

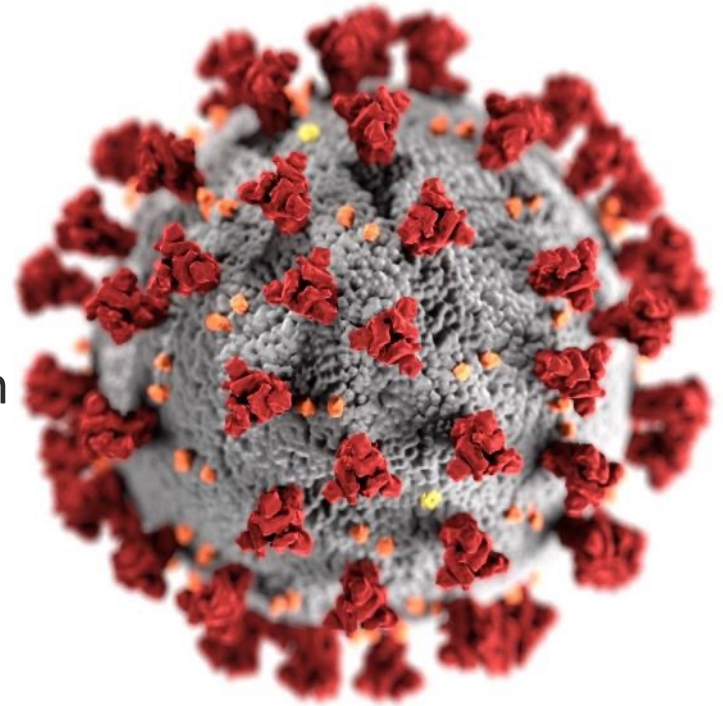
# New and Updated COVID-19 Public Health Information

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[cdc.gov/coronavirus](https://cdc.gov/coronavirus)

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# BinaxNOW™ COVID-19 Ag Card Product Expiration Update

- Abbott issued a letter to customers to inform them of an extended expiry date on BinaxNOW™ COVID-19 Ag Card, part number 195-000
- Abbott conducted testing on product stability and shared data with FDA
- All BinaxNOW COVID-19 Ag Cards now have a 12-month expiry date (previous expiry dates were 6 or 9 months)
- Letter contains lot numbers with original and new expiry dates



www.abbott.com

[https://www.health.nd.gov/sites/www/files/documents/Webpage%20Updates/COVID-19\\_BinaxNOW\\_Product\\_Expiry\\_Extension.pdf](https://www.health.nd.gov/sites/www/files/documents/Webpage%20Updates/COVID-19_BinaxNOW_Product_Expiry_Extension.pdf)

# FDA authorizes Pfizer-BioNTech COVID-19 Vaccine for Emergency Use (5/10/21)

- FDA expanded emergency use authorization (EUA) for Pfizer-BioNTech COVID-19 Vaccine to include adolescents 12 to 15 years of age
- Safety evaluated in 1,131 vaccine recipients vs 1,129 placebo recipients aged 12 to 15 years as part of a clinical trial
  - Common side effects included pain at injection site, tiredness, headache, chills, muscle pain, fever and joint pain; consistent with side effects seen in clinical trial participants aged  $\geq 16$  years
- Effectiveness was 100% (95% confidence interval [CI] = 75.3%–100%) in preventing symptomatic, laboratory-confirmed COVID-19 (0 COVID-19 cases among 1,005 recipients vs. 16 COVID-19 cases among 978 placebo recipients)
- Immune response in 190 vaccine recipients non-inferior when compared with clinical trial participants aged 16 to 25 years

<https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-authorizes-pfizer-biontech-covid-19-vaccine-emergency-use>



















## The Advisory Committee on Immunization Practices' Interim Recommendation for Use of Pfizer-BioNTech COVID-19 Vaccine in Adolescents Aged 12–15 Years — United States, May 2021

*Early Release / May 14, 2021 / 70*

- On May 12, 2021, the Advisory Committee on Immunization Practices (ACIP) made an interim recommendation for use of Pfizer-BioNTech COVID-19 vaccine in adolescents aged 12–15 years
- Evidence review on potential benefits and harms included clinical trial data on efficacy, immunogenicity, and safety
- ACIP determined that COVID-19 in adolescents is a major public health problem
  - growing proportion of new COVID-19 cases; cumulative hospitalization rate (as of May 1<sup>st</sup>) of 51.3 per 100,000; risk of multisystem inflammatory syndrome in children (MIS-C)
- Vaccination will be important to protect adolescents against symptomatic COVID-19 disease and to reduce community transmission of SARS-CoV-2

