## **FALL 2023 VACCINES**

WHAT are the options?

**WHO** is eligible?

HOW well do they work?

WHEN should I get it?



A shot that targets 4 strains of seasonal flu.

6 months and older

Typically reduces the risk of going to the doctor by 40-60%.

October is ideal, as vaccine protection wanes over a season.



Updated vaccine formula targeting XBB—an Omicron subvariant.

Options: Moderna and Pfizer (mRNA) and Novavax (protein) **TBD** 

CDC will decide in mid-to-late September. Last year, the fall COVID-19 vaccine provided 40-60% additional effectiveness against severe disease.

For protection against severe disease, get it anytime.

For protection against **infection**, It's best to get it right before a wave, which can be challenging to time.



Options: GSK and Pfizer

They are slightly different in design, but only at a microscopic level.

60 years and older

82-86% efficacy against severe disease.

Protection is durable. Get when it's available; no need to juggle timing.



Pfizer is actively seeking approval.

Pregnant people

(Protection will pass to baby for protection in first 6 months of life.)

82% efficacy in preventing hospitalization in first 3 months

of life.

69% efficacy after 6 months.

It's not available yet, but once approved, get at 24 to 36 weeks of pregnancy.



A new monoclonal antibody by AstraZeneca.

This is not a vaccine (doesn't teach the body to make antibodies) but rather a proactive medication (provides antibodies).

All infants

High-risk infants 8-19 months Reduces risk of hospitalization and healthcare visits by ~80%.

Will be available soon.

Protection lasts 4-6 months.

By: Katelyn Jetelina, MPH PHD and Caitlin Rivers, MPH PHD.

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	WHAT are the options?	<b>WHO</b> is eligible?	HOW well do they work?	WHEN should I get it?
INFLUENZA	A shot that targets 4 strains of seasonal flu.	6 months and older	Typically reduces the risk of going to the doctor by 40-60%.	October is ideal, as vaccine protection wanes over a season.
COVID-19	Updated vaccine formula targeting XBB—an Omicron subvariant. Options: Moderna, Pfizer (mRNA) and Novavax (protein)	TBD  CDC will decide in mid-to-late September.	Last year, the fall COVID-19 vaccine provided 40-60% additional effectiveness against severe disease.	For protection against severe disease, get it anytime.  For protection against infection, It's best to get it right before a wave, which can be challenging to time.
RSV (OLDER ADULTS)	Options: GSK and Pfizer They are slightly different in design, but only at a microscopic level.	60 years and older	82-86% efficacy against severe disease.	Protection is durable. Get when it's available; no need to juggle timing.
RSV (PREGNANCY)	Pfizer is actively seeking approval.	Pregnant people  (Protection will pass to baby for protection in first 6 months of life.)	82% efficacy in preventing hospitalization in first 3 months of life. 69% efficacy after 6 months.	It's not available ye,t but once approved, get at 24 to 36 weeks of pregnancy.
RSV	A new monoclonal antibody by AstraZeneca.  This is not a vaccine (doesn't teach the body to make antibodies) but rather a proactive medication (provides antibodies).	All infants <8 months High-risk infants 8-19 months	Reduces risk of hospitalization and healthcare visits by ~80%.	Will be available soon. Protection lasts 4-6 months.

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