February 14, 2022

Good afternoon:

Happy Valentine’s Day! Welcome to the immunizations listserv update. These updates will continue to come out on Monday afternoons at 4 p.m. throughout 2022. If you have suggestions for the update, please reach out to Shelby Ostrom at [shelby.ostrom@kalhd.org](mailto:shelby.ostrom@kalhd.org).

***Delayed Newsletter Next Week***

Due to President’s Day, immunizations newsletter will be released on Tuesday, February 22.

**PANDEMIC UPDATES**

***Topeka Capital-Journal Reports of Kansas Woman’s Death from COVID-19 Vaccination***

Late last week, the [Topeka Capital-Journal reported](https://www.cjonline.com/story/news/2022/02/09/jeanie-evans-kansas-autopsy-died-allergic-reaction-covid-vaccine-anaphylaxis/6709782001/) the findings of an autopsy done on an Effingham resident who died from apparent anaphylaxis from her COVID-19 Moderna vaccination that was given in Jefferson County on March 24 of last year. I wanted to provide resources for LHDs in case you receive questions about the article.

* The woman had a history of anaphylaxis, hypertension, and reactive airway disease. While anaphylaxis is NOT a common response to a vaccination, it can occur. [For more information on what to do if a patient experiences an allergic reaction, please refer to the clinical considerations tab on the CDC website.](https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html)
* Both the Pfizer and Moderna COVID-19 vaccines have been proven to be safe and incredibly effective for preventing severe illness. If a patient has questions OR a history of allergic reactions, you should direct them to their doctor to see if the vaccine is the right option for them.
* Science is based in fact, not in fear. Unfortunately, many news outlets have already used this sad case as a reasoning for being fearful of vaccination. It is important to remain calm and empathic if a patient is scared or nervous of the vaccination.

***Pfizer Delays Pfizer BioNTech <5 COVID-19 Vaccine EUA***

Pfizer has pulled the EUA application for the under 5 Pfizer BioNTech COVID-19 vaccine. Currently, there is no timeline for its approval or re-application. If you pre-ordered vaccine from KDHE, please be on the lookout for more information soon. [You can view Pfizer’s press release here.](https://www.pfizer.com/news/press-release/press-release-detail/pfizer-and-biontech-provide-update-rolling-submission)