# Interim Public Health Recommendations for Fully Vaccinated People (5/13/21)

- Fully vaccinated people:
  - No longer need to wear a mask in any setting, except where required by laws or regulations, including business and workplace guidance
  - Can refrain from testing following exposure if asymptomatic (except for residents and employees of correctional or detention facilities and homeless shelters)
- Does not apply to healthcare settings or other settings where masks are still required

Unvaccinated people	Indoor	Fully vaccinated people
	Visit a barber or hair salon	
	Go to an uncrowded, indoor shopping center or museum	
	Attend a small, indoor gathering of fully vaccinated and unvaccinated people from multiple households	
	Go to an indoor movie theater	
	Attend a full-capacity worship service	
	Sing in an indoor chorus	
	Eat at an indoor restaurant or bar	
	Participate in an indoor, high intensity exercise class	

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated-guidance.html>

# CDC COVID-19 Data Tracker

- Updated Vaccination Demographic Trends tab displays vaccination progress by racial/ethnic group and age group in the United States
- Additional data on cases, deaths, testing, trends, genomic surveillance, etc. available on COVID-19 Data Tracker

<https://covid.cdc.gov/covid-data-tracker/#vaccination-demographics-trends>

COVID DATA TRACKER

## Percent of People Fully Vaccinated, by Race/Ethnicity

Data through 5/9/21

Available on COVID Data Tracker



JAN 2021

MAR 2021

MAY 2021

Find the latest data on  
CDC's COVID Data Tracker

December 14, 2020–May 9, 2021



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# COVID-19 Vaccine Breakthrough Cases

- Vaccine breakthrough = detection of SARS-CoV-2 RNA or antigen in a respiratory specimen collected from a person  $\geq 14$  days after they have received all recommended doses of an FDA-authorized COVID-19 vaccine
- CDC changing reporting of breakthrough cases for only people who were hospitalized or died (rather than all cases), starting May 14, 2021
- CDC working with state health departments to investigate patient characteristics, specific vaccine administered, and SARS-CoV-2 variants
- Some evidence that illness less severe in breakthrough infections

## CDC data as of 5/10/21

Fully vaccinated people	>115 million
Hospitalized or fatal vaccine breakthrough cases reported to CDC	1,359
Females	704 (52%)
People aged $\geq 65$ years	1,080 (79%)
Asymptomatic infections	282 (21%)
Hospitalizations*	1,136 (84%)
Deaths†	223 (16%)

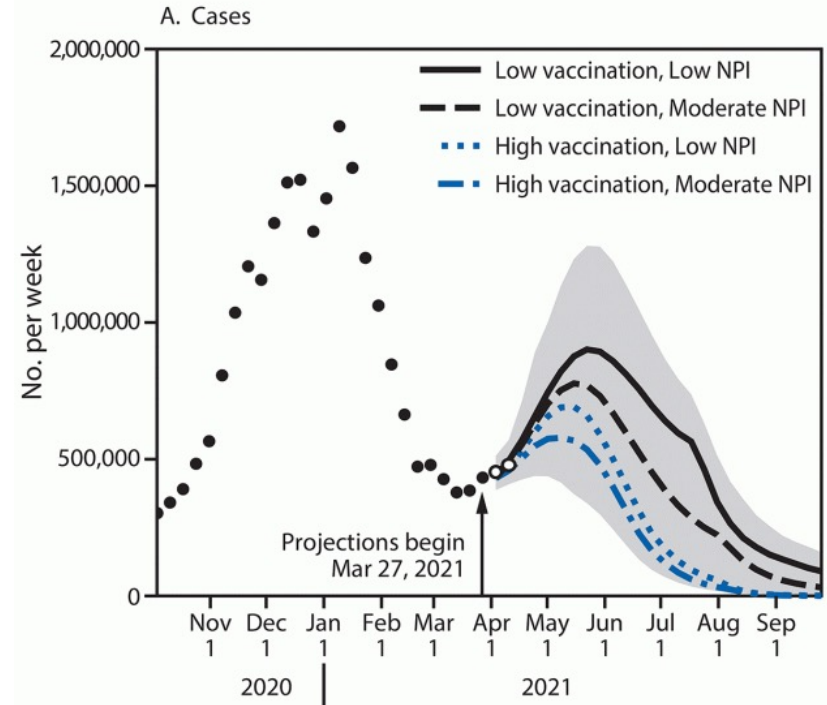
\*342 (30%) hospitalizations not related to COVID-19

