

# VACUNAS (VACCINES) UPDATES

National Alliance for Hispanic Health

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## HEALTH EXPERTS SUGGEST TO CONSIDER WEARING A MASK AGAIN

A “triple-demic” of COVID-19, flu, and RSV in recent weeks [has prompted several health officials and localities](#) to encourage people to wear a mask in indoor public places again. While the CDC officially advises wearing a mask on a county-by-county basis depending on [COVID-19 community levels](#), the CDC director stated that no one has to wait for a recommendation from the CDC to start wearing a mask. Some health experts are urging anyone who lives in a high-risk household with adults over the age of 65, pregnant women, people with a pre-existing condition, or anyone who is immunocompromised should be wearing masks in public settings at this time.

There is strong evidence that wearing masks helps to reduce the transmission of several respiratory viruses. This was evident during the 2020 and 2021 winter seasons when rates of flu and other respiratory viruses were unusually low, which can largely be attributed to the protections we took to prevent the spread of COVID-19. Masks are effective at reducing transmission because they filter out both the tiny aerosol particles through which COVID-19 is primarily spread and larger respiratory droplets that are responsible for most flu and RSV transmission. Although masks are most effective at preventing the spread of viruses from an infected individual, masking to protect yourself from infection can still be beneficial, especially if you are using a high-quality version such as N95 mask.

It is important to remember that vaccines are best thought of as protection against severe illness if an individual gets infected with a virus. Wearing a mask, along with air filtration, is the first line of defense against transmission. When deciding when and where to wear a mask, health experts suggest paying attention to the “Three C’s”: close contact, crowded spaces, and confined spaces with poor ventilation. Masking while traveling on planes and public transportation or while shopping in stores are all indoor settings where wearing a mask could be beneficial.

### Flu Updates

**Health Experts Suggest to Consider Wearing a Mask Again**

**It Is Not Too Late for a Flu Vaccine**

**CDC U.S. Influenza Surveillance Report**



# IT IS NOT TOO LATE FOR A FLU VACCINE

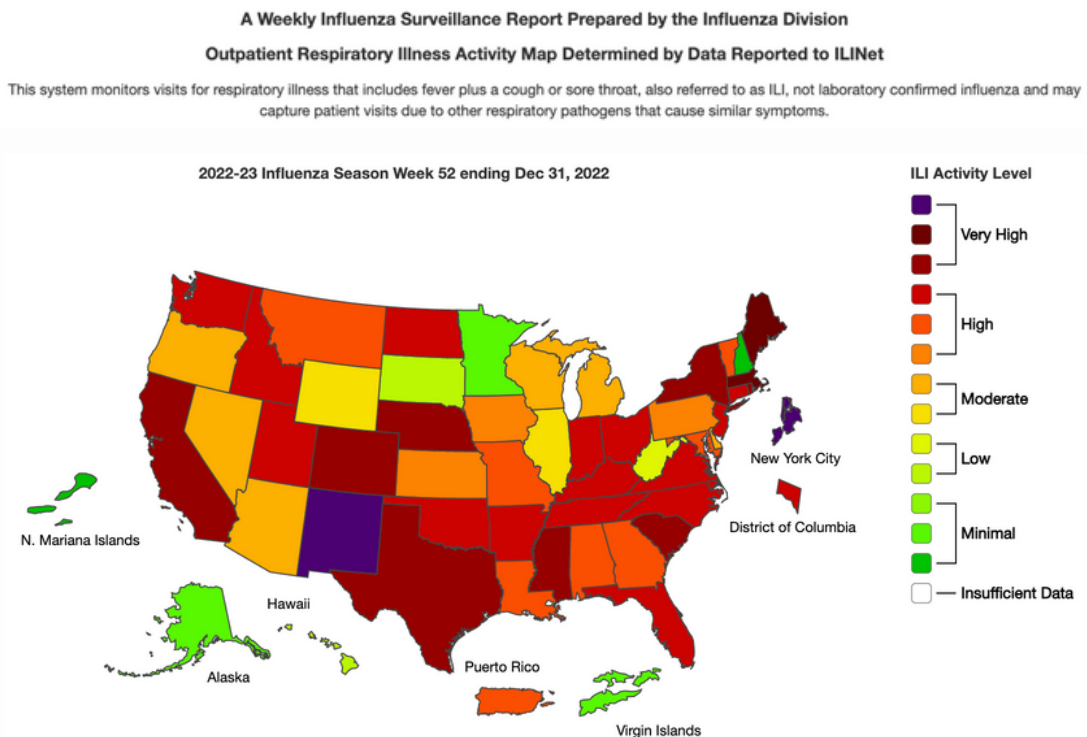
It is important to remember that it is not too late to get a flu vaccine, which appears to be well-matched to the influenza strains circulating this flu season. Even if the vaccine does not prevent infection, it still decreases the chance of hospitalization. The CDC continues to urge [everyone 6 months and older](https://www.cdc.gov/flu/about/faq/when-to-get-vaccine.html) to get a flu vaccine to prevent severe illness from the flu. People can visit [www.vacunashelp.org](https://www.vacunashelp.org) for more information and [www.vaccines.gov](https://www.vaccines.gov) to find a flu vaccine near them.



