Wisconsin Cancer Collaborative

REDUCING THE BURDEN TOGETHER

All About Adolescent Vaccinations

The latest information on COVID-19, HPV, and adolescent immunization

Thursday, June 10, 2021, 10:00-11:00

Who We Are

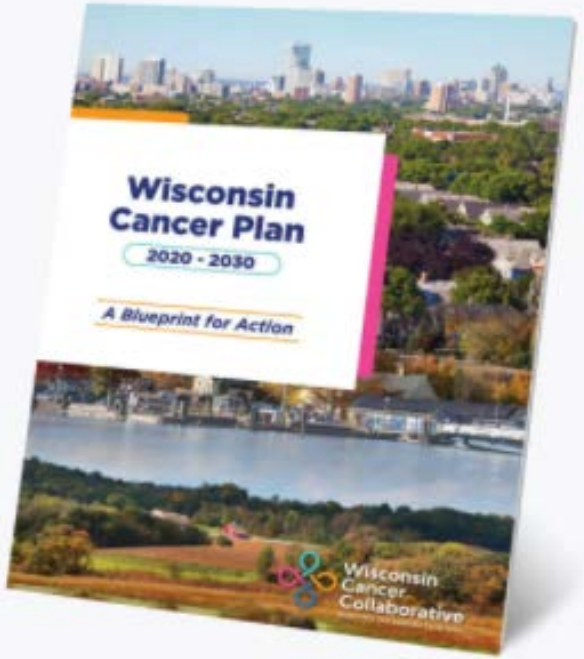
The **Wisconsin Cancer Collaborative** is a statewide coalition of **140 organizations** working together to reduce the burden of cancer **for everyone** in Wisconsin.

Join Us!

Wisconsin Cancer Collaborative

www.wicancer.org/join/

Wisconsin Cancer Plan 2020-2030



www.wicancer.org

Agenda

- Welcome
- Intro
- Presentation by Dr. Conway
- Questions

Wisconsin Cancer Collaborative

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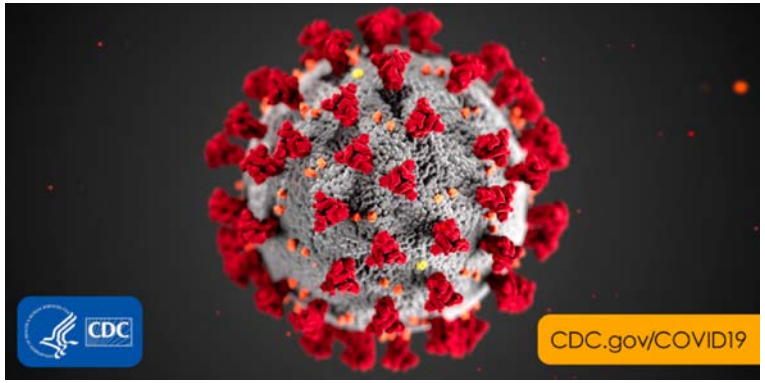
Dr. James Conway

Medical Director for UW Health Immunization Programs

Wisconsin Cancer Collaborative

Adolescent Vaccinations: The latest information on COVID-19, HPV, and adolescent immunization



James H. Conway, MD FAAP

Professor of Pediatrics – Division of Infectious Diseases

Medical Director – UW Health Immunization Programs

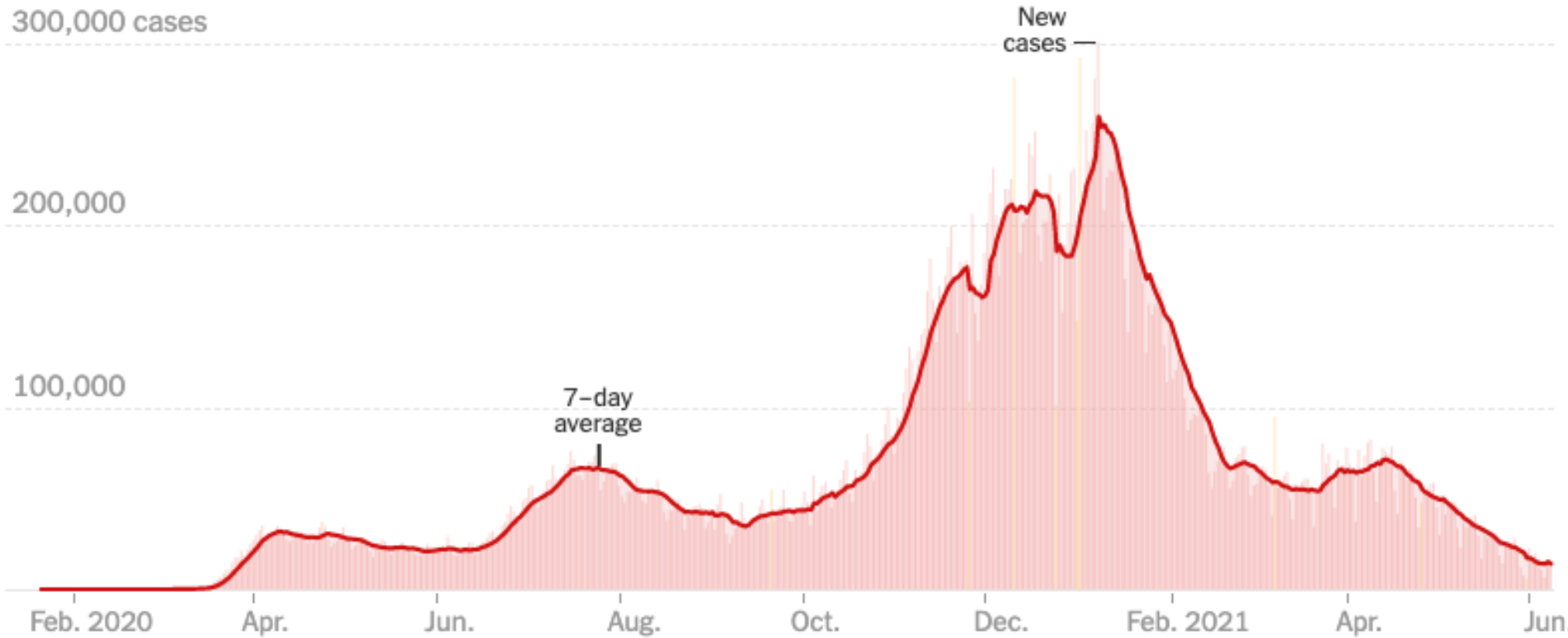
Director, Office of Global Health

Associate Director, Global Health Institute

University of Wisconsin
SCHOOL OF MEDICINE
AND PUBLIC HEALTH

Updated June 9, 2021

New reported cases



These are days with a reporting anomaly. Read more here.

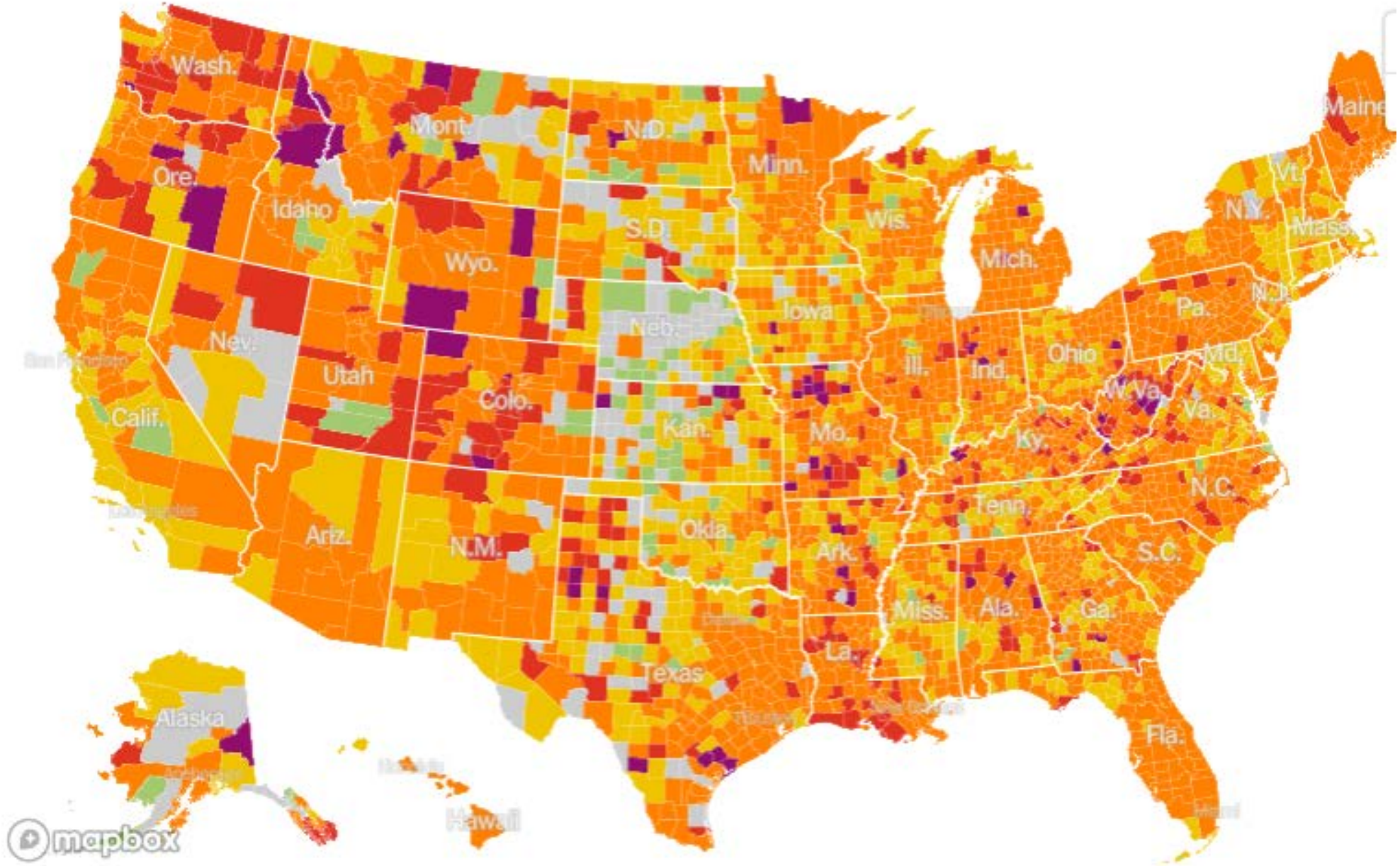
Tests

Hospitalized

Deaths

Covid-19 risk for unvaccinated people is based on cases and test positivity.

