

New pediatric immunization guidelines take a jab at vaccine hesitancy

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It happens every year around this time: The Centers for Disease Control and Prevention releases the new year's immunization schedules, which describe when and how vaccines should be given.

Maybe it's routine enough to elicit nothing more than a shoulder shrug from some, but in an era described by the World Health Organization and the United Nations International Children's Emergency Fund as "the largest continued backslide in vaccination in three decades," little is routine about new vaccine information, especially when it comes to kids.

"The way the COVID-19 vaccination program was carried out, it caused many people to question vaccines in general," said Brian Donnelly, a pediatrician with Allegheny Health Network. "So there may be that kind of reluctance for a lot of people who may not understand what's going on with new vaccine schedule changes."

Especially since there are more updates this year than Donnelly can recall in the recent past.

Please welcome to the stage: four brand-new or updated vaccines.

First, the 20-valent pneumococcal conjugate vaccine, which can—but doesn't have to—replace the 15-valent version given to little ones four times between birth and 15 months of age. This vaccine fights 20 *Streptococcus pneumoniae* strains, known to cause anything from meningitis to sepsis to pneumonia.

Next up, the mpox (formerly "monkeypox") vaccine. After the 2022 outbreak—which caused nearly 93,000 infections, and 170 deaths, to date—the Food and Drug Administration approved the mpox vaccine for emergency use in August of that year for those 18 years and older who are at high risk.

Because the CDC's pediatric immunization schedule includes those 18 years old and younger, the mpox vaccine is included, but just barely, for the oldest "kids."

The next inclusion is one of the two new RSV preventers, but maybe not the one you'd guess.

After "unprecedented demand," as described by co-producer Sanofi, for the monoclonal antibody meant for children ages eight months and younger, and an associated shortage, the only RSV vaccine noted on the 2024 immunization schedule is the version now offered to women during weeks 32 through 36 of pregnancy.

While the RSV vaccine for moms does confer antibodies to unborn babies, reducing the risk of serious disease by 82% measured at 90 days after birth, its inclusion on the immunization schedule applies to adolescents of child-bearing age.

Last is an updated meningitis vaccine that covers five serogroups (instead of four), and is dosed identically: ages 11 or 12 and again at 16.

In addition, this year's immunization schedule addresses ongoing confusion about those with egg allergies and how/if they should receive the influenza vaccine, which can be "egg-based."

The CDC removed all references to the issue and added a note clarifying that "persons with a history of egg allergy of any severity can be vaccinated with any [influenza vaccine](#) indicated by the recipient's age and health status with no additional safety considerations."

For many medical professionals, none of this is shocking. They've stayed in-the-know as these vaccines debuted and safety information evolved.

Thinking from the perspective of patients, newness or change aren't always the primary hurdles to vaccine uptake, according to Tom Walsh, Allegheny Health Network infectious disease physician. The main issue can be social media and the microphone those platforms give to anyone

at all.

"It's challenging because it gives the appearance of an equal argument because you'll always have some contrarian with credentials," said Walsh, who is also medical director of AHN's antibiotic stewardship program. "When you see it in an argument on [social media](#), it looks like it's a one-on-one argument, when it's really two million [in favor of the vaccines] versus three [who aren't]."

At least in part, that "misinformation" and the "bad actors" propagating it, as Walsh describes, are contributors to the 67 million children worldwide who missed scheduled vaccines between 2019 and 2021 and, closer to home, the four grade levels in Allegheny County—kindergarten and seventh, eighth and 12th—that failed to reach the Healthy People 2020 goal of 95% vaccination coverage, based on 2022-23 school-generated data reported to the county.

In pediatricians' offices, those statistics manifest as more frequent, and longer, conversations about vaccines, said Donnelly.

But those sometimes-tough talks are welcomed.

"If you take the longer view, these changes are comforting," he said. "There are things you can keep yourself from getting. But there are still hundreds of things you can still get, and this winter—with the increases in COVID, flu and RSV, I think that people are realizing the value of prevention."

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