## CDC U.S. INFLUENZA SURVEILLANCE REPORT

[As of week 52 \(ending December 31, 2022\)](#), flu activity remains high across the country, but is declining in most areas. During week 52, **15.0% of people tested were positive for influenza** compared to 19.8% [during week 51](#). **18,954 patients with laboratory-confirmed influenza were admitted to a hospital** during week 52 compared to 18,848 during week 51. During week 52, **39 U.S. states/jurisdictions experienced “high” or “very high” influenza-like illness (ILI) activity\*** compared to 44 states/jurisdictions during week 51.

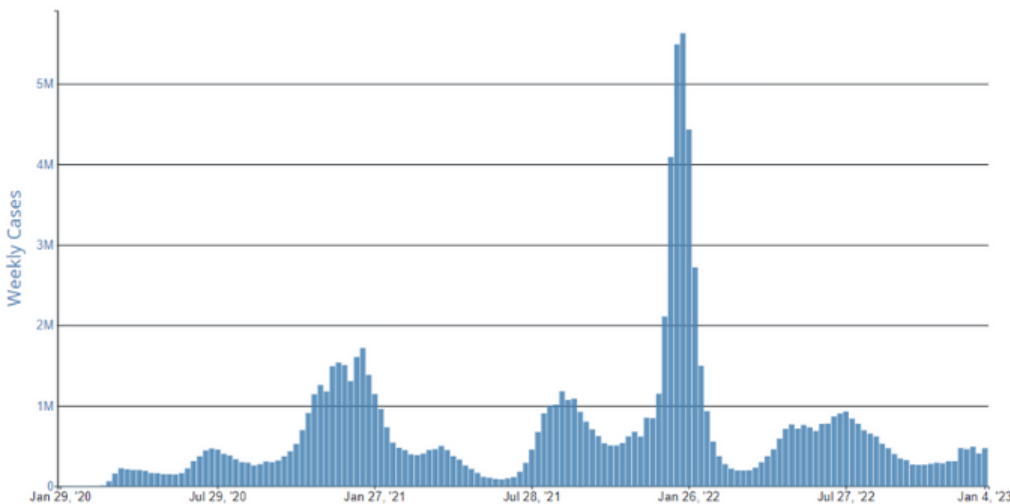
\* ILI is defined as fever and a cough and/or a sore throat. Activity levels are based on the percent of outpatient visits due to ILI in an area compared to the average percent of ILI visits that occur during weeks with little or no influenza virus circulation (non-influenza weeks) in that area.



