ADULT IMMUNIZATIONS

(AND HOW TO GET PATIENT BUY-IN)

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Table 1 Recommended Adult Immunization Schedule by Age Group, United States, 2023

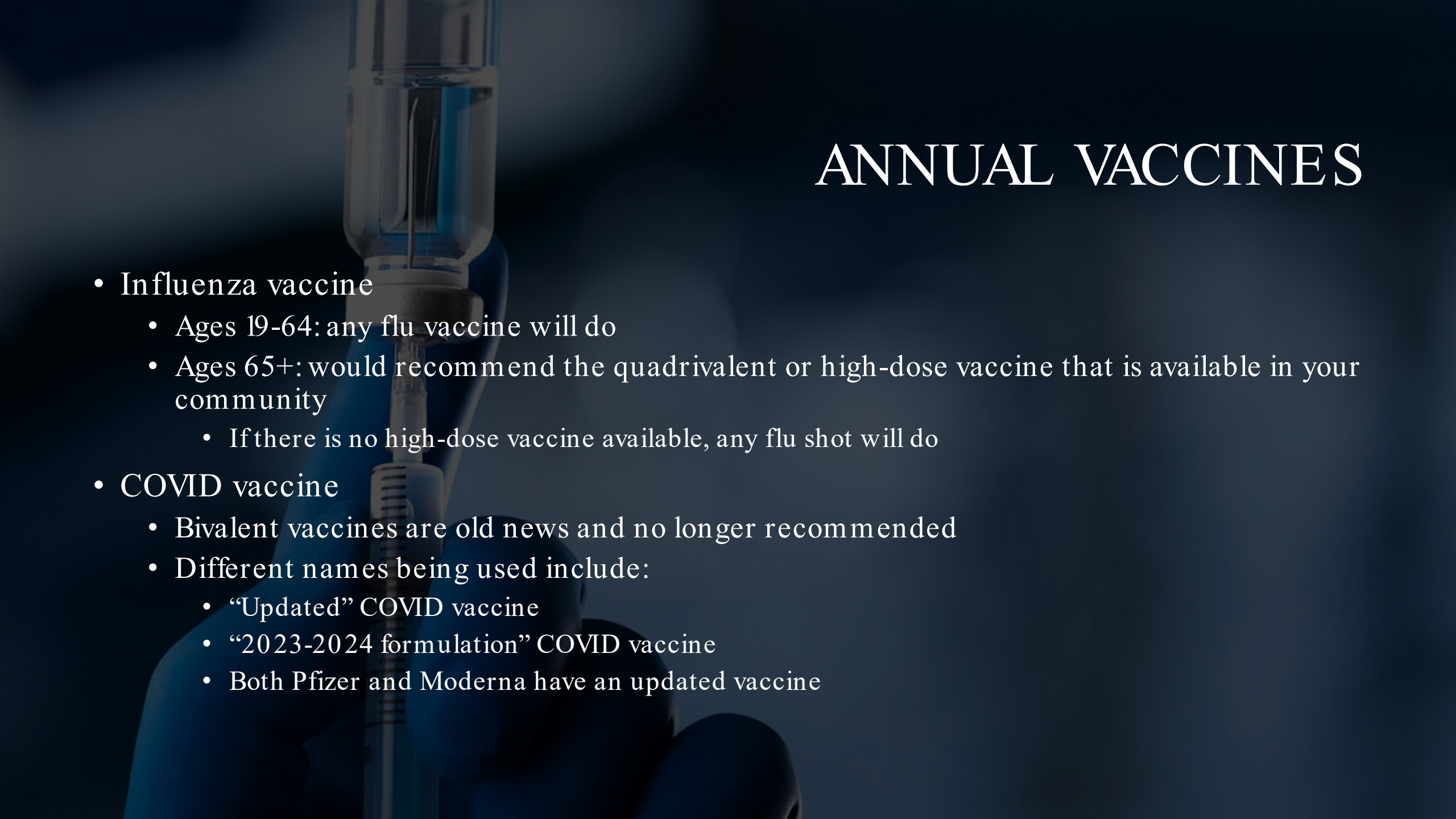
Vaccine	19–26 years	27–49 years	50–64 years	≥65 years
COVID-19	2- or 3- dose primary series and booster (See Notes)			
Influenza inactivated (IIV4) or Influenza recombinant (RIV4)	1 dose annually			
or	or			
Influenza live, attenuated (LAIV4)	1 dose annually			
Tetanus, diphtheria, pertussis (Tdap or Td)	1 dose Tdap each pregnancy; 1 dose Td/Tdap for wound management (see notes)			
	1 dose Tdap, then Td or Tdap booster every 10 years			
Measles, mumps, rubella (MMR)	1 or 2 doses depending on indication (if born in 1957 or later)			For healthcare personnel, see notes
Varicella (VAR)	2 doses (if born in 1980 or later)		2 doses	
Zoster recombinant (RZV)	2 doses for immunocompromising conditions (see notes)		2 doses	
Human papillomavirus (HPV)	2 or 3 doses depending on age at initial vaccination or condition	27 through 45 years		
Pneumococcal (PCV15, PCV20, PPSV23)	1 dose PCV15 followed by PPSV23 OR 1 dose PCV20 (see notes)			See Notes
				See Notes
Hepatitis A (HepA)	2, 3, or 4 doses depending on vaccine			
Hepatitis B (HepB)	2, 3, or 4 doses depending on vaccine or condition			
Meningococcal A, C, W, Y (MenACWY)	1 or 2 doses depending on indication, see notes for booster recommendations			
Meningococcal B (MenB)	2 or 3 doses depending on vaccine and indication, see notes for booster recommendations			
	19 through 23 years			
Haemophilus influenzae type b (Hib)	1 or 3 doses depending on indication			

