, and RSV, across multiple indicators such as laboratory test positivity, emergency department visits, wastewater, and hospitalizations. NMDOH is also tracking indicators of increased viral respiratory infection, particularly influenza at this time <u>https://nmdoh-reports.shinyapps.io/ViralRespiratoryInfectionDashboard/</u>.

In the past 4 weeks, hospitalizations among all age groups nationally increased by <u>200% for influenza</u>, <u>51% for COVID-19</u>, and <u>60% for RSV</u>. To date, 12 pediatric influenza deaths have been reported nationally during the 2023–2024 season. High RSV activity is also occurring across much of the United States. In New Mexico, emergency department visits for influenza among school-age children have increased more than 10-fold in the past 5 weeks.

Infants, older adults, pregnant people, and people with certain underlying medical conditions remain at increased risk of severe COVID-19 and influenza disease. Infants and older adults remain at highest risk of severe RSV disease; it is the leading cause of infant hospitalization in the United States.

Vaccination for influenza, COVID-19, and RSV reduces the risk of severe disease, including pneumonia,

hospitalization, and death. Vaccination for COVID-19 can also reduce the risk of <u>MIS-C</u> and <u>post-COVID</u> <u>conditions</u>.

Influenza vaccination: <u>Vaccination coverage for the seasonal 2023-2024 influenza vaccine</u> is low in all age groups compared with the same period of the 2022–2023 season (Table 1). As of November 18, 2023, there were 7.4 million fewer influenza vaccine doses administered to adults in pharmacies and physician offices compared with the 2022–2023 influenza season. Less than 25% of New Mexicans are estimated to be vaccinated for influenza this season, and most age groups lag behind vaccination coverage compared with the 2022-2023 season.

Table 1. Initidenza vaccination coverage Estimates, onited States			
Population	2022–2023	2023–2024	
Age 6 months–17 years (as of November 11)	39.1%	35.9%	
Age ≥18 years (as of November 11)	38.4%	36.1%	
Age ≥65 years (as of November 11)	61.3%	58.6%	
Pregnant people (as of December 2)	36.0%	33.6%	

Table 1. Influenza	Vaccination Coverage	Estimates	. United States
	vaccination coverage	. Lotimates	, onneu states

- COVID-19 vaccination: Vaccination coverage for the updated 2023-2024 COVID-19 vaccine remains low. As of December 2, 2023, the percent of the population reporting receipt of this vaccine was 7.7% in children 6 months–17 years (including 2.8% in children 6 months–4 years), 17.2% in adults ≥18 years (including 36% in adults ≥65 years), and 9.6% in pregnant persons. Only 5% of eligible New Mexicans have received the updated 2023-24 COVID-19 vaccine.
- **RSV vaccination**: As of December 2, 2023, 15.9% of U.S. adults aged ≥60 years reported receiving an RSV vaccine.

Key reasons for low vaccination uptake of influenza, COVID-19, and RSV vaccines based on survey results from a nationally representative sample of U.S. adults (Ipsos KnowledgePanel and NORC AmeriSpeak Omnibus Surveys), include:

- lack of provider recommendation,
- concerns or issues about unknown or serious side effects,
- occurrence of mild side effects, and
- lack of time or forgetting to get vaccinated.

Recommendations for Clinicians:

Healthcare providers should administer influenza, COVID-19, and RSV immunizations as soon as possible to eligible patients. Immunizations can prevent hospitalization and death associated with these respiratory diseases. Immunizations are especially important for people at increased risk for severe disease. Vaccination of pregnant people against influenza and COVID-19 protects both the patient and their infants who are too young to be vaccinated. Vaccination of pregnant people against RSV protects the infant against RSV after birth and is especially important given supply issues with nirsevimab this season. Antiviral medications for influenza and COVID-19 should be recommended for all eligible

patients, especially patients at high-risk of progression to severe disease such as older adults and people with certain underlying medical conditions.

 Providers should leverage communication tools to reduce vaccine hesitancy among their patients. CDC has developed communication tools including a conversation guide and immunization call-back message template to aid provider efforts in increasing immunizations in their patient populations. Additional tools can be found at CDC's <u>Healthcare Provider Toolkit</u>: <u>Preparing Your Patients for the Fall and Winter Virus Season</u>.

