

Uptake low for COVID-19 vaccine boosters in immunocompromised adults

January 25 2023, by Elana Gotkine



For immunocompromised adults, adherence to U.S. Centers for Disease



Control and Prevention mRNA monovalent COVID-19 booster dose recommendations is low, according to a study published online Jan. 20 in *JAMA Network Open*.

Sara Y. Tartof, Ph.D., M.P.H., from Kaiser Permanente Southern California in Pasadena, and colleagues examined mRNA COVID-19 vaccine uptake and factors associated with uptake among immunocompromised adults from Dec. 14, 2020, through Aug. 6, 2022, in a cohort study. A total of 42,697 immunocompromised individuals met the eligibility criteria.

The researchers found that 78.0 percent of the immunocompromised individuals had received a third dose of mRNA COVID-19 vaccine, while only 41.0 percent had received a fourth dose, corresponding to a primary series and monovalent booster dose. Following the CDC recommendation to receive a second monovalent booster (fifth dose), only 0.9 percent had uptake. The likelihood of receiving at least four doses was increased for adults aged 65 years or older compared with those aged 18 to 44 or 45 to 64 years (hazard ratios, 3.95 and 2.52, respectively). The likelihood of receiving at least four doses was lower for Hispanic and non-Hispanic Black adults versus non-Hispanic White adults (hazard ratios, 0.77 and 0.82, respectively), for individuals with prior documented severe acute respiratory syndrome coronavirus 2 infection versus no infection (hazard ratio, 0.71), and for those receiving versus not receiving high-dose corticosteroids (hazard ratio, 0.88).

"Given the vulnerability of this population to develop severe COVID-19, a renewed focus on targeted and tailored efforts to ensure that immunocompromised individuals remain up to date with continuously evolving COVID-19 booster dose recommendations is warranted at this stage of the pandemic," the authors write.

More information: Sara Y. Tartof et al, Analysis of mRNA



COVID-19 Vaccine Uptake Among Immunocompromised Individuals in a Large US Health System, *JAMA Network Open* (2023). DOI: 10.1001/jamanetworkopen.2022.51833

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Citation: Uptake low for COVID-19 vaccine boosters in immunocompromised adults (2023, January 25) retrieved 26 June 2024 from https://medicalxpress.com/news/2023-01-uptake-covid-vaccine-boosters-immunocompromised.html

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