†42 (18%) deaths not related to COVID-19



# MMWR: Modeling of Future COVID-19 Cases, Hospitalizations, and Deaths, by Vaccination Rates and Nonpharmaceutical Intervention Scenarios

- 6 modeling teams provided COVID-19 projections for 4 different scenarios
  - High or low vaccination
  - Moderate or low nonpharmaceutical interventions (NPI) use
  - Models combined into an ensemble
- Peak projected in May followed by a decline in July
- Ongoing efforts to increase vaccination coverage and avoiding crowds and poorly ventilated indoor areas are warranted

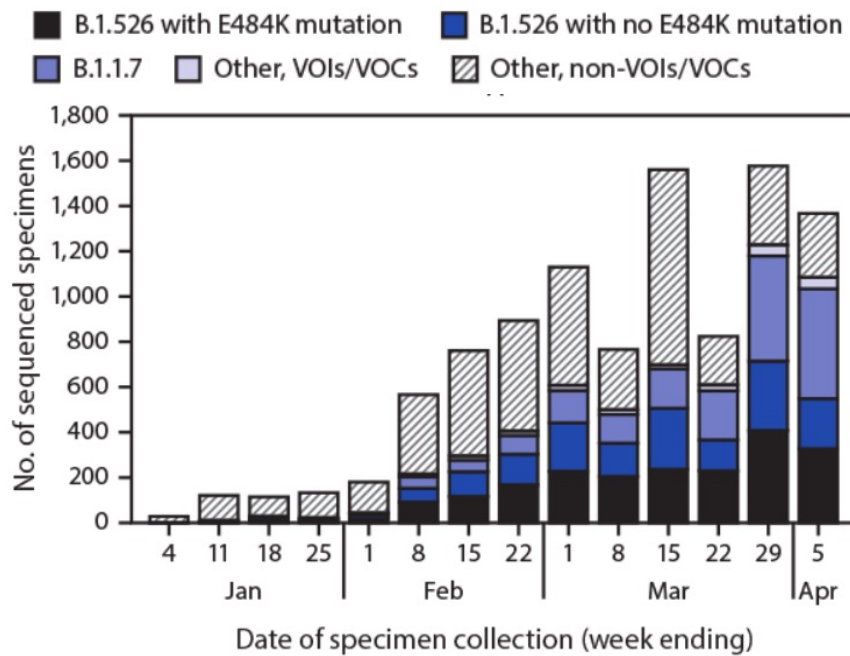


# MMWR: Identification of and Surveillance for the SARS-CoV-2 Variants B.1.427 and B.1.429 — Colorado, January–March 2021

- B.1.427 and B.1.429 SARS-CoV-2 variants first identified in California and designated variants of concern (VOCs)
- Colorado established 30-site statewide sentinel surveillance system, with each site submitting up to 30 specimens per week for SARS-CoV-2 sequencing at the state lab
- By March 31, 327 COVID-19 B.1.427/B.1.429 cases identified
  - Median 14.5 days from specimen collection to sequencing result
  - Enhanced interviews of 60 patients found 15% had traveled interstate and no international travel
  - Data from 211 patients found 91% symptomatic, 14% hospitalized, 2% died, suggesting increased severity
- Statewide surveillance improved variant detection and efforts to control spread, and provided data to guide Colorado clinicians and national clinical policy decisions

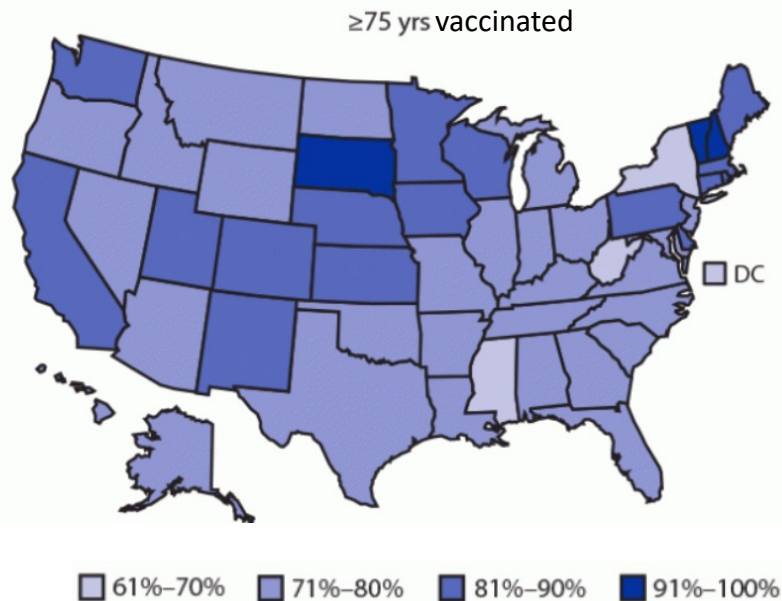
# MMWR: Rapid Emergence and Epidemiologic Characteristics of the SARS-CoV-2 B.1.526 Variant — New York City, Jan 1–Apr 5, 2021