***Dr. Fauci Predicts Endemic COVID-19 Coming Soon***

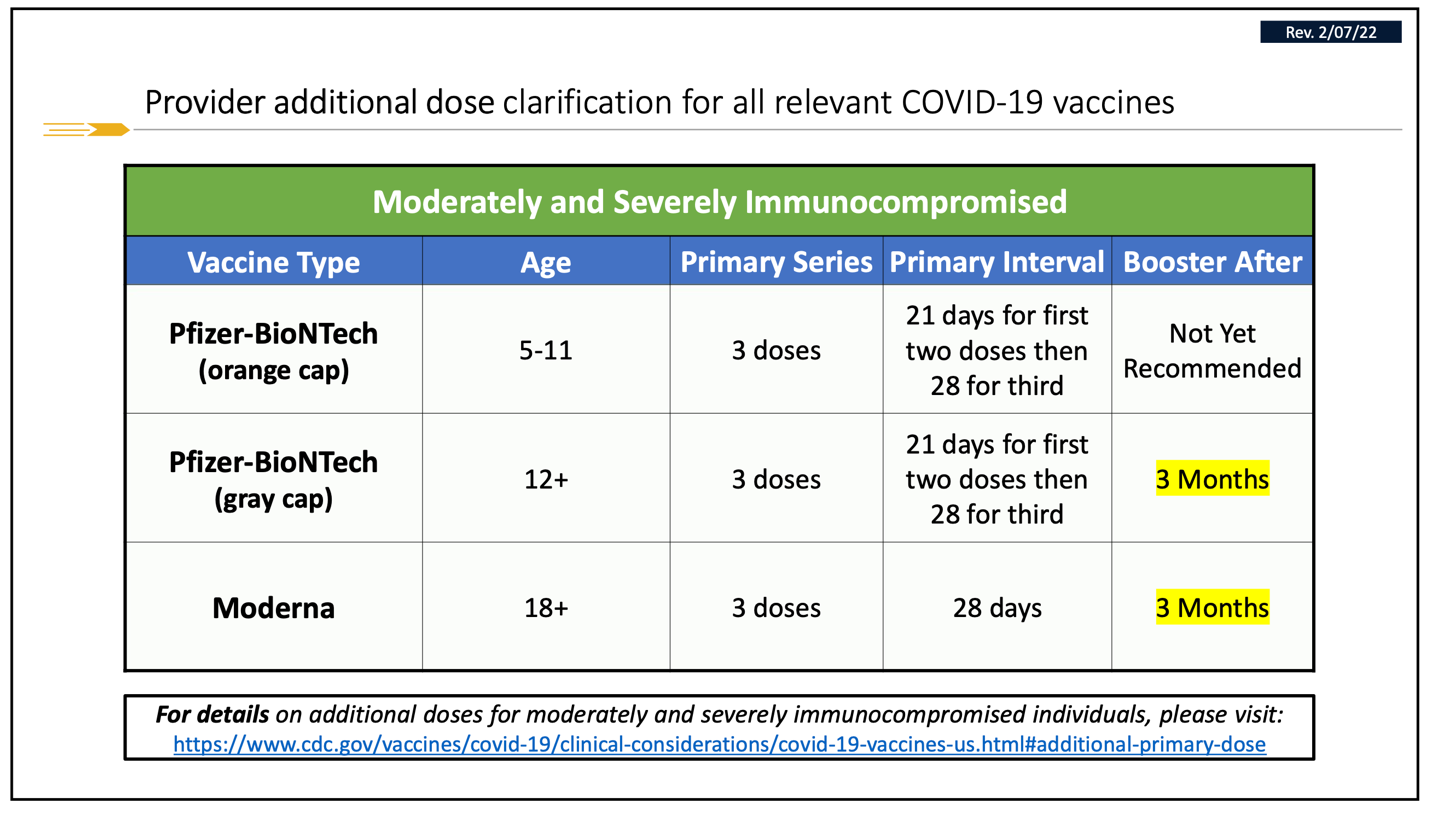
[Dr. Fauci spoke with USA Today](https://www.usatoday.com/story/news/health/2022/02/13/us-infection-totals-falling-covid-updates/6768059001/) and said that he believes the United States will reach the end of the “full blown” pandemic very soon. He predicted that mandates and mask recommendations will be made on a local level, rather than a state or national level. In addition, the United States is reporting fewer than 200,000 COVID-19 cases per day as of February 13, 2022.

***Kansas Still Struggling***

The Topeka Capital-Journal reported January 24 that Kansas has the eighth-highest infection rate in the United States with over 14,270 cases reported over the last week of January. For more information and statistics, [you can view the article here](https://www.cjonline.com/story/news/coronavirus/2022/01/24/kansas-covid-case-rate-eighth-highest-hospital-vaccine-deaths-omicron-update/6635116001/). As a reminder, you can join the weekly LHD calls with KDHE for updated case numbers each Monday and Wednesday. [Link to register for those calls included here.](https://us02web.zoom.us/webinar/register/WN_y5dbo2cWTB6nVPAraVEyXw)

***FDA Approves Shortening Time Between Primary & Booster Doses from 5 months to 3 months for Immunocompromised Patients***

Last week, the CDC Director released a press release approving the shortened time between a primary dose and booster dose to 3 months for immunocompromised people. The guidance has been [updated on the Interim Clinical Considerations page on the CDC website.](https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html) Included below are charts shared during the February 7 and February 14 LHD KDHE webinars. The Johnson & Johnson vaccine also has recommended guidance. It is recommended that immunocompromised patients receive a primary series, an additional primary dose, and a booster dose (4 shots total).



Table

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**IMPORTANT VACCINE UPDATES**

***Reminder: Prevnar 20***

At the end of January, the ACIP met and recommended the use of the new 20-Valent Pneumococcal Conjugate vaccine for the treatment of pneumonia called Prevnar 20. This vaccine is approved for adults 19-65. Kansas will be receiving the vaccinations sometime within the next couple of months. For more information about the new conjugate, [you can view the MMWR here.](https://www.cdc.gov/mmwr/volumes/71/wr/mm7104a1.htm?s_cid=mm7104a1_w)

***Nurture KC Releases Vaccine Confidence Report***

Last week, KDHE immunization partner Nurture KC released a result of a statewide survey conducted to determine vaccine confidence rates in Kansas. The study found that 95% of participants supported vaccines for children, teens, and adults. [You can view the press release for the survey here.](https://nurturekc.org/kansans-support-vaccines/) Questions about the survey can be sent to Tracy Russell, Nurture KC Executive Director at [trussell@nurturekc.org](mailto:trussell@nurturekc.org).