YOUNG ADULT VACCINES

- Human papillomavirus vaccine
  - Typically given in adolescence
  - 2 or 3 doses depending on when the vaccine is started
  - Okay to give ages 27-45 with shared decision making used
- Meningococcal vaccine
  - Recommended for first year college students who live in residential housing
- Tetanus, diphtheria, pertussis vaccine
  - Given every 10 years routinely
    - For wound management, may give if only 5 years has passed since the last booster
  - Also given to pregnant women with every pregnancy (given in the 3rd trimester)

OLDER ADULT VACCINES

- Zoster/shingles (Shingrix) vaccine
  - 2 doses given after age 50
  - Give regardless of previous shingles outbreak or Zostavax administration
- Pneumococcal vaccine
  - Recommended for everyone age 65+
  - High-risk groups can get this vaccine at ages 19-64
    - This includes patients who smoke or drink alcohol on a regular basis, patients with diabetes, chronic lung disease (COPD), heart disease (CAD, CHF)—many patients will fall into one of the high-risk groups
  - Rules are complicated and I would recommend using CDC's decision-making tool



ANNUAL VACCINES

- Influenza vaccine
  - Ages 19-64: any flu vaccine will do
  - Ages 65+: would recommend the quadrivalent or high-dose vaccine that is available in your community
    - If there is no high-dose vaccine available, any flu shot will do
- COVID vaccine
  - Bivalent vaccines are old news and no longer recommended
  - Different names being used include:
    - “Updated” COVID vaccine
    - “2023-2024 formulation” COVID vaccine
    - Both Pfizer and Moderna have an updated vaccine

COVID VACCINE--IMMUNOCOMPETENT

- Just one dose of the updated vaccine is recommended for anyone 12 years and older
  - This is true whether they've had any previous COVID vaccines or not
  - This is also true if their first vaccine was either the Novavax or Janssen brand
- You should wait at least 8 weeks since the last vaccine was given to administer the updated vaccine
- It's okay to switch between these products (i.e. you had Moderna for your first 3 vaccines but now you can only access Pfizer..that's okay!)

