

Memo

Booster eligibility addendum: COVID-19 Vaccine Technical Advisory Group (CV TAG) recommendations

Date: 24 March 2023

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From: Dr Ian Town, Chief Science Advisor, Te Tumu Whakarae mō te Hauora

For your: Information

Purpose of report

1. To clarify the recommendations of the COVID-19 Vaccine Technical Advisory Group (CV TAG) regarding eligibility of additional COVID-19 vaccine doses for individuals aged 16 to 29, as related to the previous CV TAG memo dated 10 February 2023, "*Update on Intervals and Booster Eligibility: COVID-19 Vaccine Technical Advisory Group (CV TAG) recommendations*"

Background and context

2. On 10 February 2023, CV TAG advised that "In a pre-winter vaccination programme, the groups recommended (i.e., actively encouraged) to receive a second booster dose should be expanded to include those eligible for free influenza vaccine in Aotearoa New Zealand. This is with the exception of the childhood age groups and pregnant people under the age of 30 that are part of free influenza vaccine eligibility".
3. CV TAG also recommended that everyone aged 30 years and over should be **eligible** to receive a second booster dose.

4. CV TAG advised that “The benefits of a second booster dose for people under the age of 30 years, who are otherwise healthy, are less certain. People in this group are encouraged to discuss their health needs and risks (e.g., risk of myocarditis or pericarditis) and benefits of a second booster dose with their health care provider”.
5. This memo is an **addendum** to the advice issued on 10 February 2023 in the CV TAG Memo ‘*Update on Intervals and Booster Eligibility*’ to further clarify recommendations, particularly for additional doses (doses after the first booster dose) in people under the age of 30 years, as these were previously unclear. The National Immunisation Programme, along with the Immunisation Advisory Centre, have requested additional guidance from CV TAG on this matter.

Recommendations

6. CV TAG notes:

- a. Hospitalisation rates for COVID-19 in Māori and Pacific peoples aged 50-60 years are broadly similar to the hospitalisation rates in 60–70-year-olds of other ethnicities (see [Appendix 1](#) which reproduces Table 1 from the 10 February 2023 memo).

7. CV TAG recommends:

- a. Simplifying who is considered “at risk” **in those aged 16 years and over**, by expanding the “at risk” group to include those eligible for government funded influenza vaccination (see [Appendix 2](#)) with the exceptions stated below. However, those previously considered “at risk” in previous CV TAG advice should also be included in the expanded criteria (see [Appendix 3](#) and [Appendix 4](#)).
- b. As part of the above, the booster eligibility recommendations, as outlined on 10 February 2023, should be clarified to include 16- to 29-year-olds who fall under the following groups as **eligible for additional doses of the COVID-19 vaccine**:
 - Those who are eligible for a government funded influenza vaccination other than those eligible only because of workplace-related schemes (see further detail on pregnancy in **7.d**). For completeness, the relevant eligibility criteria are included in [Appendix 2](#).
 - Those who have another condition that places them at risk of severe COVID-19, in line with previously issued CV TAG advice (see [Appendix 3](#)). It should be noted that most of these are covered by the influenza criteria above, with the exceptions being those severely under- or over-weight and those with conditions similar to those listed in [Appendix 3](#), where their clinician considers them to be at high risk of severe COVID-19.
 - Those who are residents of disability care facilities, in line with previously issued CV TAG advice issued on 22 June 2022 in the CV TAG Memo ‘*Fourth dose update (second booster)*’.

Individuals in these groups with more severe conditions or multiple comorbidities should particularly consider an additional dose.

- c. Booking systems should allow for individuals to schedule their vaccination from 3 months after infection **without requiring a prescription**. This aligns with the original recommendation made on 10 February 2023 that additional doses “should be administered from 6 months after the previous dose of COVID-19 vaccine, and from 6

months after a SARS-CoV-2 infection, with flexibility for the dose to be given from 3 months after a SARS-CoV-2 infection”.

- d. Slight modifications be made to the previous memo in relation to pregnant people. Pregnant people aged 16 years and over should be **eligible** for additional doses. Pregnant people who additionally have further comorbidities putting them at risk of severe COVID-19, should particularly consider an additional dose. For pregnant people, **Comirnaty** (the Pfizer vaccine) is the **preferred vaccine**. Safety data in pregnancy are scarce for Nuvaxovid (the Novavax vaccine) and those pregnant people who are unable or do not wish to receive Pfizer Comirnaty should discuss with their healthcare provider if Nuvaxovid might be suitable for them.
- e. Māori and Pacific peoples aged 50 years and over should be **recommended** to receive an additional dose due to being at a similar risk of severe COVID-19 disease as 60-70 year olds in the “European and other” group (COVID-19 vaccine starts to be recommended to all individuals from 65 years, see [Appendix 4](#)). Māori and Pacific peoples over the age of 30 will be, as for all ethnicities, eligible for additional doses.

