

## New recommendations from the National Immunisation Advisory Committee (NIAC)



These new recommendations have not yet been operationalised by the HSE. Information for parents, changes to the I.T system, medicines protocol, clinical guidance, supporting materials and training are being prepared.

The National Immunisation Advisory Committee has issued new recommendations regarding a second COVID-19 vaccine booster dose.

To maintain high levels of immunity in those most at risk of severe disease a second booster dose of an mRNA vaccine is now recommended for the following:

- all those aged 65 years and older (a **4th COVID-19 vaccine dose**)
- all those aged 12 or older with immunocompromise **at the time of primary or booster vaccination\*** associated with suboptimal response to vaccines (a **5th COVID-19 vaccine dose**) (please see page 2 for table of underlying conditions associated with very high risk or high risk of severe COVID-19 disease).

### **No other groups are recommended a second booster dose at this time**

The aim of offering a second booster is to protect those most at risk of hospitalisation and severe breakthrough infection.

While breakthrough infection in those vaccinated and boosted is generally mild and of short duration, in those most at risk, i.e. older persons and those with immunocompromise, breakthrough infection can result in hospitalisation and severe illness.

Age and immune status, remain the most important determinants of risk of severe breakthrough infection.

*\*Note the advice regarding immunocompromise at the time of booster vaccination as well as primary vaccination.*

### Timing

The second booster vaccine is recommended at least **six months** after the first booster. A minimum interval of four months may be used for operational reasons.

### Vaccines recommended for second booster dose

- For those aged 12-29 years, Comirnaty® (0.3ml/30 micrograms) should be given
- For those aged 30 years and older, Comirnaty® (0.3ml/30 micrograms) or Spikevax (0.25ml/50 micrograms) should be given.

If an mRNA vaccine is contraindicated or declined, consideration may be given to using a non mRNA vaccine as the second booster vaccine, following an individual benefit-risk assessment.

### Breakthrough infection following a first booster vaccine

It is recommended to defer the second booster vaccine for **six months** following infection onset. A minimum interval of four months may be used for operational reasons.



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## Immunocompromising conditions eligible for a second booster

Those with the following immunocompromising conditions are eligible for a second booster

Information extracted from NIAC Immunisation Guidelines for Ireland - Table 5a.2 Underlying conditions associated with very high risk or high risk of severe COVID-19 disease (in the shaded area).

Underlying condition	Very high risk	High risk
<b>Cancer</b>	<p>Receiving or within 6 weeks of receiving systemic cytotoxic chemotherapy, targeted therapy, monoclonal antibodies or immunotherapies</p> <p>Receiving treatment or pending treatment for a haematological cancer</p> <p>Undergoing or within 6 weeks of surgery or radical radiotherapy for lung or head and neck cancer</p> <p>Advanced/ metastatic cancer</p>	Haematological <sup>1</sup> - within 5 years of treatment
<b>Chronic kidney disease</b>	On dialysis, or eGFR less than 15 ml/min	eGFR less than 30ml/min
<b>Immunocompromise due to disease or treatment</b>	<p>Severe e.g.,</p> <p><b>Transplantation:</b></p> <ul style="list-style-type: none"> <li>Listed for solid organ or haematopoietic stem cell transplant (HSCT)</li> <li>Post solid organ transplant at any time</li> <li>Post HSCT within 12 months</li> </ul> <p><b>Genetic diseases:</b></p> <ul style="list-style-type: none"> <li>APECED<sup>2</sup></li> <li>Inborn errors in the interferon pathway</li> <li>Some B and T cell deficiencies</li> </ul> <p><b>Treatment e.g.,</b></p> <ul style="list-style-type: none"> <li>Cyclophosphamide, Rituximab, Alemtuzumab, Cladribine or Ocrelizumab in the last 6 months</li> </ul>	Other e.g., High dose systemic steroids <sup>3</sup> HIV, not on treatment or CD4 count less than 200 /10 <sup>6</sup> L for adults

<sup>1</sup> Includes e.g., leukaemia, lymphomas, blood dyscrasias or other malignant neoplasms affecting the bone marrow or lymphatic systems

<sup>2</sup> APECED - autoimmune polyendocrinopathy candidiasis ectodermal dystrophy

<sup>3</sup> The following doses of prednisolone (or equivalent dose of other glucocorticoid) are likely to be immunosuppressive:

- Adults and children  $\geq 10$ kg:  $\geq 40$ mg/day for more than 1 week, or  $\geq 20$ mg/day for 2 weeks or longer
- Children less than 10 kg: 2mg/kg/day for 2 weeks or longer

## New recommendations from NIAC (cont. from page 2)

### Booster vaccine safety

First and second booster doses of mRNA vaccines have not shown any unexpected short term safety concerns. Myocarditis and pericarditis are very rare risks of mRNA vaccination, predominantly in males aged under 30 years after the second dose of the primary vaccination course and the risk appears to be comparatively lower following a first booster dose. Data on second booster doses is more limited but preliminary experience from Israel has not revealed any new safety concerns.

### NIAC general recommendations

In the Omicron era, NIAC advise completion of the primary series and booster vaccination, is essential to minimise the risk of infection and importantly, preventing hospitalisation and severe disease.

### Efforts to increase primary and first booster vaccination uptake should remain a public health priority.

mRNA vaccines (Comirnaty® and Spikevax®) are the preferred vaccines for use in Ireland.

- **Those aged 12 years and older**, including those pregnant or breastfeeding, should complete a primary course and receive a booster vaccine (total of three doses)
- **Those aged 5-11 years** should complete a primary course (total of two doses)
- **Those with immunocompromise** associated with a sub optimal response to vaccines at the time of their primary or booster vaccination:
  - aged 12 years and older should complete a primary course and an additional dose (total of three vaccine doses)
  - aged 5 to 11 years should complete a primary course and an additional dose (total of three vaccine doses)

Those who have a contraindication to or who decline a primary course or booster dose of an mRNA vaccine should be offered a non-mRNA vaccine.

Those who have had previous SARS-CoV-2 infection should complete their primary and booster vaccination to optimise their protection.

 [Read NIAC recommendations here.](#)

## EMA and ECDC recommendations regarding a second COVID-19 vaccine booster for those < 80 years of age

The European Centre for Disease Prevention and Control (ECDC) and EMA's COVID-19 task force (ETF) have concluded that a fourth dose (or second booster) can be given to adults 80 years of age and above after reviewing data on the higher risk of severe COVID-19 in this age group and the protection provided by a fourth dose.

ECDC and EMA also noted that there is currently no clear evidence in the EU that vaccine protection against severe disease is waning substantially in adults with normal immune systems aged 60 to 79 years and thus no clear evidence to support the immediate use of a fourth dose for this age group for the moment.

However, NIAC have recommended a 2nd vaccine booster dose for those aged 65 years and older.

**The second booster dose is therefore off licence for those aged 65-79 years with normal immune systems.**

 [Read more here.](#)

## Website

Visit our website [www.immunisation.ie](http://www.immunisation.ie) regularly for the most up to date information to support vaccinators and health professionals responding to queries.



Visit website [here](http://www.immunisation.ie).

## HSeLanD Vaccination Training Programme

### COVID-19 vaccination training programme

You can access updates to the National Immunisation Office COVID-19 Vaccination Training Programme for

- Children 5 to 11
- Pfizer,
- Moderna, and
- Janssen vaccine

through your HSeLanD account.

We would encourage you to log in and complete the updated content in each programme to refresh your knowledge and ensure you are up to date with your COVID-19 Vaccination Training.

### Other immunisation training programmes

You will also find other programmes developed by our office by logging into your account on [www.hseland.ie](http://www.hseland.ie) selecting **courses** then selecting **clinical skills** and finally selecting **National Immunisation Office**.

Our programmes cover topics like “Communicating about vaccines”, “HPV vaccine”, the “Flu vaccine”, “LAIV flu vaccine” and “vaccines in pregnancy” and “Storing and Managing Vaccines”.



Visit HSeLanD [here](http://www.hseland.ie).

If you have any issues with the platform please contact HSeLanD directly.



Contact HSeLanD [here](http://www.hseland.ie).

## Do you have queries?

Clinical queries from healthcare professionals can be directed to our dedicated email address



Send your query [here](mailto:clinical@immunisation.ie).

Should vaccines be exposed to temperatures outside of parameters please contact a National Immunisation Office pharmacist immediately. Contacts include:

- Mariangela Toma: mobile 087 7575679
- Cliona Kiersey: mobile 087 9915452
- Achal Gupta: mobile 087 4064810

**Queries that are not clinical or technical cannot be answered by the National Immunisation Office**