What patients may say	What providers can do	Tools for providers
vaccination was recommended for	Make a strong recommendation, like "You are due for your flu and COVID-19 vaccines today. I've gotten these vaccines myself and recommend them for you, too."	Conversation Guide for Healthcare Providers
keep forgetting."	Send a reminder message to your patients now via your patient portal or text message to remind them about the importance of getting vaccinated now.	Script for patient portal reminder message in English and Spanish (download)
	Give your patients accurate and up-to-date information about vaccine benefits and safety.	Conversation Guide for Healthcare Providers
getting vaccinated."	Use motivational interviewing. Start with questions like "I hear you. If it's okay with you, I would like to spend a few minutes talking more about fall and winter respiratory vaccines."	Conversation Guide for Healthcare Providers
getting three vaccines	Discuss the facts on coadministration and the most important thinggetting all recommended vaccines.	What to Know About Getting Flu, COVID-19, and RSV Vaccines at the Same Time
so they don't need vaccines."	Let families know that while children with some health conditions are at higher risk of getting very sick, over half of the children under age 2 years hospitalized for COVID-19 and then admitted to the intensive care unit were otherwise healthy.	Conversation Guide for Healthcare Providers

 Table 2. At-A-Glance: Vaccination Conversation Guide for Healthcare Providers

- 2. Healthcare providers should administer influenza, COVID-19, and RSV immunizations as soon as possible to all eligible patients.
 - Everyone 6 months and older should receive a 2023–2024 seasonal influenza vaccine. Most people need only one dose for the season. Adults ages 65 years and older should receive high-dose, adjuvanted, or recombinant influenza vaccine, if available. Providers can consult the 2023-24 Advisory Committee on Immunization Practices (ACIP) recommendations for additional details on their patient population.
 - b. The New Mexico Department of Health "<u>Vaccines for Adults without Insurance Finder</u>" interactive map can help uninsured adults find a provider that provides vaccinations.

- c. Everyone 6 months and older should receive at least one dose of an updated 2023-2024 COVID-19 vaccine. More than one dose may be needed for children 6 months through 4 years, immunocompromised patients, and unvaccinated persons 12 years and older who choose to receive the Novavax vaccine.
- d. Adults 60 years and older may receive one dose of RSV vaccine using shared clinical decision-making with you, their provider. Both Pfizer Abrsyvo and GSK Arexvy are approved for use in adults 60 and older. Individuals and their providers should consider the patient's <u>risk for severe RSV disease</u>. Older adults at highest risk of severe disease due to RSV include those with cardiopulmonary disease and those living in long-term care facilities.
- e. There are two options to protect infants against RSV-associated lower respiratory tract disease: RSV vaccine for pregnant people and nirsevimab for infants.
 - i. Pregnant people 32 through 36 weeks gestation should receive RSV vaccination. Only the Pfizer RSV vaccine (Abrysvo) is recommended pregnant people . GSK Arexvy is not recommended for use in pregnant people.
 - ii. Nirsevimab is recommended for infants <8 months, as well as some infants aged 8 through 19 months at increased risk. Because RSV activity is surging across all continental U.S. regions, providers should use available nirsevimab doses expeditiously rather than reserving nirsevimab doses for infants born later in the season. In settings with limited nirsevimab availability during 2023–2024, please see the recent <u>CDC HAN Health Advisory about limited availability of</u> <u>nirsevimab in the United States</u> for further guidance. Neither Pfizer Abrysvo nor GSK Arexvy is approved for infants or children.
 - iii. Either RSV vaccination of pregnant people (Pfizer Abrysvo) or nirsevimab immunization for infants is recommended to prevent RSV-associated lower respiratory tract disease in infants; administration of both products is not needed for most infants.
- 3. Antiviral medications are currently underutilized but are important to treat patients, especially persons at high-risk of progression to severe disease with influenza or COVID-19, including older adults and people with certain underlying medical conditions.
 - a. Both <u>influenza antiviral medications</u> and <u>COVID-19 antiviral medications</u> are most effective in reducing the risk of complications <u>when treatment is started as early as possible</u> after symptom onset.
 - b. Testing for SARS-CoV-2 and influenza A and B viruses can distinguish among these and other co-circulating respiratory viruses to inform antiviral treatment decisions. When influenza activity is high in the community, empiric antiviral treatment can be prescribed accordingly based upon a clinical diagnosis of influenza.
 - c. COVID-19 antivirals are <u>recommended for treatment of mild to moderate COVID-19 in</u> <u>individuals at increased risk of severe illness</u> and can reduce the risk of hospitalization for <u>a wide range of patients</u>, including those who are 50 years and older and people with various medical conditions.
 - d. COVID-19 antivirals can be taken safely even with many other medications. Clinicians should <u>evaluate drug-drug interactions</u> as some medications may need to be stopped or changed.
 - e. COVID-19 antivirals can be accessed from providers, telehealth such as the <u>free Home</u> <u>Test to Treat program</u> (COVID-19 and influenza testing and antivirals available), <u>test-to-</u> <u>treat sites</u>, pharmacies with clinics, and <u>U.S. Government Patient Assistance Program</u> and manufacturer access programs.