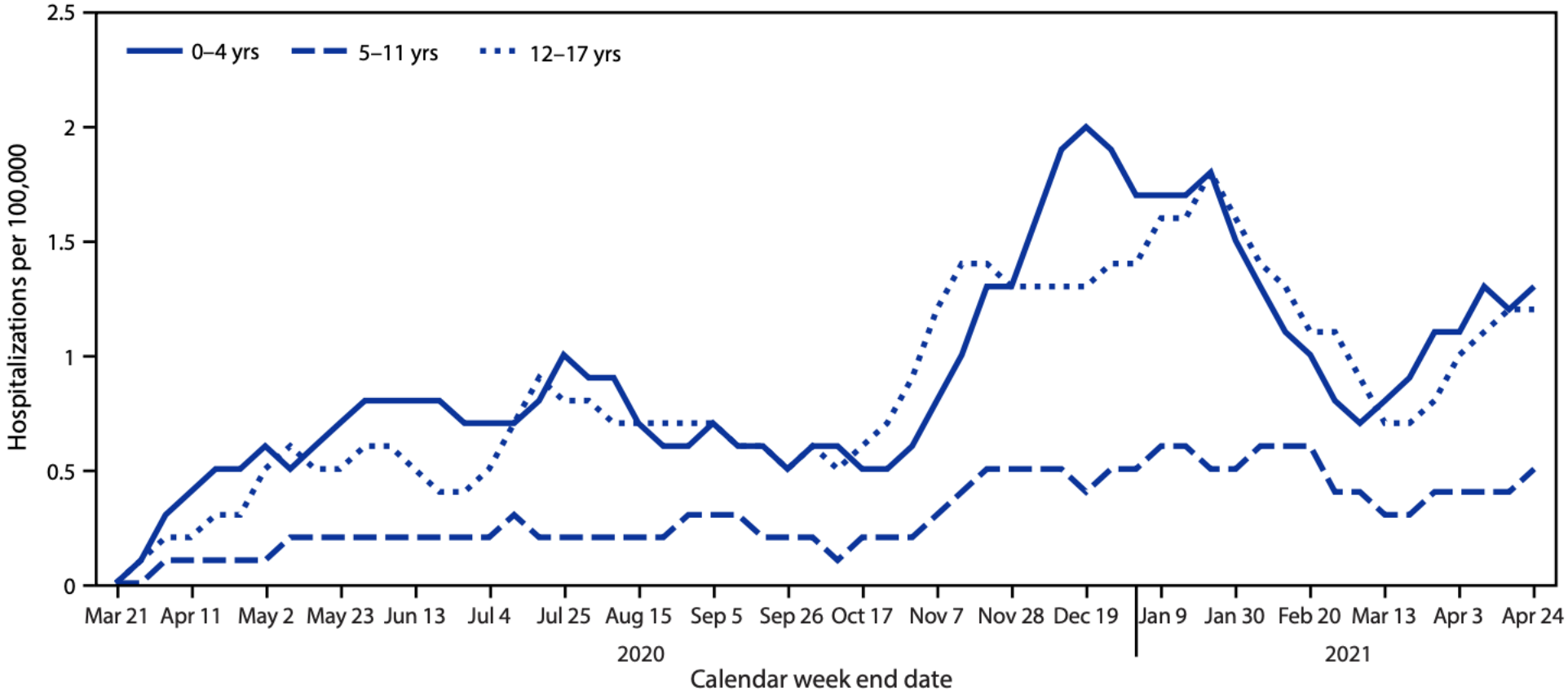
LOW MODERATE HIGH VERY HIGH EXTREMELY HIGH



Hospitalization of Adolescents Aged 12–17 Years with Laboratory-Confirmed COVID-19 — COVID-NET, 14 States, March 1, 2020–April 24, 2021

Early Release / June 4, 2021 / 70

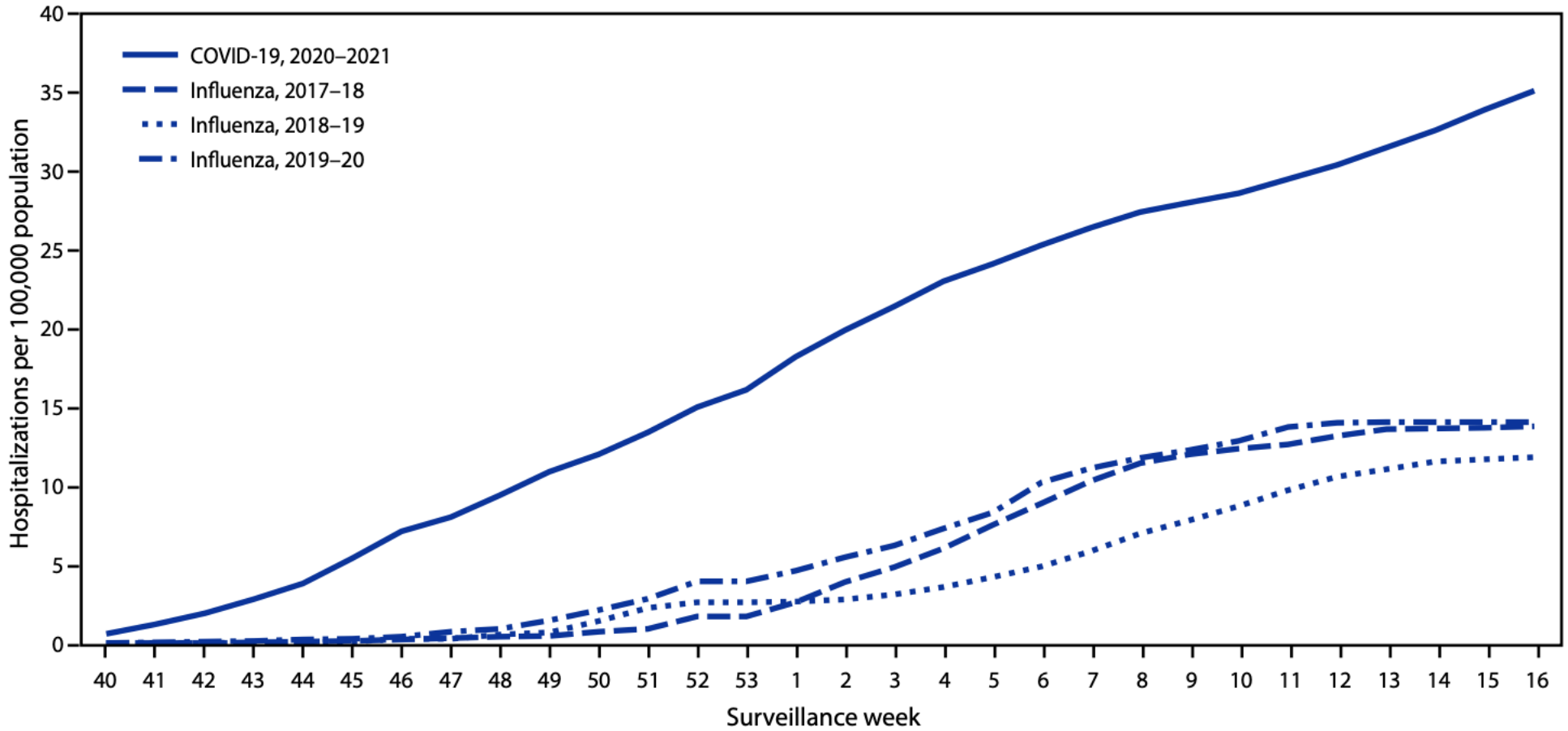
FIGURE 1. Three-week moving average COVID-19–associated hospitalization rates* among children and adolescents aged <18 years, by age group — COVID-NET, 14 states,† March 1, 2020–April 24, 2021



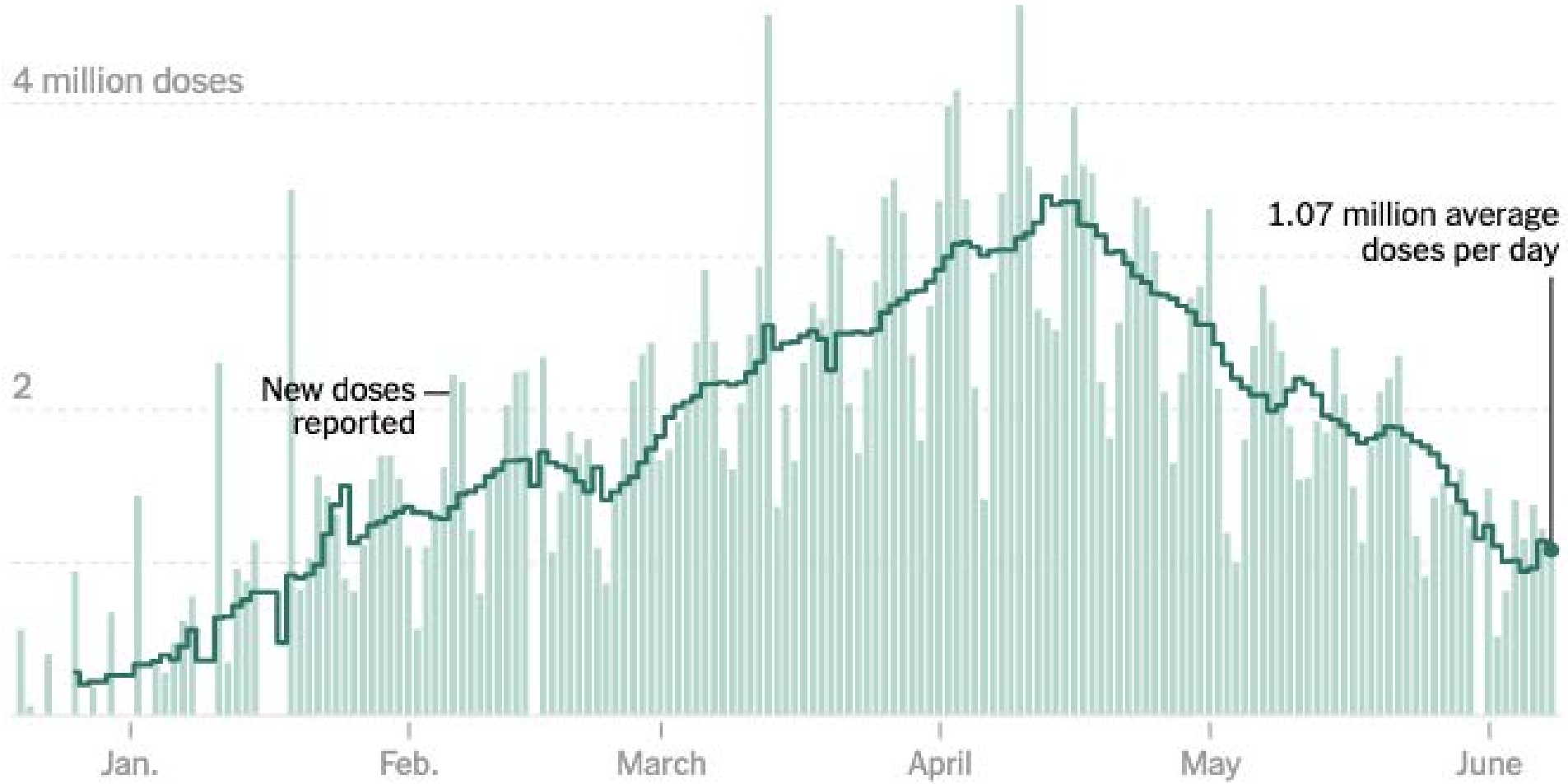
Hospitalization of Adolescents Aged 12–17 Years with Laboratory-Confirmed COVID-19 — COVID-NET, 14 States, March 1, 2020–April 24, 2021

Early Release / June 4, 2021 / 70

FIGURE 2. Cumulative rates for COVID-19–associated hospitalizations* compared with influenza-associated hospitalizations† among adolescents aged 12–17 years, by surveillance week§ — COVID-NET¶ and FluSurv-NET, 14 states,†† 2017–2021§§**