COVID VACCINE--IMMUNOCOMPROMISED

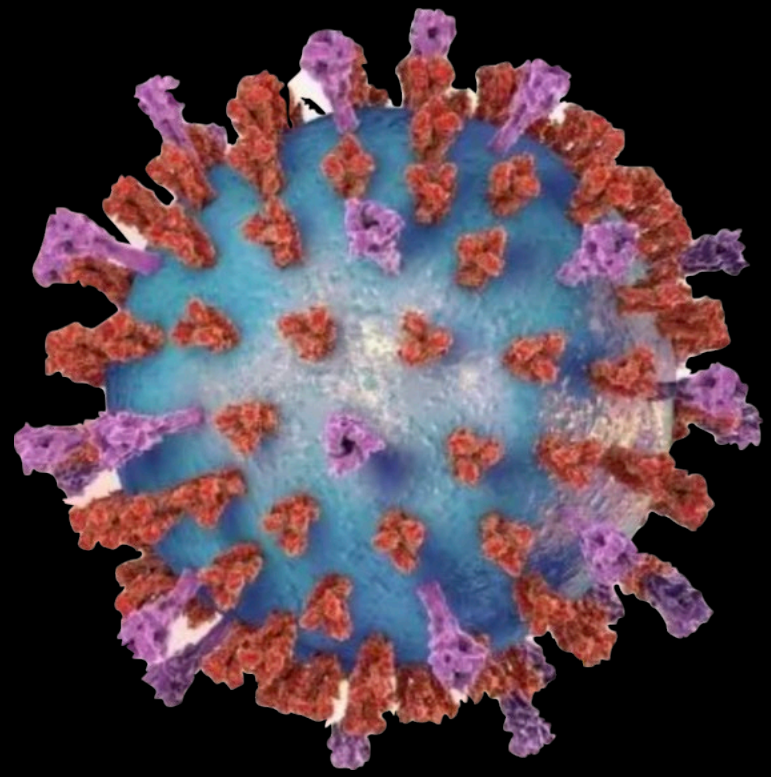
- Remember, the term “immunocompromised” is very broad!
- For someone who has never had a COVID vaccine in their life, they would receive a 3-dose series of the 2023-2024 formulation (either Moderna or Pfizer)
    - Updated Moderna vaccine:
        - Wait 4 weeks in b/w dose 1 and 2
        - Wait at least 4 weeks in b/w dose 2 and 3
    - Updated Pfizer vaccine:
        - Wait 3 weeks in b/w dose 1 and 2
        - Wait at least 4 weeks in b/w dose 2 and 3

COVID VACCINE--IMMUNOCOMPROMISED

- Magic number is 3
- If the patient only had one mRNA vaccine in the past, they would benefit from two doses of the updated vaccine.
- If the patient had two doses of the mRNA vaccine, they would benefit from one dose of the updated vaccine.
- If someone had one or more of either the Novavax or Janssen vaccines, they would only need 1 dose of the updated vaccine