**STATE & KDHE UPDATES**

***Continued Challenges to Vaccine Schedule in Legislature***

KALHD will continue to keep monitor legislation that could affect health departments and your ability to vaccinate. Each week, Dennis sends out a legislative update on Friday afternoons. If there is legislation regarding vaccination, I will also share it in the immunizations listserv.

***Updated Kansas Immunization Program Contact Sheet***

KALHD has created a PDF of contacts at KDHE relating to immunizations and the Kansas Immunization Program. [It can be found on the vaccination resources page here](https://www.kalhd.org/resources/vaccination-resources/).

***Updated Vaccine Resources Page***

The vaccine resource page on KALHD’s website has been updated to reflect vaccine recommendation changes. [You can view the page here.](http://www.kalhd.org/resources/vaccination-resources)

***Vaccine Ordering***

If you plan to order vaccine this week from KDHE, please fill [out this form](https://www.surveymonkey.com/r/3QY82P6) by Wednesday at 5 p.m. Orders will be scheduled for delivery the following week. If you need assistance, please reach out to me or [kdhe.vaccine@ks.gov](mailto:kdhe.vaccine@ks.gov).

***Requesting Testing or Vaccine Clinics***

If you would like to request KDHE support for a testing or vaccination clinic, please submit your request [using this form](https://docs.google.com/forms/d/e/1FAIpQLSd7PCzD-Y6n-LEuR3U4nPyOLQnlTK7TuXLCIZkqVSN1uXqfQg/viewform).

***Reminder: KDHE Custom Marketing Materials***

KDHE is offering free marketing and comms support for COVID-19 vaccine and testing efforts through CML Collective (CMLC). CMLC is a Kansas-based, women- and minority-owned

communications firm, and **their services are available through the end of June 2022.**

Through CMLC, groups can submit requests for physical (posters, flyers, etc.) or digital (social media posts, etc.) advertisements through a website form, selecting from a set of pre-approved layouts, color options, and messages for quick design and production. There is also an option to have materials printed and shipped directly for free. For more information, examples of advertisements, to submit a request, or ask a question of CMLC, please visit [www.cmlcollective.com/kdhe](https://gcc02.safelinks.protection.outlook.com/?url=http%3A%2F%2Fwww.cmlcollective.com%2Fkdhe&data=04%7C01%7Clisa.horn%40ks.gov%7C00612b75813649ba927208d9e06e7179%7Cdcae8101c92d480cbc43c6761ccccc5a%7C0%7C0%7C637787588817341882%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000&sdata=aOpQ9wZ0zQW3gc6RFaizUI%2F0fY1B%2BnjmGEhU5092%2FaQ%3D&reserved=0).



**EVENTS, TRAINING, & RESOURCES**

***Mark Your Calendars for These Upcoming Kansas Conferences:***

*Governor’s Public Health Conference*

*March 29-31, 2022*

*Manhattan, KS at the Hilton Garden Inn*

*KALHD Mid-Year Meeting & Data Day*

*June 27-29, 2022*

*Salina, KS*

***Pfizer Updated Training Schedule***

Pfizer has updated their training webinar schedule for February. As a reminder, these meetings take place on the afternoons of Tuesday/Thursday and at Noon on Wednesdays. These times are all in CST. [For the full schedule and to register, please visit this page.](https://www.pfizermedicalinformation.com/en-us/medical-updates)

***Upcoming Events & Trainings***

[ACIP Quarterly Meeting](https://www.cdc.gov/vaccines/acip/meetings/downloads/agenda-archive/agenda-2022-02-23-24-508.pdf)

February 23-24, 2022

If you would like to submit oral public comments during the meeting, please do so by February 18 [via the request page here.](https://www.cdc.gov/vaccines/acip/meetings/index.html)

Vaccinate ALL 58 and #Thisisourshot

Using Social Media to Effectively Communicate About COVID-19 Vaccines

Wednesday, February 16, 2022

2:30 p.m. CST

[Register Here](https://zoom.us/webinar/register/WN_-MzKkq6wRIG1gZiwnsx2Ag)

CDC Current Issues in Immunization Webinar

Updates to the 2022 Child/Adolescent/Adult Immunization Calendars

March 2, 2022

[View more information](https://www.cdc.gov/vaccines/ed/ciiw/index.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fvaccines%2Fed%2Fciinc%2Findex.html#events)

**VACCINE PREVENTABLE DISEASE OF THE WEEK**

We will be wrapping up the history of the MMR this week with Rubella, or as it is commonly called German Measles. I will also go into a little more depth about the 1998 Andrew Wakefield study and why it is a bad example of epidemiological research.