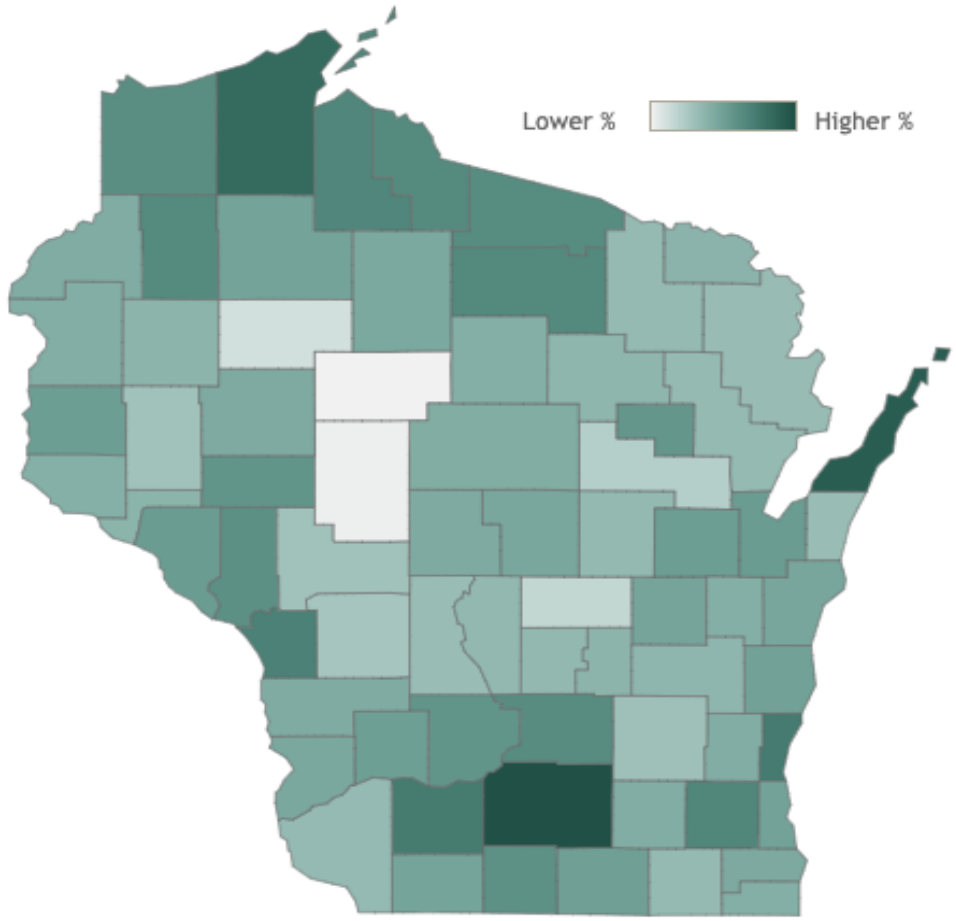
New reported doses administered by day



Source: Centers for Disease Control and Prevention | Note: Line shows a seven-day average. Data not updated on some weekends and holidays. Includes the Johnson & Johnson vaccine as of March 5.

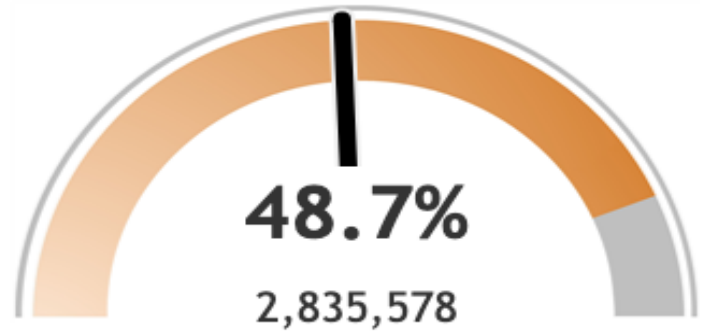
Percent of Wisconsin residents who have received at least one dose by county

Click a county to filter data



Percent of Wisconsin residents who have received at least one dose

The **orange** represents the population for whom the vaccine is authorized.
The **gray** indicates the population under 12 years of age for whom the vaccines are not authorized.



Age

12-15	22.9%
16-17	33.9%
18-24	39.3%
25-34	45.0%
35-44	53.3%
45-54	55.3%
55-64	66.0%
65+	83.7%

Race

American Indian	31.3%
Asian	46.5%
Black	24.8%
White	45.3%

*3.9% of records reported a race of "Other".

*6.5% of records reported an unknown race.

Sex

Female	51.9%
Male	44.9%

*0.6% of records were reported without sex.

Ethnicity

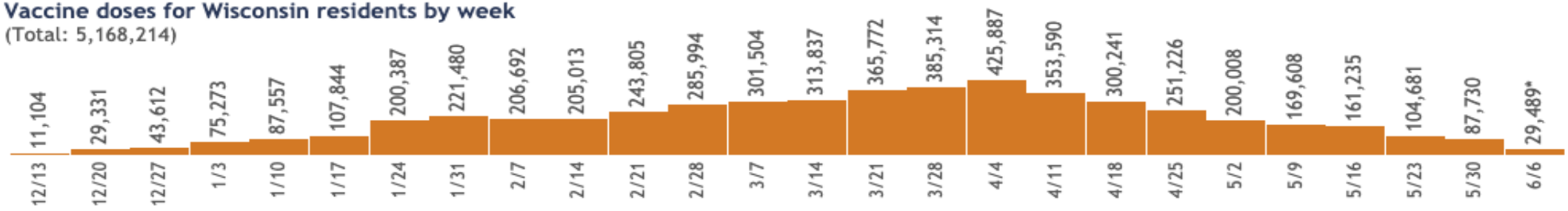
Hispanic	33.5%
Non-Hispanic	46.8%

*5.8% of records were reported without ethnicity.

View more data on racial and ethnic disparities in Wisconsin

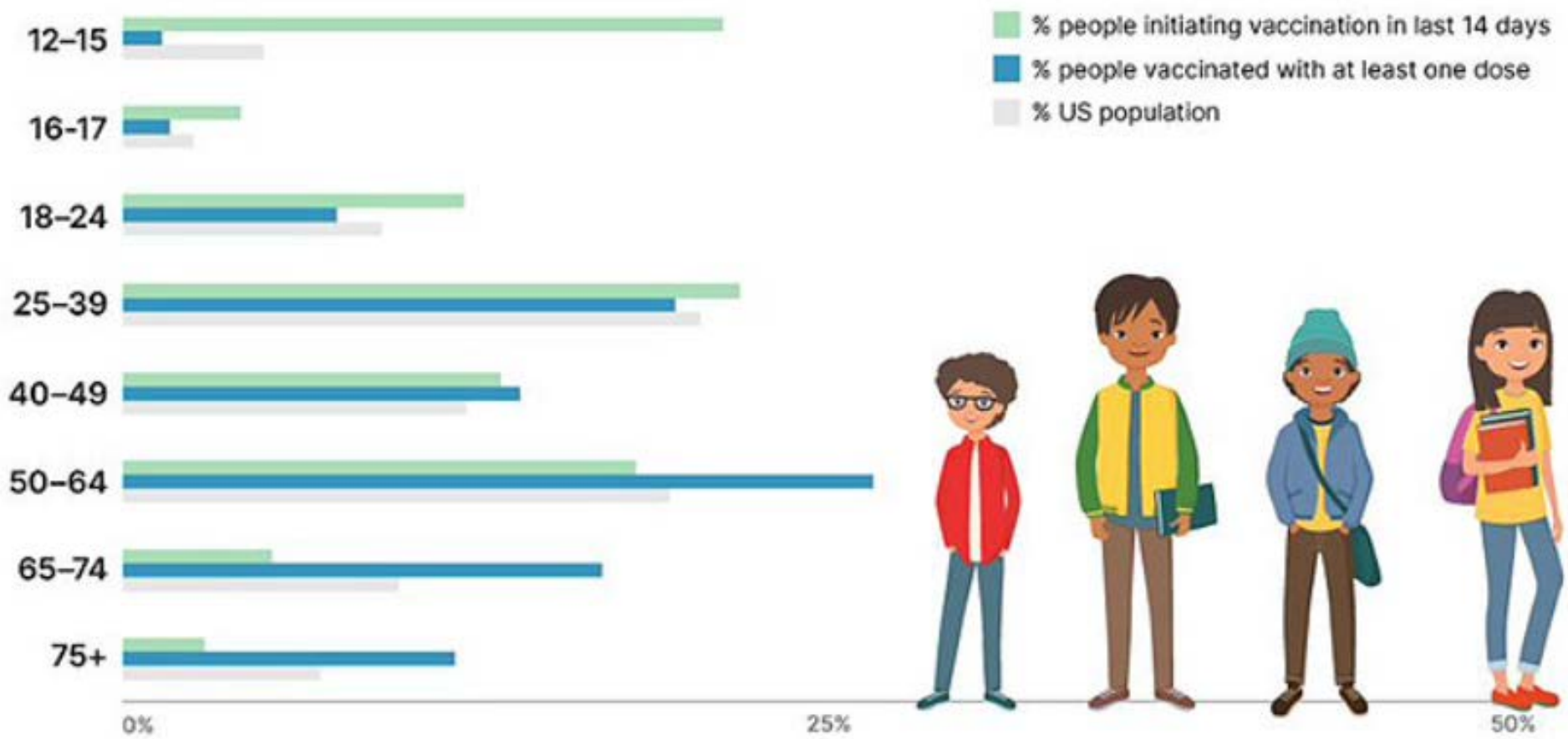
Vaccine doses for Wisconsin residents by week

(Total: 5,168,214)