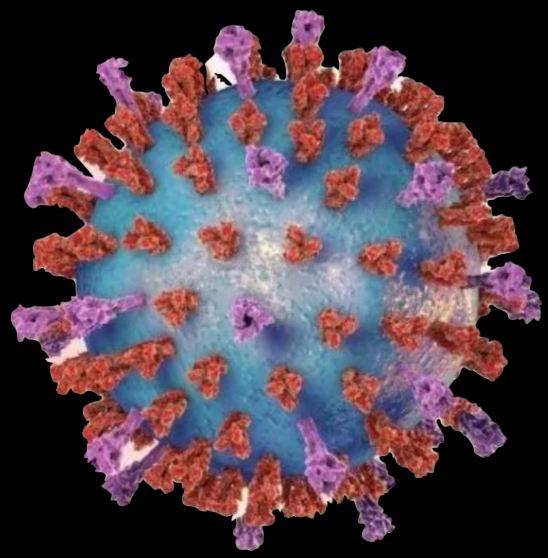
THE NEW KIDS ON THE BLOCK—RSV VACCINES

- Arexvy—made by GSK
- Abrysvo—made by Pfizer
- Both are protein subunit vaccines (similar to our annual flu vaccine)
- Both were approved in May 2023
- Approved for anyone ages 60+
  - No max age when you should not administer it
- Intended for immunocompromised patients, especially those patients who are living in nursing homes
- Single dose vaccine
- Okay to give even if the patient recently had RSV



RSV VACCINES

- Arexvy has an adjuvant which seems to make it more effective
- Abrysvo was recently approved for pregnant women and is given at 32-36 weeks (similar to the Tdap that we give during that timeframe)
- Effectiveness seems to last at least two winter seasons
  - 83% effective in preventing lung disease in season 1
  - 56% effective in preventing lung disease in season 2