**What Is It?**

Rubella, also known as German Measles, is a viral disease that is spread through coughing and sneezing. An infected person can spread the disease for up to 7 days before symptoms start. Rubella produces mild flu-like symptoms for most people, which includes a rash that starts on the face and can travel across the body and mild pink eye. Rubella is typically the most dangerous for pregnant women.

**Congenital Rubella Syndrome (CRS)**

Like Mumps, a woman who is infected with Rubella can miscarry, or spread dangerous side effects to her child including heart problems, intellectual and physical disabilities, and organ damage. These side effects are more common early in pregnancy, and a birth defects by Rubella in utero are called Congenital Rubella Syndrome. Like Chicken Pox, once infected, a person develops lifelong immunity to Rubella. [You can read more about CRS and living with it here.](https://measlesrubellainitiative.org/living-with-congenital-rubella-syndrome-you-get-called-stupid-or-slow-you-arent-im-not/)



**History**

The term Rubella was translated from the German word Röteln as early as 1619, when German physician Daniel Sennert first discovered the disease. It was distinguished from Measles in the early 19th century and continues to be called German Measles because of its prevalence in Germany. Because the disease does not typically cause long-term side effects, it was not studied to the same extent as Measles. However, in 1941, Australian OBGYN McAlister Gregg discovered that Rubella was responsible for prenatal infections that caused congenital malformations in children.

**Vaccination & Eradication in the United States**

Because Rubella can cause serious birth defects, during the last endemic in the United States from 1964 to 1965, over 11,000 pregnant women lost their babies and over 20,000 babies were born with Congenital Rubella Syndrome. A vaccine was made available in the United States in 1969 and was later concentrated to the childhood MMR vaccination. The United States began a nationwide eradication effort of Rubella that ended in 2015 when it was declared that the Americas were free of endemic Rubella transmission.

**The Andrew Wakefield Study**

As mentioned during Measles week, then Dr. Andrew Wakefield developed a study where he wrongfully determined that symptoms of Autism and IBS were present in children who had received the MMR vaccination. Originally published in *The Lancet,*it incorrectly linked 12 children’s symptoms to vaccines. However, it was later revealed that Dr. Wakefield had ethical and financial ties to a competing Measles vaccine provider in the United Kingdom. After the study was released and then debunked, the vaccine rate from the MMR fell from 95% to 80% in the early 2000s in the UK.



Andrew Wakefield continues to be used as an example of bad epidemiological and research study, with books, articles, and conversations being had on what not to do. However, for the anti-vaccine movement, which has slowly been gaining traction since the 1970s, he is hailed as a hero.

***What We Can Learn from the MMR***

Once hailed as an innovation in combination vaccines, the MMR has experienced a lot of media attention, but many people are not fully aware of the diseases that the vaccine prevents. Because of Andrew Wakefield’s study, deadly diseases for children and pregnant women have become prevalent in world again, causing small, pocket outbreaks to occur in areas of low vaccine confidence. By learning the side effects of the diseases, the MMR is intended to protect from, we can remove fear from science, which is one of the leading reasons for vaccine skeptics. [*Nature*released an article about Andrew Wakefield that sheds light on how he was able to fool the world.](https://www.nature.com/articles/d41586-020-02989-9) As public health professionals, we can take the power back.

Sources & Further Reading:

<https://www.cdc.gov/rubella/about/complications.html>

<https://www.cdc.gov/rubella/about/symptoms.html>

<https://www.cdc.gov/rubella/about/in-the-us.html>

<https://measlesrubellainitiative.org/living-with-congenital-rubella-syndrome-you-get-called-stupid-or-slow-you-arent-im-not/>

<https://www.britannica.com/science/rubella>