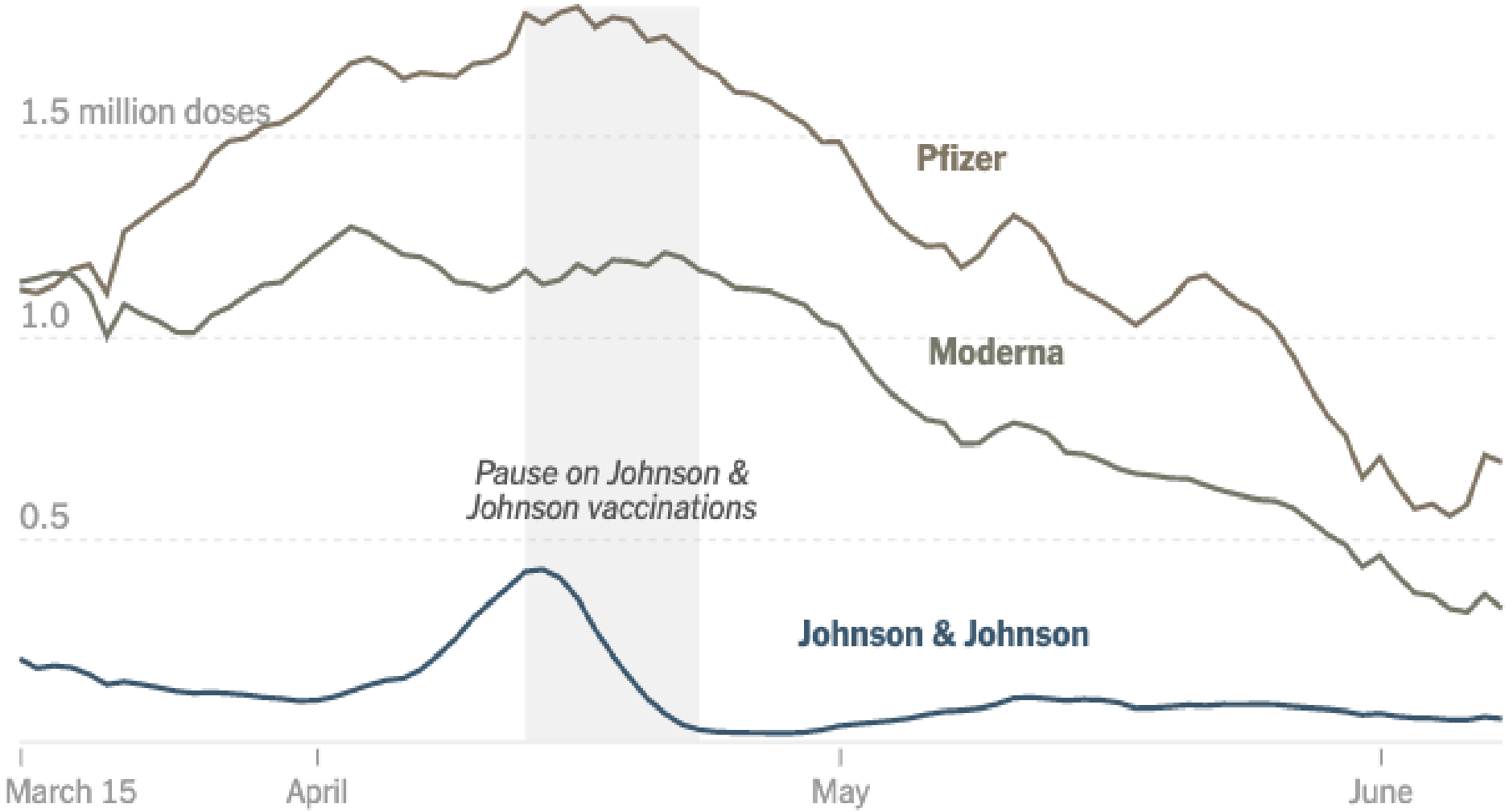
Vaccination Demographics by Age Group

Newly added: 12–15 Age Group



Daily reported doses given by manufacturer

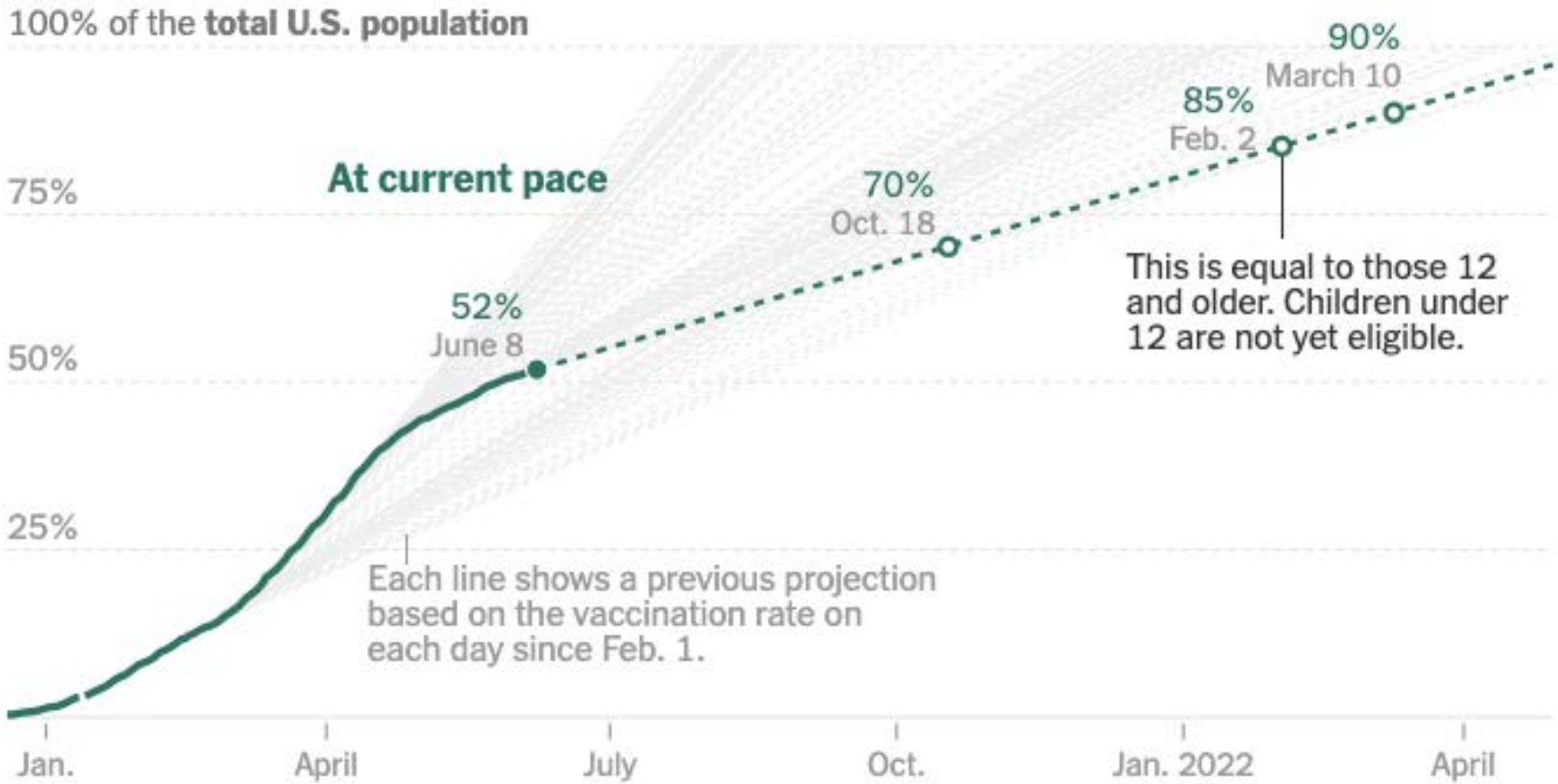
Each line shows the seven-day average.



Source: Centers for Disease Control and Prevention

At the current pace of vaccination, most people could get a shot this year. But no vaccine has been authorized for children under 12.

Based on the seven-day average of people receiving a first or single dose each day.



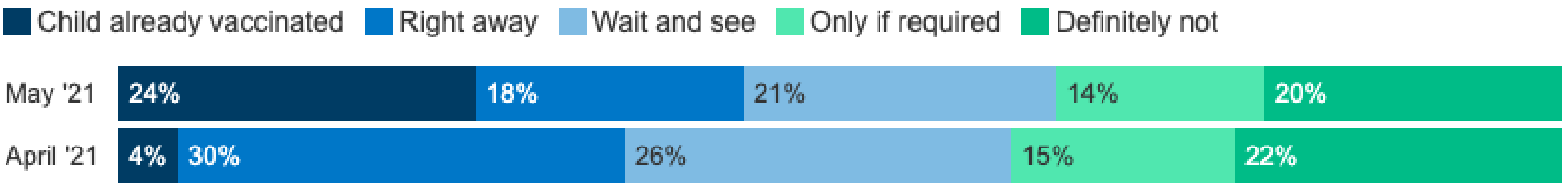
Sources: Centers for Disease Control and Prevention; Andrew Beveridge, SocialExplorer | Note: Total population includes states, territories and three countries with special agreements with the United States: Palau, Micronesia and the Marshall Islands.

Table 1. Emergency Use Authorizations of COVID-19 Vaccines

Sponsor	Regimen	Indicated Population	Date of EUA
Pfizer	2 doses 3 weeks apart	Individuals ≥16 years of age	December 11, 2020
Moderna	2 doses 4 weeks apart	Adults ≥18 years of age	December 18, 2020
Janssen	Single dose	Adults ≥18 years of age	February 27, 2021
Pfizer (amendment)	2 doses 3 weeks apart	Individuals ≥12 years of age	May 10, 2021

Four In Ten Parents Say Their Adolescent Has Already Received A COVID-19 Vaccine Or Will Do So Right Away

As you may know, the FDA recently authorized the use of the Pfizer COVID-19 vaccine for use in children ages 12 and up. Thinking about your child or children between the ages of 12-17, do you think you will...?

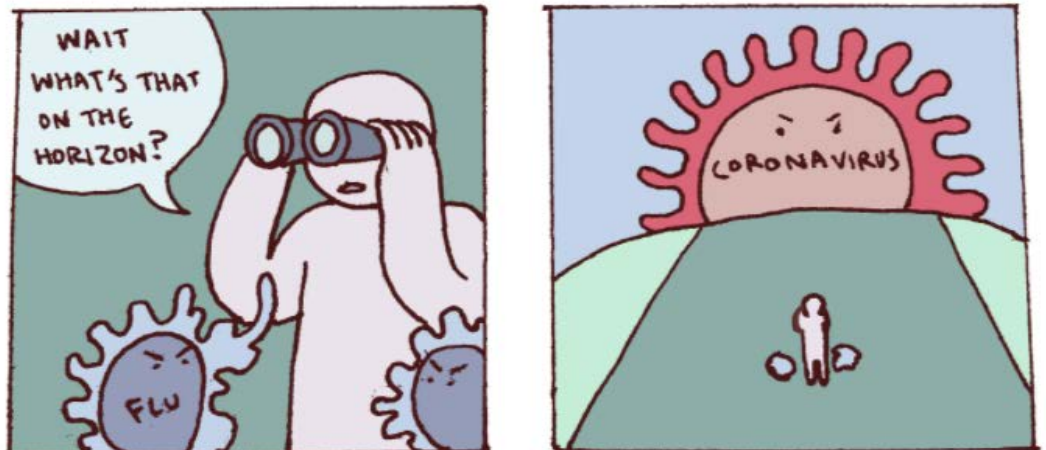


NOTE: Among parents or guardians of children ages 12-17. April 2021 question wording: "Once there is a COVID-19 vaccine authorized and available for your child's age group, do you think you will…?" See topline for full question wording.
SOURCE: KFF COVID-19 Vaccine Monitor (May 18-25, 2021) • Download PNG

KFF COVID-19 Vaccine Monitor

On the horizon….

- Novavax & Sanofi/GSK protein subunit vaccines (spike glycoprotein) progressing – likely EUA submission 3rd Q 2021
- Janssen progressing with 12-17yo studies
- Moderna submission for EUA 12-17yo pending (June 2021)
- Pfizer & Moderna currently doing ‘dose finding’ for 6m-11yo
  - Will be followed by larger safety/immunogenicity trials
  - Anticipate 5-11yo data fall 2021
- Moderna & Pfizer in process of ‘rolling submission’ for full BLA
  - Seeking ‘priority review’ by FDA
  - Decision pending (but likely)



COVID-19 vaccination of persons with underlying medical conditions

- Any currently authorized COVID-19 vaccine can be administered to persons with underlying medical conditions who have no contraindications to vaccination, including:
  - Immunocompromised persons
  - People with autoimmune conditions
  - People with history of Guillain-Barré syndrome, Bell's palsy, dermal filler use

- Clinical trials demonstrate similar safety and efficacy profiles in persons with underlying medical conditions, including those that place them at increased risk for severe COVID-19, compared to persons without comorbidities

Vaccine Efficacy – Cancer Patients

- Israel – 102 cancer patients undergoing therapy, received BNT162b2 mRNA vaccine
  - 90% of cancer patients seropositive after 2nd dose (compared to 100% in controls)
  - **JAMA ONCOLOGY** May 28, 2021 A Massarweh et al
- Israel – 167 CLL patients receiving BNT162b2 mRNA vaccine – antibodies measured
  - 0verall response rate 39.5%
  - 79.2% response rate for patients in remission
  - 16% in patients on treatment, 55.2% in treatment naïve
  - **BLOOD** April 16, 2021 Y Herishanu et al.