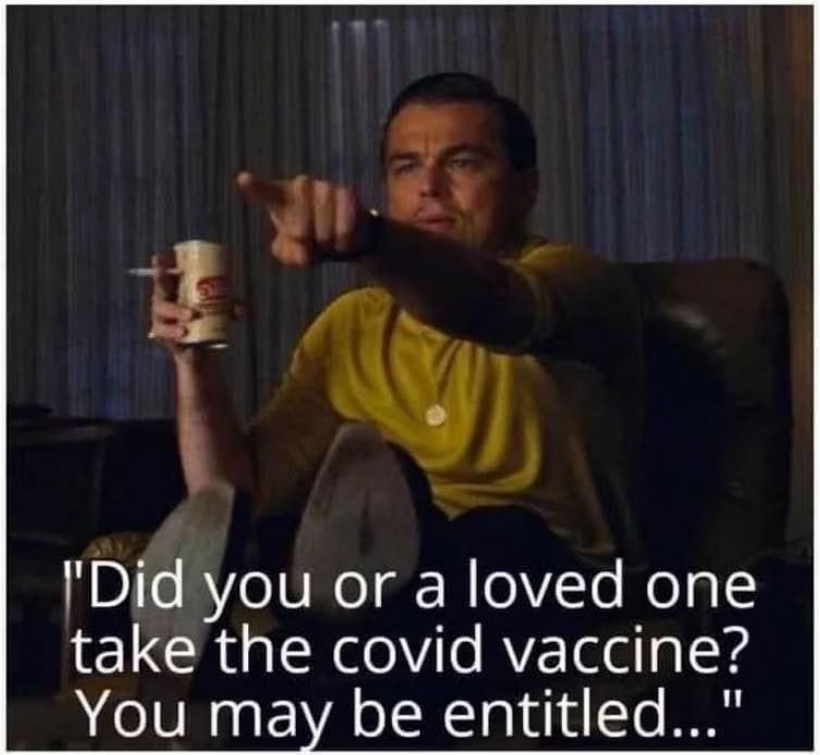


Vaccine Hesitancy

BEST INTERVIEW Q&A

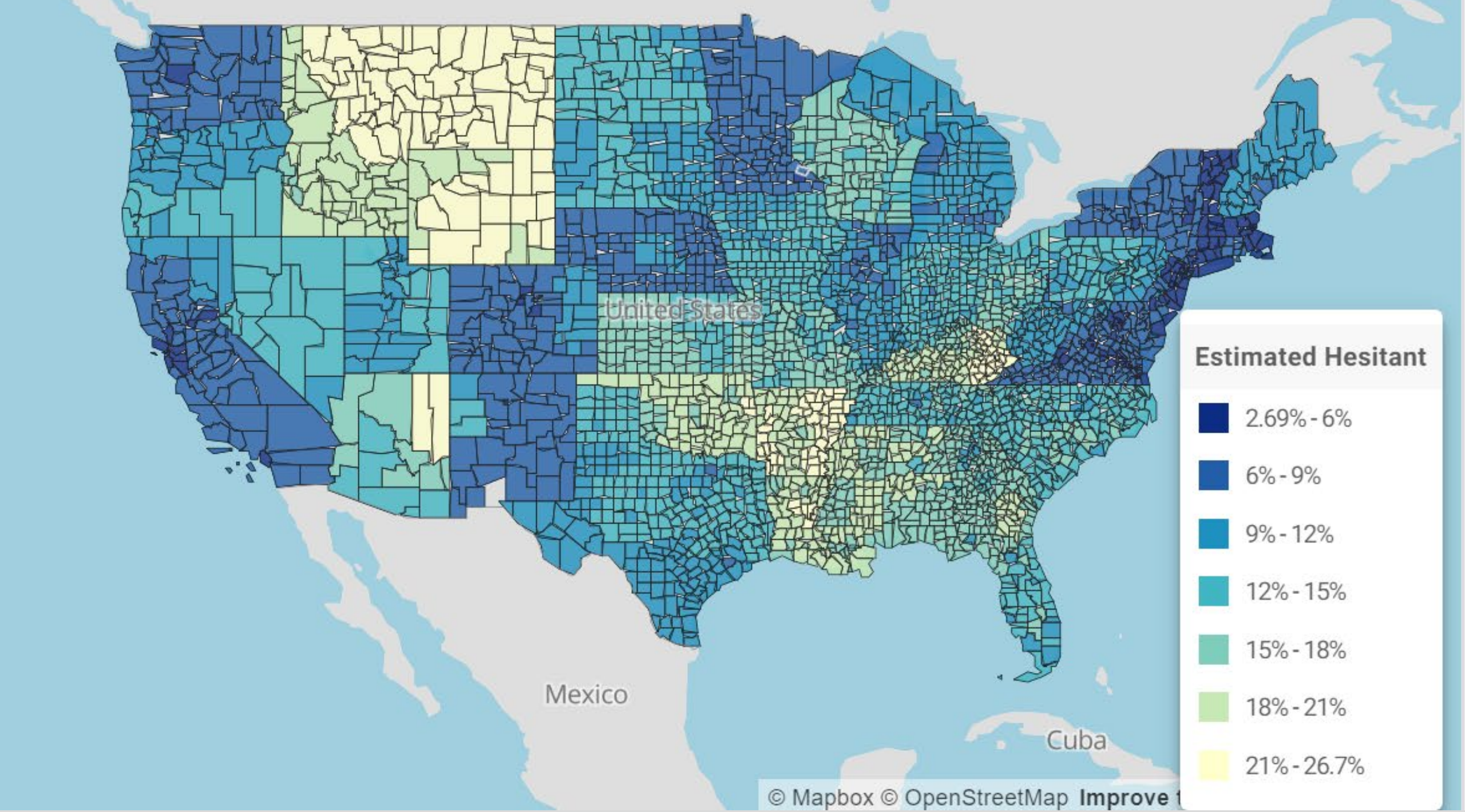
- Question: what do you think is the biggest public health threat facing our country today?
- Answer: mistrust

10 years from now you will be watching TV and hear....



Coronavirus vaccine is developed for human testing within a few weeks...

Me waiting for an effective migraine treatment:


United States
Mexico
Cuba
Estimated Hesitant
2.69% - 6%
6% - 9%
9% - 12%
12% - 15%
15% - 18%
18% - 21%
21% - 26.7%
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MY TIPS FOR TALKING ABOUT VACCINES

- Rely on your relationships with your patients
- Ask every time (unless you know asking will upset them)
- Be honest about the possible side effects—don't sugarcoat things
- Share data on effectiveness, side effects, poor outcomes
- Use the VIS sheets
- Remember..it may take a few tries