# CDC COVID-19 DATA TRACKER - CASES, HOSPITALIZATIONS, & DEATHS

[As of January 4, 2023](#), the data were trending in a poor direction. The current 7-day average of weekly **new cases** (67,243) **increased** 16.2% compared with the previous 7-day average (57,847). The current 7-day daily average for **new hospital admissions** between December 28, 2022 – January 3, 2023 was 6,519. This is a 16.1% **increase** from the previous 7-day average (5,613) between December 21 – 27, 2022. The current 7-day average of **new deaths** (390) **increased** 8.3% compared with the previous 7-day average (360).

**Weekly Trends in Number of COVID-19 Cases in the U.S. Reported to CDC**



# CDC COVID-19 DATA TRACKER - VACCINATION RATES & TRENDS

[As of January 4, 2023](#), 80.9% of the total U.S. population have received at least one dose of the COVID-19 vaccine. 69.1% of the total U.S. population have completed their primary series and 15.4% of the U.S. population aged 5 and older have received an updated (bivalent) booster dose.

Looking at trends in vaccination status and intent from the [National Immunization Survey Adult COVID Module](#), 89.6% of Hispanic adults age 18+ have been vaccinated (received at least one dose of the COVID-19 vaccine), 1.6% definitely will get vaccinated, 2.0% probably will get vaccinated or are unsure, and 6.9% probably or definitely will not get vaccinated.

## COVID-19 Updates

**CDC COVID-19 Data Tracker - Cases, Hospitalizations, & Deaths**

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**CDC COVID-19 Data Tracker - Vaccination Rates & Trends**

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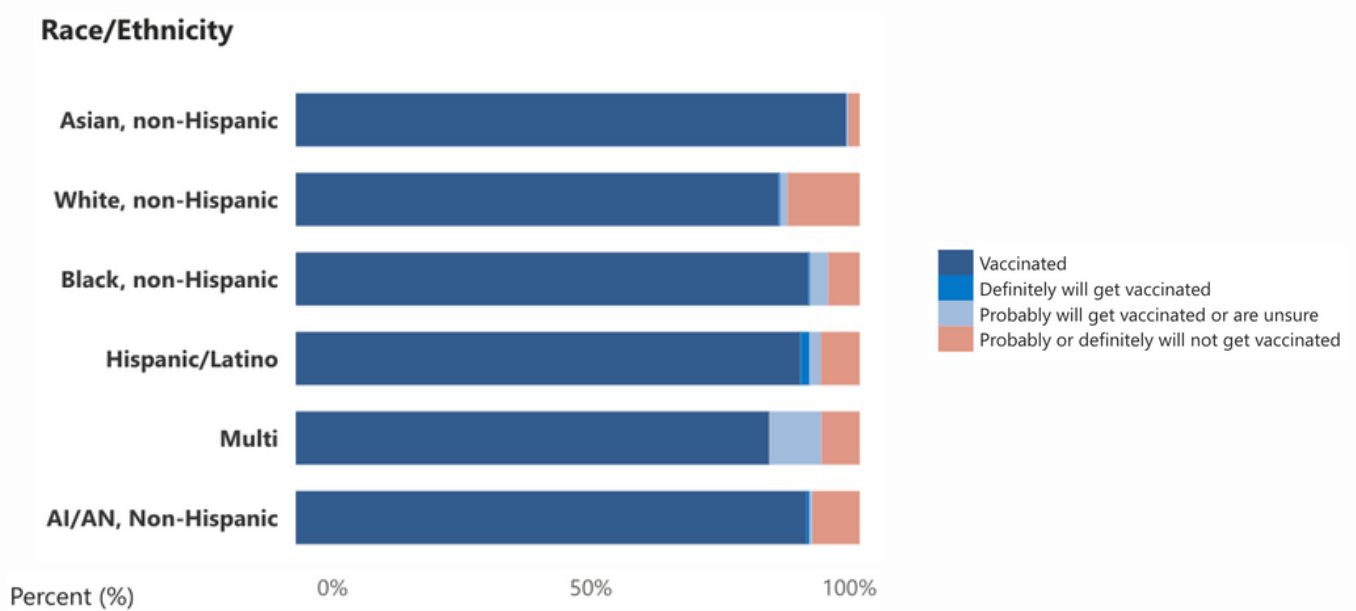
**CDC Expands Updated COVID-19 (Bivalent) Vaccine to Include Children Ages 6 Months Through 5 Years**