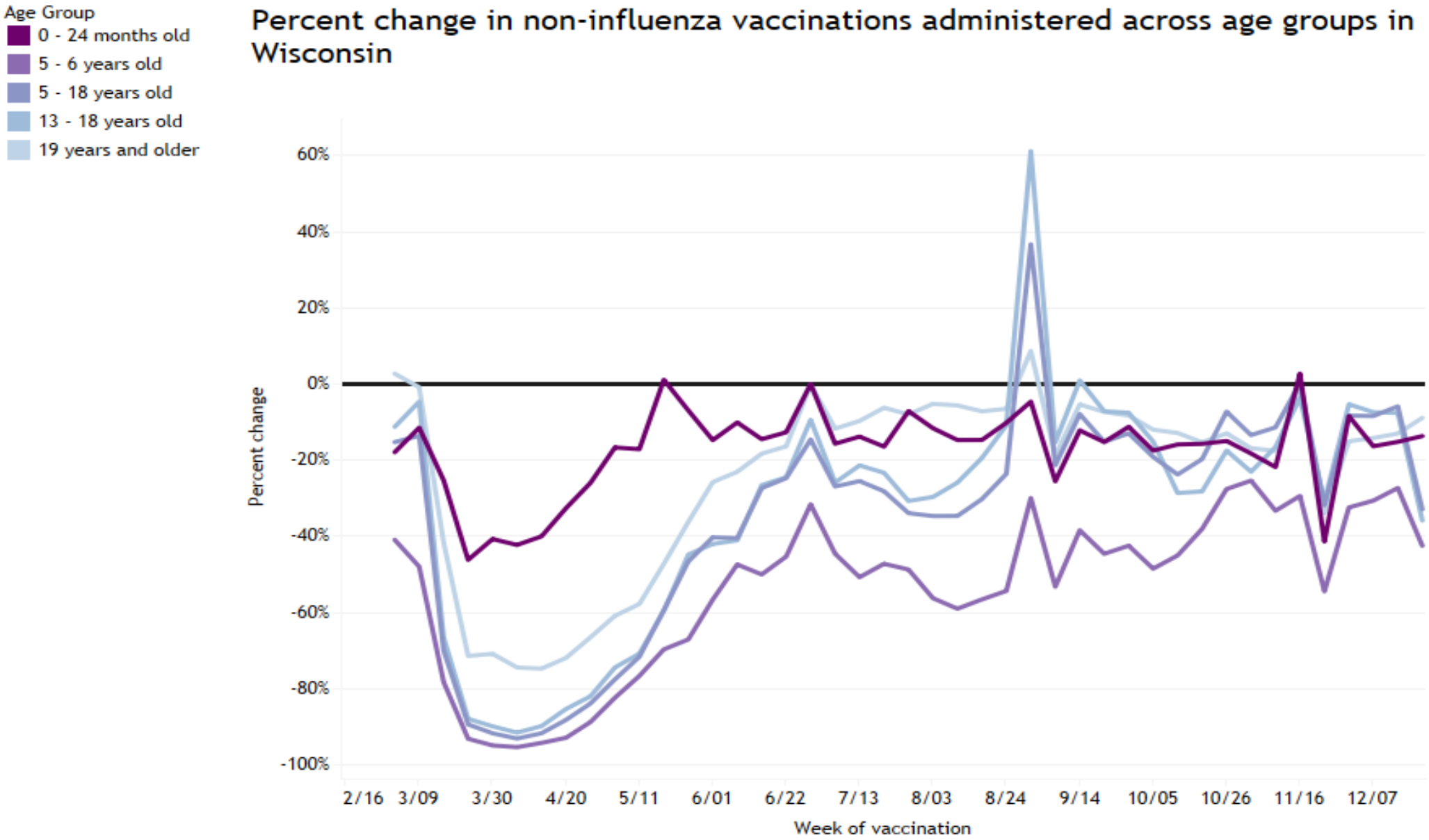
Vaccine Efficacy – Solid Organ Transplants

- Received mRNA vaccines (about 50:50 Pfizer:Moderna)
- Only 17% had positive antibody after dose #1
- 54% had positive antibodies after dose #2
- Non-response closely correlated with antimetabolite treatment (mycophenalate or azathioprine)
- **JAMA** May 5, 2021 B Boyarsky et al.

Cautionary Statements

- *MOST* commercial assays for SARS-CoV2 antibodies detect *nucleocapsid antibody* (NOT spike glycoprotein)
- Vaccines induce only spike glycoprotein antibodies
- T/B cell memory immunity appears to be important.
- No particular level of antibodies currently correlates with immunity
- Currently NO recommendations for boosters in *any* populations
- Ultimately boosters *may* be needed – unclear whether vaccines will need to be updated or whether current vaccines are adequate for boosting (preliminary data suggests they are)

Percent change in non-influenza vaccinations administered across age groups in Wisconsin

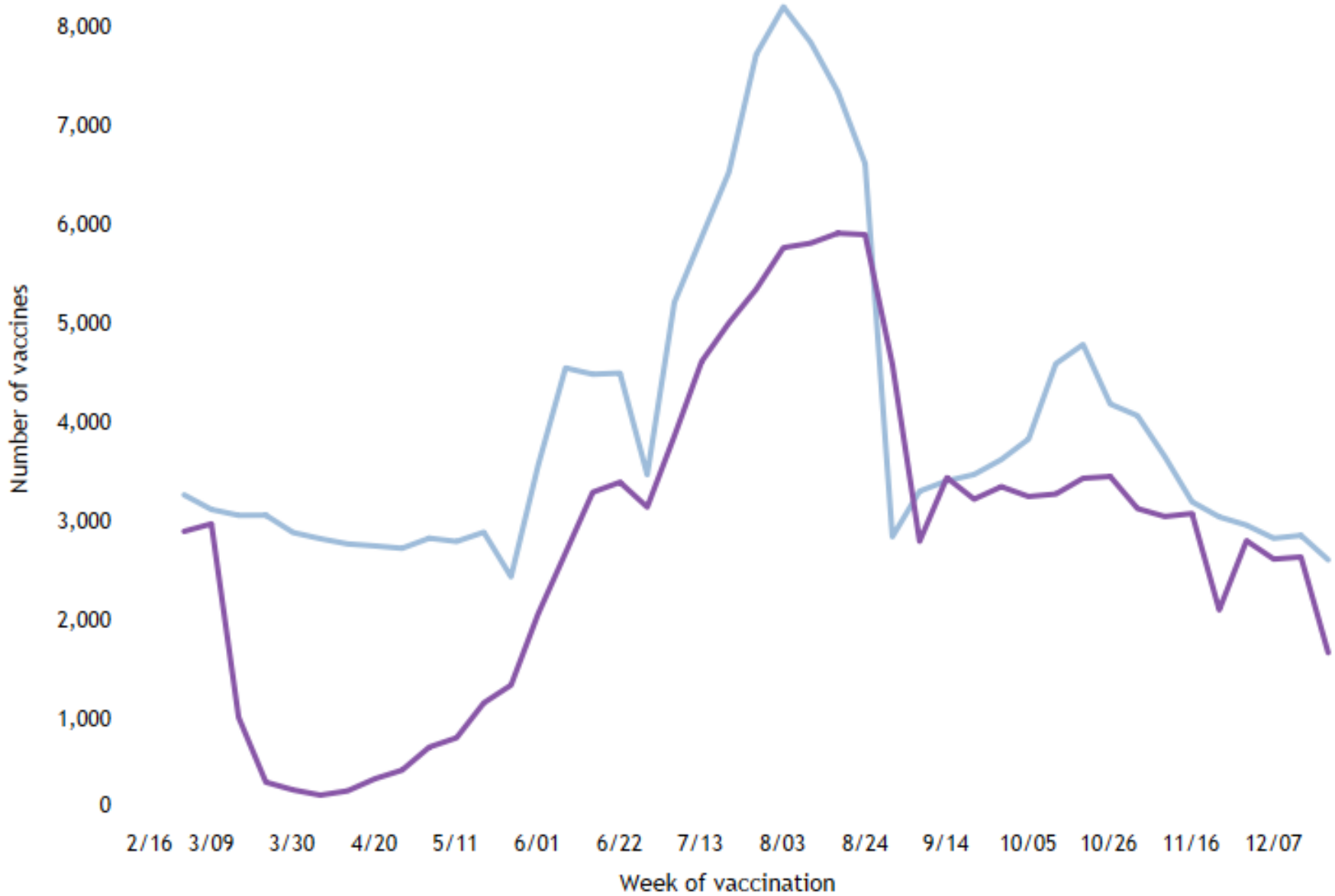


Percent change describes by what percent the number of immunizations administered this year has changed compared to the five-year average (2015-2019.) A negative percent change, means the number of immunizations this year was lower than the five-year average, whereas a positive percent change means the number of immunizations this year was higher.

Age Group

- ○ 0 - 24 months old
- ○ 5 - 6 years old
- ○ 5 - 18 years old
- ◉ 13 - 18 years old
- ○ 19 years and older

Routinely administered vaccinations in persons aged **13 - 18 years old** in 2020 versus the 2015-2019 average.



Age Group
- ○ 0 - 24 months old
- ○ 5 - 6 years old
- ◉ 5 - 18 years old
- ○ 13 - 18 years old
- ○ 19 years and older

Routinely administered vaccinations in persons aged **5 - 18 years old** in 2020 versus the 2015-2019 average.