8. Recommendations for 16- to 29-year-olds are summarised in [Appendix 4](#), along with those for other age groups.

9. CV TAG will continue to monitor all relevant information and will update their recommendations as further evidence becomes available.

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Dr Ian Town
**Chief Science Advisor and
Chair of the COVID-19 Vaccine Technical Advisory Group**

In addition to the recommendations provided above, it is recommended that you:

1.	Note	The contents of this memo is an addendum to the prior CV TAG Memo 'Update on Intervals and Booster Eligibility: COVID-19 Vaccine Technical Advisory Group (CV TAG) recommendations' to provide clarification on further COVID-19 booster doses for 16- to 29-year-olds.	Noted ✓
2..	Agree	That this memo (version sent to you on 24 March 2023 by the Chief Science Advisor) will be assessed for proactive release three weeks after you sign, below. Release will not occur prior to government decision (and public announcement thereof) on the recommendations that CV TAG have provided in this memo. Prior to release, the memo will undergo processes undertaken for an Official Information Act release, <u>Ministers' Offices</u> will be informed, and the Director General's Office will be required to sign off on the final release.	Yes/No

↳ Ensure Minister is fully aware please!

Director General Comments:

Signature 

Date: 25/3/23

Dr Diana Safarti

Te Tumu Whakarae mō te Hauora

Director-General of Health

Appendix 1

Table 1 in CV TAG Memo issued on 10 February 2023 'Update on Intervals and Booster Eligibility: COVID-19 Vaccine Technical Advisory Group (CV TAG) recommendations:

Hospitalisation admission* rates for COVID-19 per 100, 000 of population in Q3 & Q4 2022* (Source: Intel & Analytics, MoH, 2023)

		Māori			Pacific			Asian			European / Other			Total	
Age	N	Rate; 95% CI		N	Rate; 95% CI	N	Rate; 95% CI	N	Rate; 95% CI	N	Rate; 95% CI	N	Rate; 95% CI		Rate; 95% CI
0–9	64	41.3; 32.4–52.8		36	58.7; 42.3–81.3	74	63.7; 50.7–80	136	48.7; 41.2–57.6	310	50.7; 45.3–56.6				
10–19	26	16.6; 11.3–24.4		18	25.7; 16.2–40.7	12	12.7; 7.2–22.4	80	22.6; 18.2–28.2	136	20.2; 17.1–23.9				
20–29	59	44; 34.1–56.8		38	50.1; 36.5–68.9	45	33.4; 25–44.8	154	40.1; 34.3–47	296	40.6; 36.3–45.5				
30–39	65	60.5; 47.5–77.2		49	80; 60.4–105.8	63	31.4; 24.5–40.2	202	48.9; 42.6–56.1	379	48.4; 43.8–53.6				
40–49	94	109; 89.1–133.4		63	129.3; 101–165.5	58	45.5; 35.1–58.8	221	55.8; 48.9–63.6	436	66.2; 60.3–72.7				
50–59	158	188.1; 160.9–219.8		99	235.7; 193.6–287	68	82.2; 64.8–104.3	464	100.7; 92–110.3	789	117.9; 109.9–126.4				
60–69	255	422.9; 374.2–478		111	401.7; 333.6–483.6	101	155.8; 128.2–189.4	910	213.5; 200.1–227.8	1377	237.8; 225.6–250.7				
70–79	204	773.3; 674.4–886.5		138	971.5; 822.8–1146.8	134	418.4; 353.3–495.4	1584	496; 472.2–521	2060	525.5; 503.4–548.7				
80–89	114	1476.5; 1230.3–1771.1		76	1649.3; 1319.2–2060.3	124	1080.1; 906.5–1286.6	1948	1262; 1207.5–1318.9	2262	1269.6; 1218.6–1322.6				
90+	14	1430; 848.7–2399.9		12	1863.4; 1061.2–3252	23	1393.9; 928–2088.9	746	1936.1; 1803.2–2078.5	795	1901.7; 1775.1–2037.1				
* Excluding hospital admissions lasting less than 6 hours															

Appendix 2

COVID-19 vaccine relevant eligibility criteria for free seasonal influenza vaccination

Funded influenza vaccine is available each year for people who meet the criteria set by PHARMAC. The relevant eligibility criteria for additional doses of COVID-19 vaccine (that is, those criteria that relate to health conditions, rather than age or employment) are for those who:

- have any of the following cardiovascular diseases:
 - ischaemic heart disease, or
 - congestive heart failure, or
 - rheumatic heart disease, or
 - congenital heart disease, or
 - cerebrovascular disease; or
- have either of the following chronic respiratory diseases:
 - asthma, if on a regular preventative therapy, or
 - other chronic respiratory disease with impaired lung function; or
- have diabetes; or
- have chronic renal disease; or
- have any cancer, excluding basal and squamous skin cancers if not invasive; or
- have any of the following other conditions:
 - autoimmune disease, or
 - immune suppression or immune deficiency, or
 - HIV, or
 - transplant recipient, or
 - neuromuscular or CNS disease/disorder, or
 - haemoglobinopathies, or
 - children on long-term aspirin, or
 - have a cochlear implant, or
 - errors of metabolism at risk of major metabolic decompensation, or
 - pre and post-splenectomy, or
 - Down syndrome, or
- are pregnant¹
- have any of the following serious mental health conditions:
 - schizophrenia, or
 - major depressive disorder, or
 - bipolar disorder, or
 - schizoaffective disorder, or
- are currently accessing secondary or tertiary mental health and addiction services.

Unless also meeting the previous criteria, the following conditions are excluded from funding:

- asthma not requiring regular preventative therapy
 - hypertension and/or dyslipidaemia without evidence of end-organ disease
-

¹ See specific CV TAG guidance for pregnant people in recommendations, above.

Appendix 3

Clinical criteria in support of eligibility for additional doses

People in these groups are likely to have an ongoing increased risk of severe COVID-19 even after primary vaccination. These examples are not exhaustive, and providers may include individuals with conditions similar to those listed below, based on clinical judgment.

Category	Examples
Immunocompromising conditions	People with HIV
Cancer	Non-haematological cancer including those diagnosed within the past 5 years or on chemotherapy, radiotherapy, immunotherapy or targeted anti-cancer therapy (active treatment or recently completed) or with advanced disease regardless of treatment. Survivors of childhood cancer.
Chronic inflammatory conditions requiring medical treatment with disease modifying anti-rheumatic drugs (DMARDs) or immune-suppressive or immunomodulatory therapies.	Systemic lupus erythematosus, rheumatoid arthritis, Crohn's disease, ulcerative colitis, and similar who are being treated.
Chronic lung disease	Chronic obstructive pulmonary disease, cystic fibrosis, interstitial lung disease and severe asthma (defined as requiring frequent hospital visits or the use of multiple medications).
Chronic liver disease	Cirrhosis, autoimmune hepatitis, non-alcoholic fatty liver disease, alcoholic liver disease.
Severe chronic kidney disease (stage 4 or 5)	
Chronic neurological disease	Stroke, neurodegenerative disease (e.g., dementia, motor neurone disease, Parkinson's disease), myasthenia gravis, multiple sclerosis, cerebral palsy, myopathies, paralytic syndromes, epilepsy.
Diabetes mellitus requiring medication	
Chronic cardiac disease	Ischaemic heart disease, valvular heart disease, congestive cardiac failure, cardiomyopathies, poorly controlled hypertension, pulmonary hypertension, complex congenital heart disease.
People with disability with significant or complex health needs or multiple comorbidities which increase the risk of poor outcomes from COVID-19	Particularly those with trisomy 21 (Down Syndrome) or complex multi-system disorders.
Severe obesity with BMI ≥ 40 kg/m ²	
Severe underweight with BMI < 16.5 kg/m ²	

Appendix 4

COVID-19 vaccine recommendations

Age Band		Primary Course	First Booster	Additional Doses
< 5 years	healthy			
	at risk ¹			
5 - 11 years	healthy			
	at risk ²			
12 - 15 years	healthy			
	at risk ³		Severely immunocompromised only	
16 - 17 years	healthy			
	at risk ⁴			
18 - 29 years	healthy			
	at risk ⁴			
30 - 49 years	healthy			
	at risk ⁴			
50 - 64 years	healthy			
	Māori & Pacific peoples at risk ⁴			
≥ 65 years	healthy			
	at risk			

recommended

eligible, i.e. individuals can consider

not eligible, i.e. not available in the programme but can be administered with prescription

¹ Severely immunocompromised, or complex and/or multiple health conditions increasing risk of severe disease from COVID-19 (following the Starship Child Health table of underlying comorbidities)

² Children with high-risk pre-existing conditions, Māori and Pacific children should be prioritised (for details see [CV TAG memo](#))

³ People with severe immunocompromised conditions

⁴ At-risk groups include those at high risk of severe COVID-19 **and/or** eligible for flu vaccine because of a health condition (see Appendix 1 and 2) or residents of an aged- or disability facility. For **16- to 29-year-olds**, at-risk groups are eligible rather than recommended to receive an additional dose. However, those in this age group with more severe conditions or multiple comorbidities should particularly consider an additional dose.

Note: All **pregnant people 16 years of age and over** are eligible for additional doses, however, those with comorbidities should particularly consider an additional dose.