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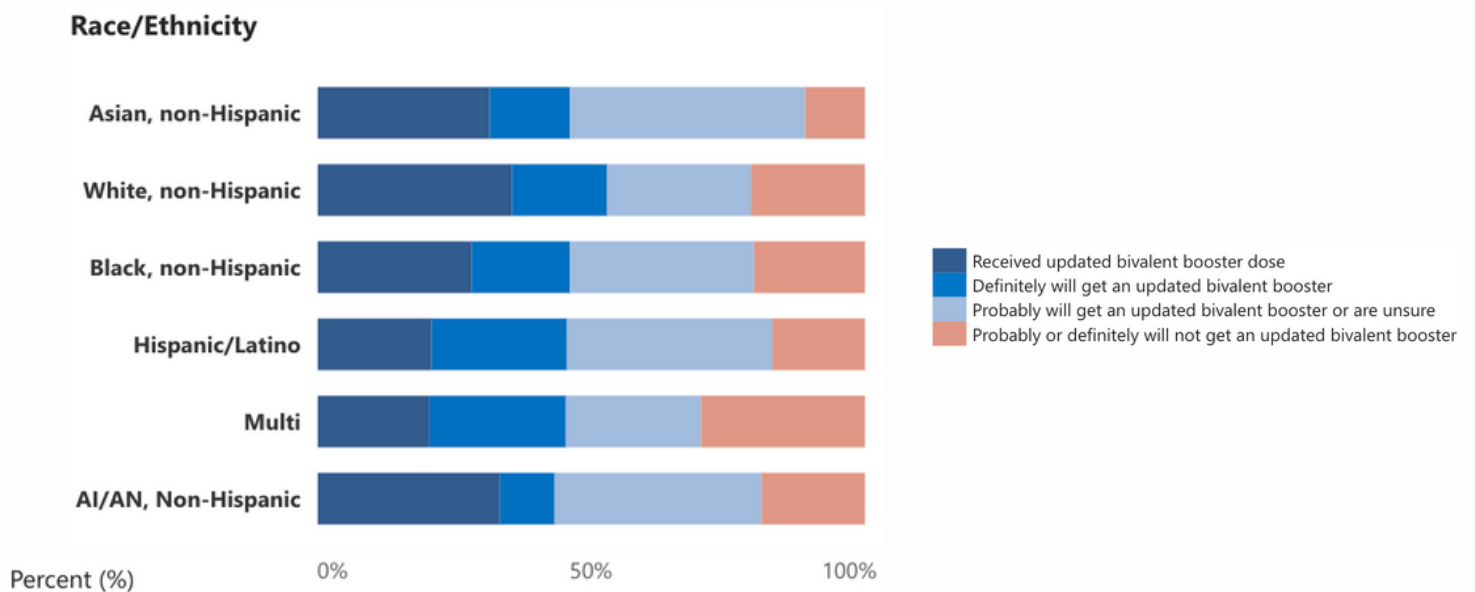
**U.S. Government Resumes Sending Free At-Home COVID-19 Tests**

Regarding the updated (bivalent) booster, 20.7% of Hispanic adults age 18+ (among adults who completed their primary series) have received the updated booster, 24.8% definitely will get an updated booster, 37.5% probably will get an updated booster or are unsure, and 16.9% probably or definitely will not get an updated booster.

**Vaccination Status and Intent Among All Adults 18+, by Demographics, United States**



**Vaccination Status and Intent Among All Adults 18+ Who Completed Primary Series, by Demographics, United States**



## CDC EXPANDS UPDATED COVID-19 (BIVALENT) VACCINE TO INCLUDE CHILDREN AGES 6 MONTHS THROUGH 5 YEARS

The U.S. Food and Drug Administration [authorized](#) and CDC updated its [guidance](#) to expand the use of updated COVID-19 vaccines to children ages 6 months through 5 years. The updated vaccine contains a bivalent formula that both boosts immunity against the original COVID-19 strain and adds an Omicron BA.4 and BA.5 spike protein component to protect against newer variants.