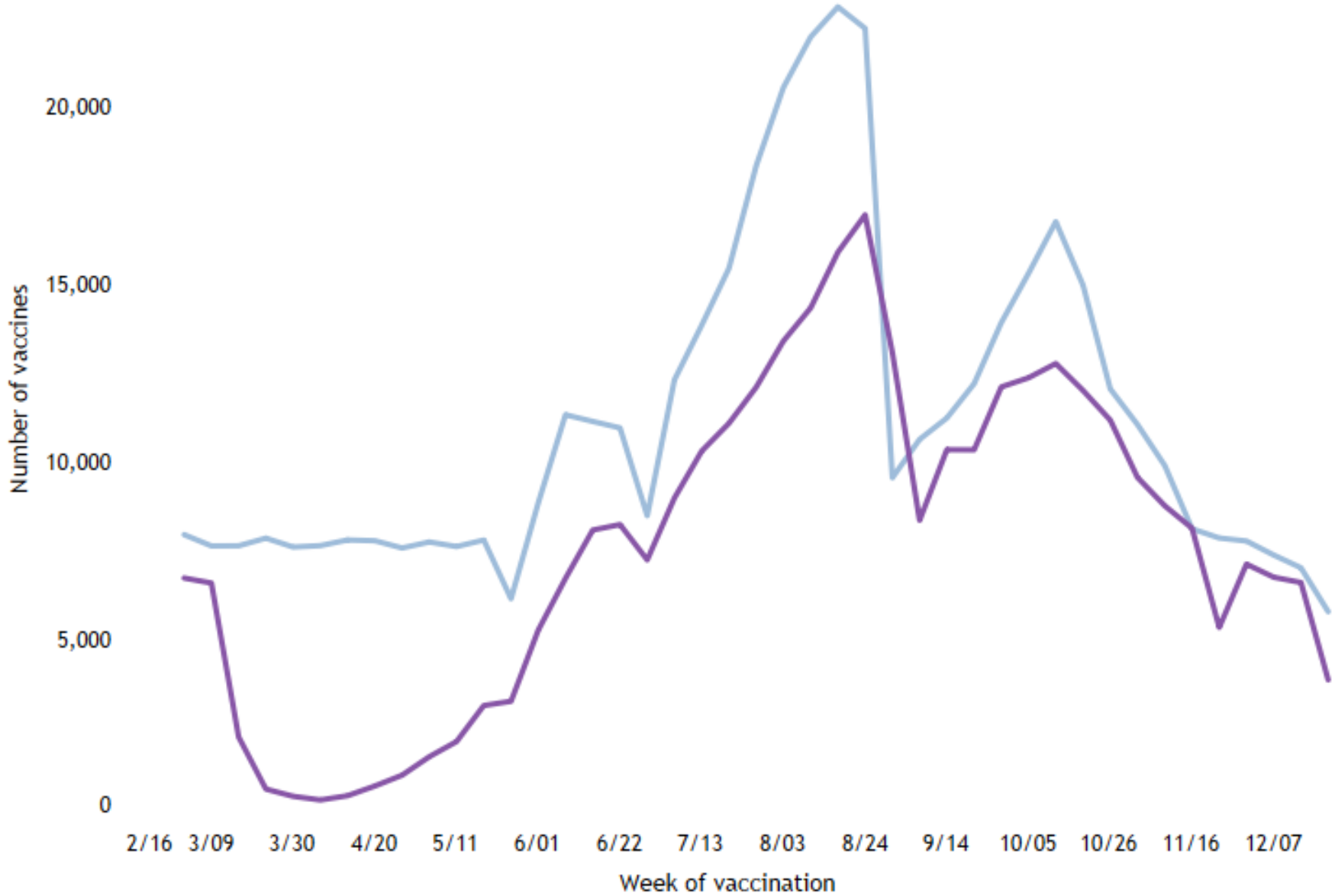


Table 1 Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger, United States, 2021

These recommendations must be read with the notes that follow. For those who fall behind or start late, provide catch-up vaccination at the earliest opportunity as indicated by the gray bars.
To determine minimum intervals between doses, see the catch-up schedule (Table 2). School entry and adolescent vaccine age groups are shaded in gray.

Vaccine	Birth	1 mo	2 mos	4 mos	6 mos	9 mos	12 mos	15 mos	18 mos	19–23 mos	2–3 yrs	4–6 yrs	7–10 yrs	11–12 yrs	13–15 yrs	16 yrs	17–18 yrs
Hepatitis B (HepB)	1st dose	◄---- 2nd dose ----►			◄---------- 3rd dose ----------►												
Rotavirus (RV): RV1 (2-dose series), RV5 (3-dose series)			1st dose	2nd dose	See Notes												
Diphtheria, tetanus, acellular pertussis (DTaP <7 yrs)			1st dose	2nd dose	3rd dose			◄---- 4th dose ----►				5th dose					
Haemophilus influenzae type b (Hib)			1st dose	2nd dose	See Notes		◄- 3rd or 4th dose, See Notes -►										
Pneumococcal conjugate (PCV13)			1st dose	2nd dose	3rd dose		◄---- 4th dose ----►										
Inactivated poliovirus (IPV <18 yrs)			1st dose	2nd dose	◄---------- 3rd dose ----------►							4th dose					
Influenza (IIV)					Annual vaccination 1 or 2 doses								or	Annual vaccination 1 dose only			
or																	
Influenza (LAIV4)											Annual vaccination 1 or 2 doses			Annual vaccination 1 dose only			
Measles, mumps, rubella (MMR)					See Notes		◄---- 1st dose ----►					2nd dose					
Varicella (VAR)							◄---- 1st dose ----►					2nd dose					
Hepatitis A (HepA)					See Notes		2-dose series, See Notes										
Tetanus, diphtheria, acellular pertussis (Tdap ≥7 yrs)														Tdap			
Human papillomavirus (HPV)													*	See Notes			
Meningococcal (MenACWY-D ≥9 mos, MenACWY-CRM ≥2 mos, MenACWY-TT ≥2years)			See Notes											1st dose		2nd dose	
Meningococcal B														See Notes			
Pneumococcal polysaccharide (PPSV23)											See Notes						

Range of recommended ages for all children

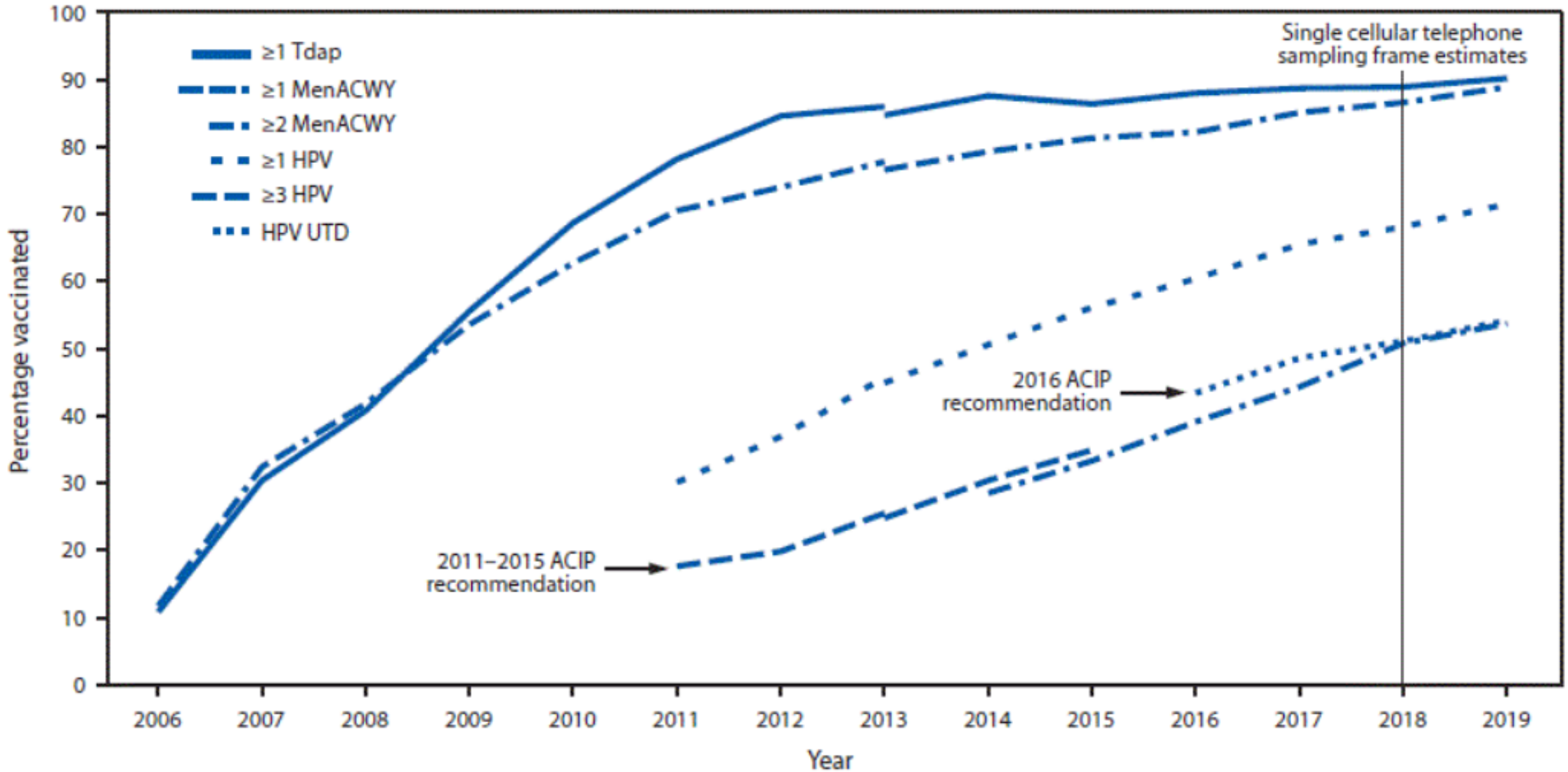
Range of recommended ages for catch-up immunization

Range of recommended ages for certain high-risk groups

Recommended based on shared clinical decision-making or
*can be used in this age group

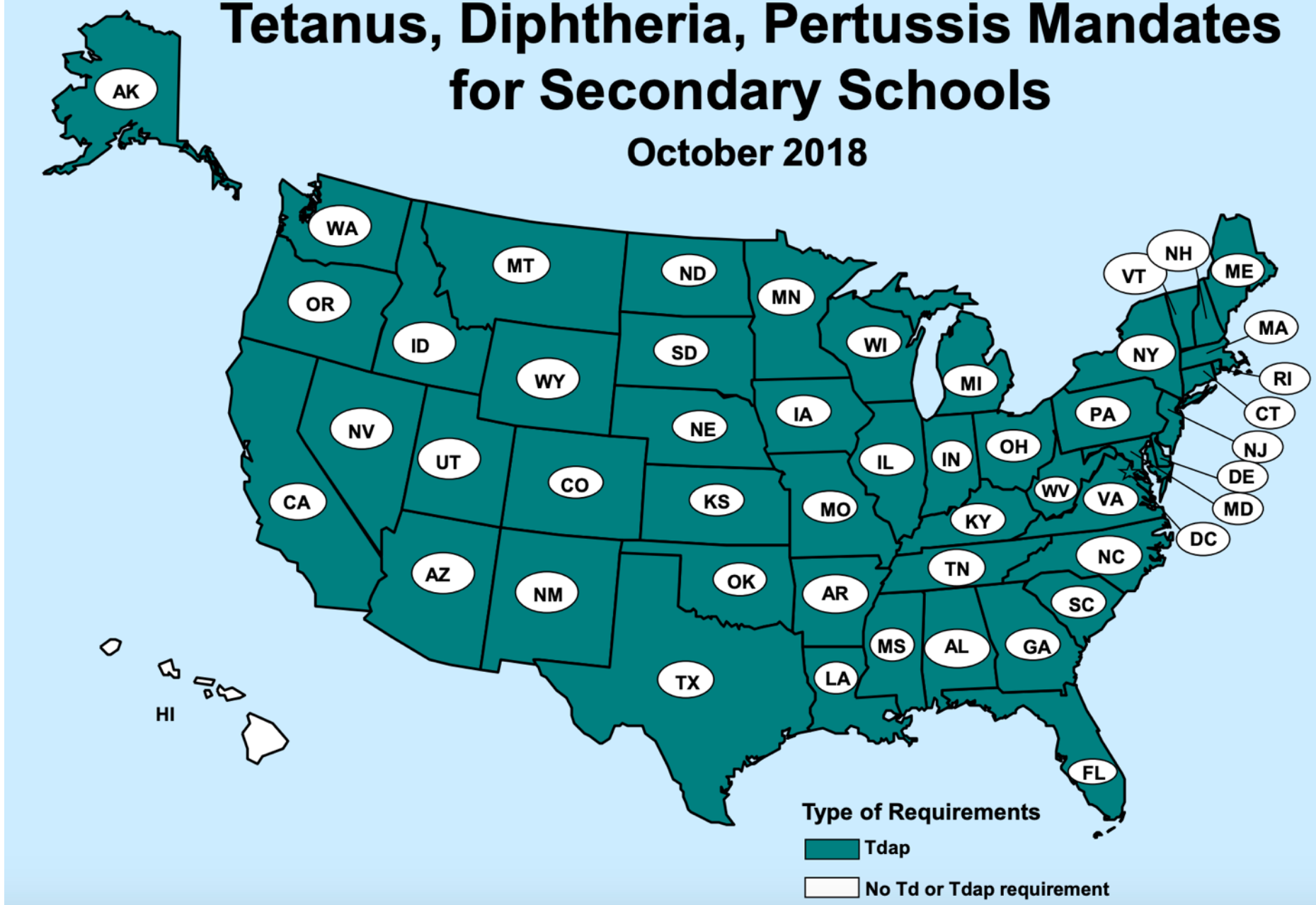
No recommendation/ not applicable

FIGURE. Estimated vaccination coverage with selected vaccines and doses* among adolescents aged 13–17 years, by survey year and Advisory Committee on Immunization Practices (ACIP) recommendations† — National Immunization Survey-Teen (NIS-Teen)§,¶ — United States, 2006–2019



