



I Raise the Rates! September Edition

In this edition of I Raise the Rates (IRtR), you will find a variety of new resources from several public health partners, educational opportunities, and a brief selection of popular media articles related to immunization.

Updates from the American College of Physicians (ACP)

Opportunity to Participate in ACP Quality Improvement Initiative to Increase Adult Influenza Immunization Rates



[APPLY NOW](#) Opportunity to participate in ACP Quality Improvement Initiative to Increase Adult Influenza Immunization Rates. ACP is recruiting internal medicine and subspecialty practices and residency programs to participate in the *I Raise the Rates* quality improvement programs to increase influenza and adult immunization rates. [ACP's I Raise the Rates program](#), which is supported by funding from the CDC, Merck, and GSK, provides QI education and virtual coaching support from ACP Advance expert coaches to support increased adult immunization coverage.

The program also offers access to a virtual learning community, tailored educational offerings, and the opportunity to earn more than 54 CME and ABIM MOC credits for program participants. Onboarding is underway so act now!

Opportunity is limited, applicants will be considered on a first come, first served basis.

Please click the "Learn More" button below to view the recruitment flyer for more information about participation benefits and requirements as well as the application link.

[Learn More](#)

CDC Recommendations on COVID-19 Vaccine Boosters



Several groups in the U.S. are now eligible to receive a booster dose of the Pfizer-BioNTech COVID-19 vaccine at least six months after completing their initial two-dose series.

Learn more about the CDC's recommendations on COVID-19 vaccine boosters, and review new data on vaccine effectiveness by clicking the button below:

[Read More](#)

Frequently Asked Influenza (Flu) Questions: 2021 - 2022 Season



What's New for the 2021-2022 influenza (flu) season?

A few things are different for the 2021-2022 influenza (flu) season, including:

- The [composition of flu vaccines](#) has been updated.
- All flu vaccines will be quadrivalent (four-component), meaning designed to protect against four different flu viruses. For more information: [Quadrivalent Influenza Vaccine | CDC](#).
- Licensure on one flu vaccine has changed. Flucevax Quadrivalent is now approved for people 2 years and older.
- Flu vaccines and COVID-19 vaccines can be given at [the same time](#).
- More detailed guidance about the recommended timing of flu vaccination for some groups of people is available.
- Guidance concerning contraindications and precautions for the use of two flu vaccines – Flucevax Quadrivalent and Flublok Quadrivalent – were updated.

[Learn More](#)

CDC Flu Vaccination Campaign Social Media Toolkit



The CDC has launched the "[I Get It](#)" flu vaccination campaign encouraging everyone 6-months and older to get their annual flu vaccination and share a photo of themselves and others in their community getting a flu vaccine or showing off a bandage after getting the vaccine. This social media toolkit includes customizable graphic frames for you to add your picture, sample social media messages, and social media graphics to encourage members of your community to share why they get their flu vaccine with the hashtag **#IGetIt**.

[Access the Toolkit by Clicking Here](#)

Featured Articles and Resources

COVID-19 Vaccination: CDC Urges Pregnant Women to Get Vaccinated



On September 29th, the CDC issued an urgent health advisory to increase COVID-19 vaccination among people who are pregnant, recently pregnant (including those who are lactating), who are trying to become pregnant now, or who might become pregnant in the future to

prevent serious illness, deaths, and adverse pregnancy outcomes.

The CDC health advisory [strongly recommends COVID-19 vaccination](#) before or during pregnancy because the benefits of vaccination for both pregnant persons and their fetus or infant outweigh known or potential risks. Additionally, the advisory calls on health departments and clinicians to educate pregnant people on the benefits of vaccination and the safety of recommended vaccines.

[Read the Full Health Advisory Here](#)

As Safety Data on HPV Vaccine Improves, Why Is Parental Hesitancy Going Up?

From 2015 to 2018, the proportion of parents who cited safety concerns as their primary reason not to initiate the HPV vaccine grew from 13% to 23% ($P < 0.001$), representing a 79.9% increase, reported researchers led by Kalyani Sonawane, Ph.D., of the University of Texas Health Science Center School of Public Health in Houston.



Medscape

Source: Greg Coleman via KHN

Yet over that time, adverse events reported to the Vaccine Adverse Event Reporting System (VAERS) decreased from 44 to 29 per every 100,000 doses distributed ($P < 0.001$). And there were no changes in serious reporting rates for events that led to either hospitalization or disability, a life-threatening condition, or death.

"These findings suggest an urgent need to combat the rising sentiment of safety concerns among caregivers to increase HPV vaccine confidence," wrote Sonawane and colleagues.

[Read More](#)

Pfizer Tests First mRNA Flu Shot In Patients



Pfizer [announced](#) Monday that it had begun a clinical trial to test a flu vaccine based on the same mRNA technology behind its Covid-19 vaccine, the latest step as companies race to build on pandemic successes and build quicker, more effective vaccines.

The need to update flu vaccines to match circulating strains on an annual basis, as well as an onerous and time-consuming production process (the virus is usually grown in chicken eggs or mammalian cells), make the shots ideal candidates for replacement with mRNA technology. While most vaccines trigger an immune response by introducing part of a disease-causing organism, mRNA vaccines introduce genetic material that allows the body to make a safe part of the organism that the body is trained to respond to. This enables easy editing and more flexible production, ideal for a set of viruses like influenza that frequently change.

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Live Shingles Vaccine Shows Safe, Short-Term Efficacy for Persons Taking TNFis for Inflammatory Diseases



A randomized controlled trial found that the live shingles, or varicella-zoster, vaccine was safe and showed short-term efficacy for participants also taking tumor necrosis factor inhibitors (TNFis) for a broad range of inflammatory disorders. These findings suggest that a live virus vaccine in immunosuppressed patients receiving biologic therapies may be a

reasonable option, especially for the zoster vaccine, if no alternative vaccine is available. The findings are published in *Annals of Internal Medicine*.

TNFis are increasingly used in the United States and worldwide to treat a range of chronic autoimmune and inflammatory diseases, including rheumatoid arthritis, psoriasis, and inflammatory bowel diseases, but their use may result in immunosuppression. Compared with the general population, patients with these conditions are at higher risk for varicella-zoster virus reactivation, or shingles, due to their underlying disease states and commonly used immunosuppressive treatments, such as glucocorticoids. The safety and effectiveness of live virus vaccines largely are unknown in this patient population.

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