The CDC definition of up-to-date for COVID-19 vaccination, including boosters, is available by clicking [here](#) and may be updated as CDC monitors data. For children ages 6 months through 5 years, eligibility for the updated vaccine depends on which vaccine and how many doses they have received. Children 6 months through 5 years who completed a Moderna primary series are eligible to receive a Moderna bivalent vaccine as a booster 2 months after completing their primary series with the monovalent Moderna COVID-19 vaccine. Children ages 6 months through 4 years who have not yet begun their three-dose Pfizer primary series, or are currently completing it, will receive a Pfizer bivalent vaccine as their third primary dose following two doses of the monovalent Pfizer COVID-19 vaccine. Children who have already completed their three-dose primary series with the original (monovalent) Pfizer vaccine are not eligible for an updated booster dose at this time. It is important to note that there are [different recommendations for COVID-19 vaccines](#), including boosters, for people who are moderately or severely immunocompromised.

The majority of children in this age group have not received any doses of the COVID-19 vaccine since the monovalent vaccines were authorized for them last summer. Parents should talk with their child's healthcare provider about keeping their child up to date on their COVID-19 and other vaccines. The CDC is also urging healthcare providers to offer people flu vaccinations and updated COVID-19 boosters during the same visit.



## U.S. GOVERNMENT RESUMES SENDING FREE AT-HOME COVID-19 TESTS

The U.S. government has [restarted a program](#) that provides free COVID-19 at-home test kits to households through the Postal Service in response to the rise in COVID-19 cases along with flu and RSV. Health officials hope this will help curb the spread of COVID-19 in the winter months ahead and allow for vulnerable individuals who get COVID-19 to seek out treatments such as Paxlovid. Visit [covid.gov/tests](https://www.covid.gov/tests) to learn more and order four free COVID-19 at-home tests for your household.



## VACCINE CONFIDENCE IN PARENTS

The CDC regularly publishes reports on vaccine confidence. One of the [latest reports, published on December 16, 2022](#), discusses the perceptions, concerns, frustrations, and circulating misinformation about COVID-19 vaccines for children 6 months through 5 years of age. The report details a poll that found 17% of parents with children younger than 5 years old said they will get their child vaccinated right away, while 38% plan to wait and see how the vaccine is working for others, 27% will definitely not get their child vaccinated, and 11% will only do so if required. Emerging misinformation themes that may impact vaccine confidence include the perception that healthy children do not need the COVID-19 vaccine, children have a high risk of death from receiving the COVID-19 vaccine, COVID-19 poses no risk to children, and children are getting hepatitis from the COVID-19 vaccine.

Public health agencies can work with community partners and trusted messengers to disseminate messages that accurately describe the side effects of COVID-19 vaccination in children, emphasize the risk of negative health outcomes of COVID-19 in children, and detail the benefits of vaccination over infection-induced immunity. This CDC report also includes commonly asked questions from the public with answers to address concerns and fill gaps in information.

## VACCINE CONFIDENCE WITH THE UPDATED COVID-19 (BIVALENT) BOOSTER

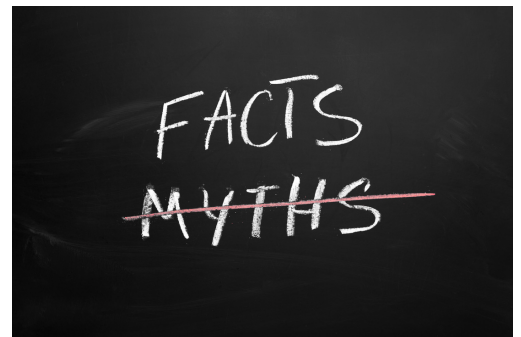
The CDC [published a report on December 23, 2022](#) discussing the state of vaccine confidence with the updated (bivalent) COVID-19 booster. Common misinformation themes include the belief that infection-induced immunity from COVID-19 provides more protection than the vaccine itself, waning protection from the primary series suggests an overall lack of vaccine effectiveness, the lack of safety trials in humans is evidence of a corrupt vaccination authorization system, and COVID-19 is no longer a threat, therefore, no further vaccines are necessary. There are also false narratives that receiving the seasonal influenza and COVID-19 vaccines at the same time is harmful. The work of trusted messengers promoting the safety and effectiveness of the updated COVID-19 booster within communities can help respond to people's concerns and counter these false narratives. There is valuable information for trusted messengers within this report that includes commonly asked questions from the public with answers to address concerns and fill gaps in information.