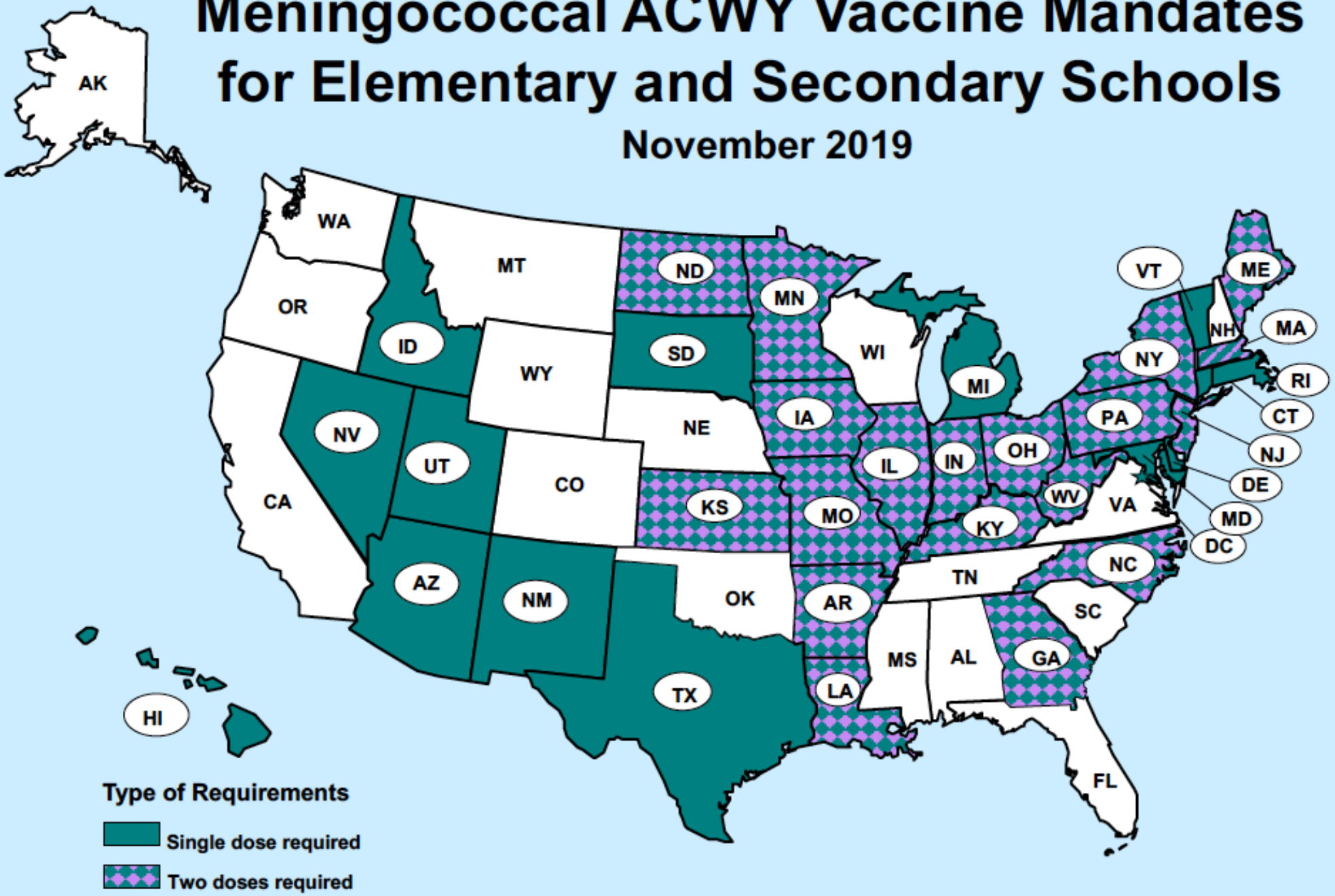
Tetanus, Diphtheria, Pertussis Mandates for Secondary Schools

October 2018



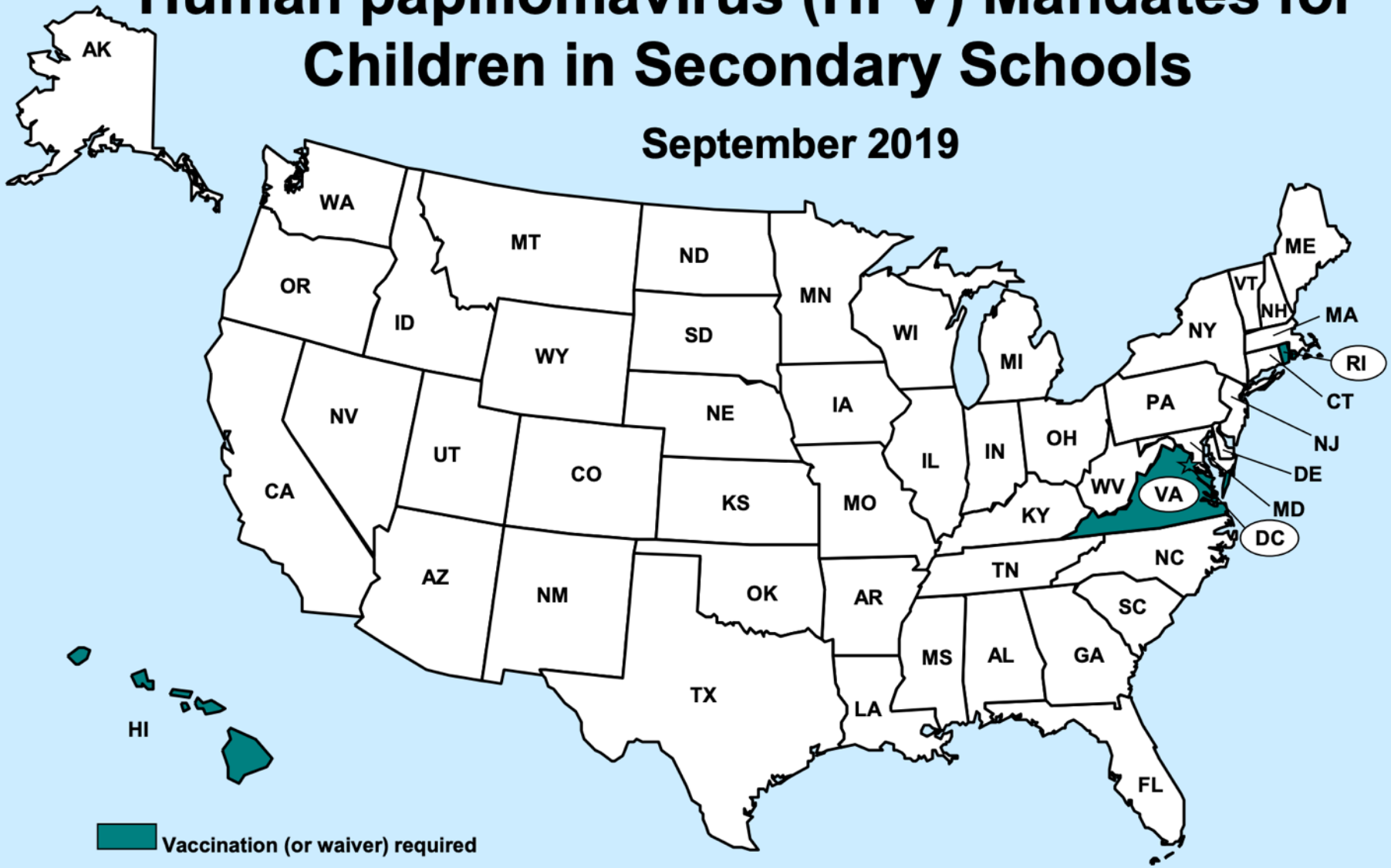
Meningococcal ACWY Vaccine Mandates for Elementary and Secondary Schools