- f. Healthcare providers can reach out to the New Mexico Department of Health (1-833-SWNURSE) 1-833-796-8773 for guidance and reporting and UNM PALS (505-272-2000/888-866-7257) for consultation on specific patients.
- 4. Healthcare providers should counsel patients about other <u>everyday preventive actions</u> they can do to protect themselves against respiratory diseases including testing, covering coughs and sneezes, washing hands wearing a well-fitting mask if a patient chooses to wear a mask, and improving ventilation in home and work environments.

Additional Resources:

Respiratory Diseases

- <u>Respiratory Disease Activity | CDC</u>
- Protect Yourself and Others from COVID-19, Flu, and RSV | CDC
- Healthcare Provider Toolkit: Preparing Your Patients for the Fall and Winter Virus Season | CDC

Influenza

- FluVaxView: Weekly Flu Vaccination Dashboard | CDC
- How to Prevent Flu | CDC
- Who Needs a Flu Vaccine | CDC
- Flu Vaccines Work | CDC
- <u>Getting a Flu Vaccine and Other Recommended Vaccines at the Same Time | CDC</u>
- Flu Activity and Surveillance | CDC
- Information for Health Professionals | CDC
- Information for Clinicians on Influenza Virus Testing | CDC
- Flu Treatment | CDC
- Summary of Influenza Antiviral Treatment Recommendations for Clinicians | CDC
- <u>Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory</u> <u>Committee on Immunization Practices — United States, 2023–24 Influenza Season | MMWR</u> (cdc.gov)

COVID-19

- CDC COVID-19 Data Tracker | CDC
- <u>COVIDVaxView Weekly COVID-19 Vaccination Dashboard | CDC</u>
- Use of COVID-19 Vaccines in the United States | CDC
- <u>NIH COVID-19 Treatment Guidelines for Adults | NIH</u>
- Interim Clinical Considerations for COVID-19 Treatment in Outpatients
- <u>COVID-19: People with Certain Medical Conditions | CDC</u>
- <u>COVID-19: Test to Treat Locator | ASPR</u>
- Indicators for Monitoring COVID-19 Community Levels and Making Public Health Recommendations
 <u>CDC</u>

- <u>RSVVaxView: Weekly Respiratory Syncytial Virus (RSV) Vaccination Dashboard | CDC</u>
- <u>RSV Information for Healthcare Providers | CDC</u>
- <u>RSV Trends and Surveillance | CDC</u>
- <u>RSV Symptoms and Care | CDC</u>

<u>New Mexico Health Alert Network</u>: To register for the NM Health Alert Network, please visit the following site <u>https://nm.readyop.com/fs/4cjZ/10b2</u> Please fill out the registration form completely and click Submit at the bottom of the page, to begin receiving Important health alerts, advisories, and updates.

<u>Please Note</u> that our system also utilizes text messaging to notify members of important health information. Due to FCC Regulation changes that are designed to decrease the amount of unwanted spam text messages sent each year to citizens, please save, this phone number (855)
596-1810 as the "New Mexico Health Alert Network" default phone number for your account used for text messages on the mobile device(s) you register with us.

RSV