### Combating Misinformation

#### Vaccine Confidence in Parents

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#### Vaccine Confidence with the Updated COVID-19 (Bivalent) Booster



# TETANUS, DIPHTHERIA, & PERTUSSIS (TDAP OR TD VACCINATION)

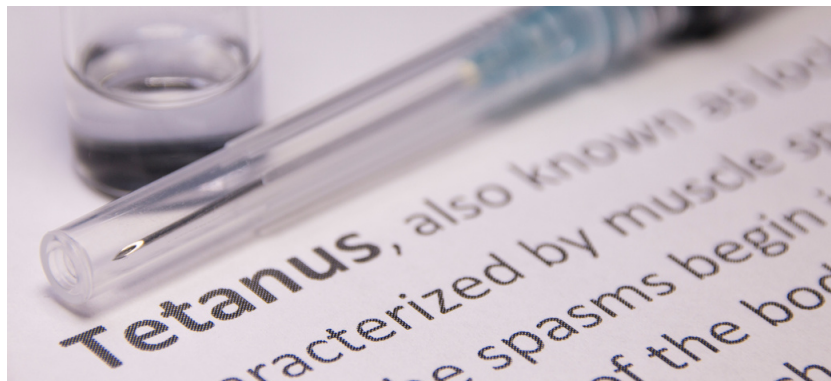
Whooping Cough, also known as [Pertussis](#), is a respiratory disease caused by *Bordetella pertussis* bacteria. The disease can cause serious illness in people of all ages and can be life threatening, especially for babies. Whooping cough can cause [rapid, violent, and uncontrolled coughing fits](#) until all the air is gone from the lungs. These coughing fits can last for up to 10 weeks or more.

[Tetanus](#), also known as “lockjaw,” is an infection caused by *Clostridium tetani* bacteria that enter someone’s body through broken skin, usually through injuries. When these bacteria enter the body, they produce a toxin that causes [painful muscle contractions](#). The infection often causes a person’s neck and jaw muscles to lock, making it hard to open the mouth and/or swallow.

[Diphtheria](#) is an infection caused by *Corynebacterium diphtheriae* bacteria that produces toxin and is usually spread through respiratory droplets. These bacteria can lead to [difficulty breathing, heart rhythm problems, and even death](#). The bacteria most commonly infect the respiratory system where it kills healthy tissue. If the toxin gets into the blood stream, it can cause heart, nerve, and kidney damage.

The [CDC recommends](#) every adult should receive a Tdap (tetanus, diphtheria, and pertussis) vaccine once if they did not receive it as a child to protect against pertussis in addition to the other two diseases. After this initial vaccine, every adult should receive a Td (tetanus, diphtheria) vaccine or Tdap booster every 10 years. Women who are pregnant should receive the Tdap vaccine during the early part of their 3rd trimester to protect their baby from pertussis in the first few months of life.

[Data from the National Health Interview Survey](#) in 2019 showed that the proportion of adults ages 19 and older who reported receiving any tetanus vaccine (Tdap or Td) during the past 10 years was 62.9%. Survey results showed there were racial and ethnic differences in tetanus vaccination coverage, with White adults exhibiting higher coverage compared with Black, Hispanic, and Asian adults.



## Adult Routine Vaccination

### Tetanus, Diphtheria, & Pertussis (Tdap or Td Vaccination)