- NYC examined emergence of B.1.526 (variant of interest; VOI) and B.1.1.7 (VOC)
- B.1.526 was not associated with increased severity, breakthrough infection, or reinfection
- Persons infected with B.1.1.7 were more likely to be hospitalized (5.8%) than persons with non-VOI/VOC infections (4.1%)
- 32 viruses from breakthrough cases sequenced
  - 8 (25%) B.1.526 with E484K mutation
  - 3 (9%) B.1.526 without E484K mutation
  - 7 (22%) B.1.1.7
  - 14 (44%) non-VOI/VOC



# MMWR: Demographic and Social Factors Associated with COVID-19 Vaccination Initiation Among Adults Aged $\geq 65$ Years — United States, Dec 14, 2020–Apr 10, 2021

- CDC uses vaccine administration and census data to identify disparities in COVID-19 vaccination among older adults
- By April 10, 2021, 79.1% of adults  $\geq 65$  years had received  $\geq 1$  dose of COVID-19 vaccine
  - 79.6% for men and 77.5% for women
- Counties with  $< 50\%$  vaccination initiation had higher percentages of older adults with social vulnerabilities
- Equitable access to COVID-19 vaccines, including assistance with scheduling, transportation, or facilitating vaccination at home is needed for older adults



# References

## Updates (additional references)

- <https://www.fda.gov/media/144412/download> (updated Pfizer-BioNTech COVID-19 Vaccine EUA Letter of Authorization)
- <https://www.fda.gov/media/144413/download> (updated Pfizer-BioNTech COVID-19 Vaccine fact sheet for providers)
- <https://www.cdc.gov/vaccines/acip/recs/grade/covid-19-pfizer-biontech-etr-12-15-years.html> (ACIP evidence for Pfizer COVID-19 vaccine recommendations)

## MMWRs

- Wallace M et al. The Advisory Committee on Immunization Practices' Interim Recommendation for Use of Pfizer-BioNTech COVID-19 Vaccine in Adolescents Aged 12–15 Years — United States, May 2021. MMWR Morb Mortal Wkly Rep. ePub: 14 May 2021. DOI: <http://dx.doi.org/10.15585/mmwr.mm7020e1>
- Borchering RK et al. Modeling of Future COVID-19 Cases, Hospitalizations, and Deaths, by Vaccination Rates and Nonpharmaceutical Intervention Scenarios — United States, April–September 2021. MMWR Morb Mortal Wkly Rep. ePub: 5 May 2021. DOI: <http://dx.doi.org/10.15585/mmwr.mm7019e3>
- Martin Webb L et al. Identification of and Surveillance for the SARS-CoV-2 Variants B.1.427 and B.1.429 — Colorado, January–March 2021. MMWR Morb Mortal Wkly Rep. ePub: 5 May 2021. DOI: <http://dx.doi.org/10.15585/mmwr.mm7019e2>
- Thompson CN et al. Rapid Emergence and Epidemiologic Characteristics of the SARS-CoV-2 B.1.526 Variant — New York City, New York, January 1–April 5, 2021. MMWR Morb Mortal Wkly Rep. ePub: 5 May 2021. DOI: <http://dx.doi.org/10.15585/mmwr.mm7019e1>
- Whiteman A, Wang A, McCain K, et al. Demographic and Social Factors Associated with COVID-19 Vaccination Initiation Among Adults Aged ≥65 Years — United States, December 14, 2020–April 10, 2021. MMWR Morb Mortal Wkly Rep. ePub: 11 May 2021. DOI: <http://dx.doi.org/10.15585/mmwr.mm7019e4>

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