November 2019

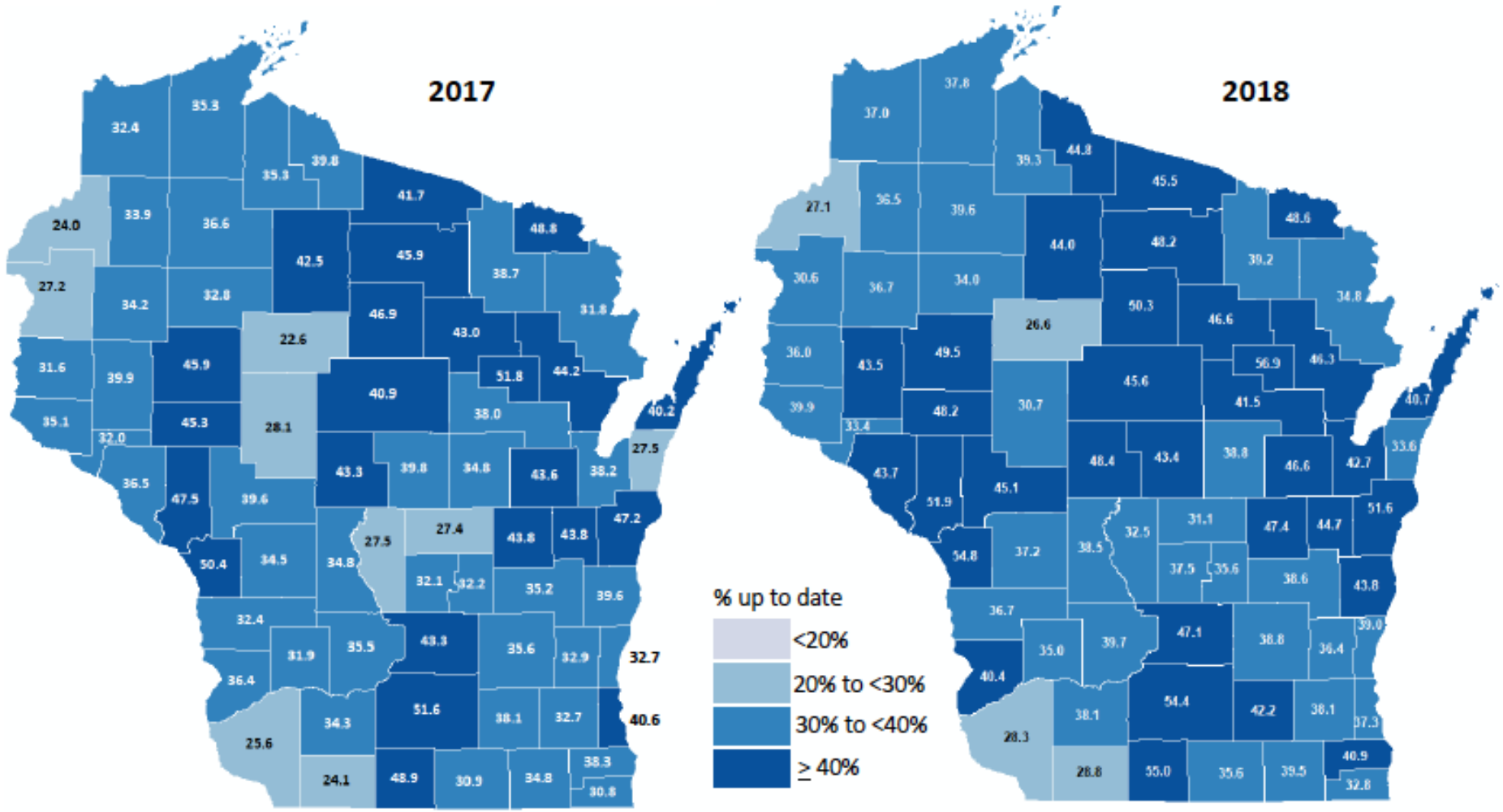


Human papillomavirus (HPV) Mandates for Children in Secondary Schools

September 2019



Percent of adolescents aged 13-18 who are up-to-date* with the human papillomavirus (HPV) vaccine, 2017 and 2018



*2 or 3 doses depending on age at vaccine series initiation. The Advisory Committee on Immunization Practices changed their HPV recommendation in October 2017 from a 3 dose series to either a 2 or 3 dose series depending on age at vaccine series initiation. Prior to 2017, HPV complete rates reflect a 3 dose series.

Birth range, 2017 assessment: January 1 1999 to December 31 2004

Birth range, 2018 assessment: January 1 2000 to December 31 2005

Prepared by the Wisconsin Immunization Program, Division of Public Health, April 2019

Data source: Wisconsin Immunization Registry

P-02279I (4/2019)

WISCONSIN DEPARTMENT of HEALTH SERVICES

In the U.S., hospitalizations are rising in areas with low vaccination rates.

Health officials worry that Covid-19 hospitalization rates could increase among the unvaccinated as variants of the virus spread.

- All oncology patients should be vaccinated
- Pre-transplant vaccination for SOT encouraged whenever feasible
- Encourage vaccination of household members & caregivers
- Continue adherence to protective measures including masking & social distancing regardless of vaccine status


Danke
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Questions? Comments?

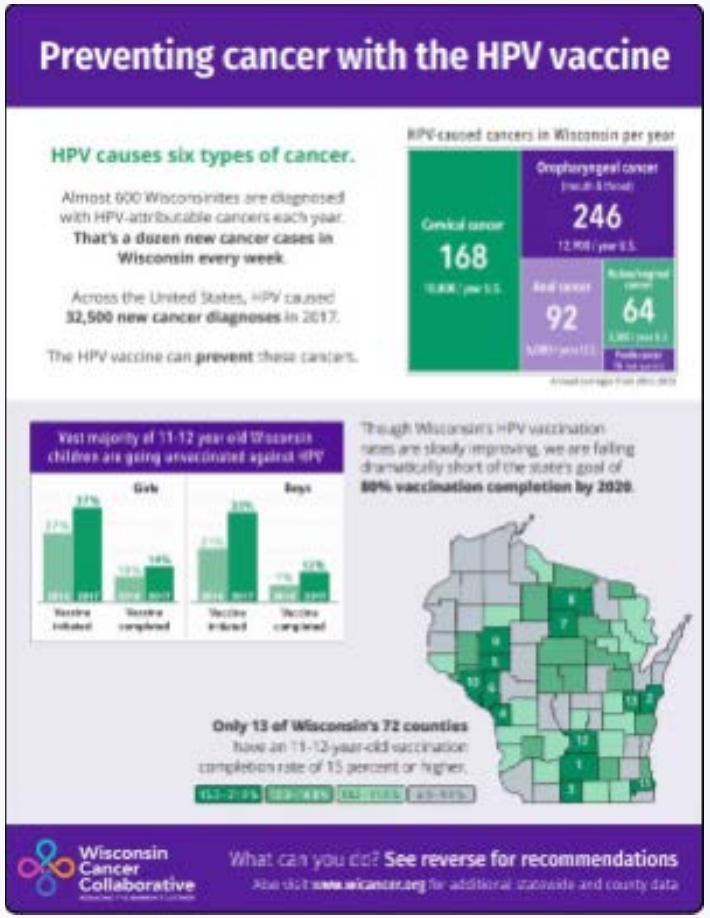
Please take our poll! Will pop up on your screens shortly.

Wisconsin Cancer Collaborative

Stay tuned for resources you can use!

Resources – HPV Vaccine Sheet

Helpful snapshot of HPV in Wisconsin and the action steps you can take to make a difference

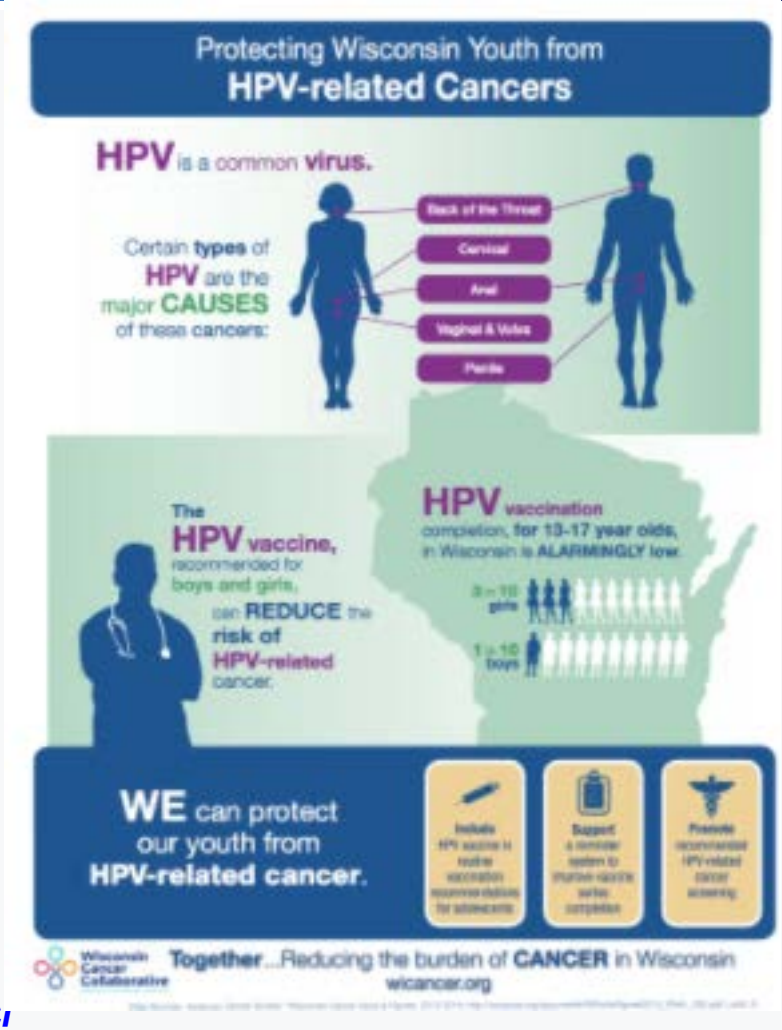


https://wicancer.org/resource/hpv-vaccine-fact-sheet/

Resources – HPV Infographic

Use our Infographics Series to illustrate cancer prevention and detection strategies in easy-to-understand ways.

Download and share with partners, community members, and decision makers.

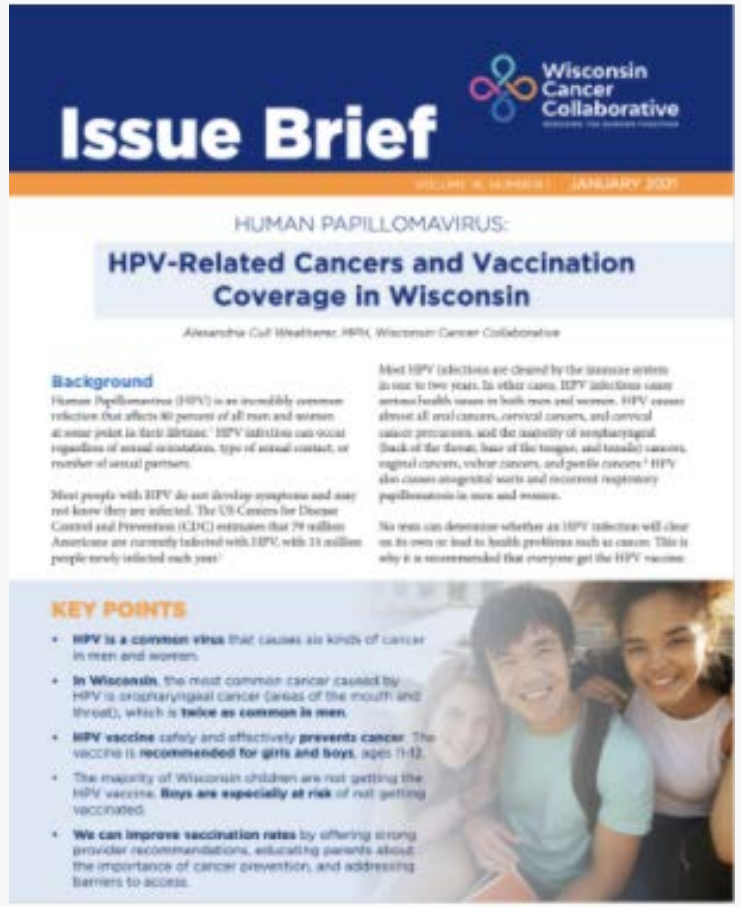


Wisconsin Cancer Collaborative

https://wicancer.org/resource/hpv-vaccine-infographic/

Resources – HPV Issue Brief

This Issue Brief examines statewide HPV-related cancer trends, offers strategies to prevent cancers by increasing HPV vaccination rates in girls and boys across Wisconsin, and explores how the COVID pandemic has affected HPV vaccine access and uptake.



Wisconsin Cancer Collaborative

https://wicancer.org/resource/hpv-related-cancers-in-wisconsin-issue-brief/

Save the date! – July Networking Webinar

July's webinar will feature **Courtney Harris of Covering Wisconsin.**

10:00-11:00

Join us to learn more about

- Local marketplace enrollment
- American Rescue Plan changes
- The resources available through Covering Wisconsin and the Wisconsin Cancer Collaborative

Wisconsin Cancer Collaborative

Register here: https://wicancer.org/events/webinars/

Thank you!

Thank you for joining!

Stay well!

Wisconsin Cancer Collaborative