ATAGI Winter Dose Q & A

• Why is it not deemed necessary for all Australians to get a fourth dose if there are adequate doses available?

The primary goal of the Australian COVID-19 vaccine program is to minimise the risk of severe disease, including hospitalisation and death, from COVID-19, and the winter dose has been introduced to provide additional protection to those with the highest risk factors for severe disease.

Evidence shows that while protection against infection wanes after the first booster dose, protection against severe disease (rather than all infection) is well maintained, especially in young healthy people. Further, there is insufficient evidence of benefits beyond a single booster dose in preventing transmission to warrant recommending an additional dose in the general population. Widespread additional dose vaccination of the general population would, therefore, not be expected to materially impact on the current community transmission of COVID-19 at this time.

Everyone in Australia is encouraged to be up-to-date with their COVID-19 vaccinations as recommended for their age and personal circumstances, this may require getting a booster for those aged 16+, or for others having a second booster – or "winter dose".

ATAGI is continuously reviewing data on the use of COVID-19 boosters and the epidemiology in Australia and may recommend additional vaccination for other groups in the future. For example, if a new vaccine did demonstrate significant and lasting protection against transmission, this could result in a recommendation for a further population-wide dose

• Healthcare workers (HCW) have been calling for them to provided with access to 4th doses, given the current transmission rate and HCW absences due to to COVID-19

As outlined above, the winter dose is targeted towards preventing severe disease from COVID-19 and does not appear to have a significant or lasting effect on reducing virus transmission. Widespread administration would be unlikely to substantially impact on infection rates and absences amongst HCW. Fit, younger HCW remain very well protected from severe disease with 3 doses and should be strongly encouraged to have their first booster dose if they have not already done so.

• Winter is widely seen to pose some increased level of threat from the virus, would it not be sensible to take extra precautions and just get everyone vaccinated?

There is little evidence to suggest that COVID-19 demonstrates a specific seasonal threat in Australia. As outlined in ATAGI's previous <u>statement on recommendations on a winter booster dose</u> of COVID-19 vaccine, an additional booster is likely to provide only modest and transient protection against infection with the Omicron variant and onward transmission – its main benefit is in reducing severe disease. As such, it is recommended for those most at risk whereas the rest of the population – if they are up to date with their vaccinations – remain relatively well protected against severe disease.

Winter also coincides with influenza season in Australia. ATAGI recommends everyone in Australia over the age of 6 months should receive an influenza vaccination. Influenza vaccinations can be given at the same time as COVID-19 vaccines and should not be delayed if someone is up to date with their COVID-19 vaccines.

• If ATAGI made a further change to its advice would there be enough vaccines to vaccinate the general population with a further booster?

Yes, Australia has more than enough vaccine supply on hand and into the future to meet any additional recommendations made by ATAGI in respect of expanding eligibility for the winter booster program, including should such a recommendation favour another whole of population booster.

• Is there a further decision point on when ATAGI might consider the need for new advice on boosters for other Australians not now covered under this advice? If yes, what is that timeline?

There is no fixed timeframe for ATAGI to update their advice regarding boosters – their advice is constantly under review. Recommendations by ATAGI, as has been the case throughout the pandemic response, continue to be guided by the best available evidence and considered review by expert ATAGI members.

• Does this decision mean that boosters are a thing of the past?

No – boosters continue to play an important role in protecting everyone in Australia against the impacts of COVID-19. All Australians are recommended to stay up-to-date with their COVID-19 vaccination schedule according to their age and personal circumstance.

• If boosters aren't likely to be rolled out generally, do people just have to resign themselves to catching covid at some point?

No. Whether an individual acquires a COVID-19 infection will depend on many variables. Not all people exposed to the virus will develop infection. Vaccination (particularly the first three doses) will offer some protection against infection, but the most significant and lasting benefit of vaccination is providing protection against severe disease (and hospitalisation) from COVID-19. People can continue to practice COVID safe behaviours to reduce their risk of becoming infected with COVID-19.

• Rates of booster uptake from the third dose, both generally in the population but also in these specific cohorts.

Booster coverage in Australia across the eligible population is high – with 70% of the currently eligible population aged 16 and over having taken up the option of a booster so far. This coverage is significantly higher among those most at risk from COVID-19. Of those Australians aged 50 and over, 84% of those eligible for a booster have received one, with that number rising to over 90% for those aged 70 and over. Hundreds of thousands of Australians who are eligible for a booster but have not yet had one may be delaying because they have had COVID-19 within the last 3 months.– (it is recommended to wait three months after having COVID-19 before having a booster).

The most important action in the vaccination program remains, however, to encourage booster uptake in those currently eligible, who have not yet had one.

• Rates of winter dose (usually 4th dose) uptake

Almost 50% of those people aged 65 and over, initially recommended to receive a winter dose, have taken up that offer (noting that others in the recommended population groups may not yet be eligible depending on timing of their previous booster or whether they have had a recent COVID infection).

Everyone in Australia who is eligible for a booster or a winter dose are recommended to come forward once they are eligible. People can book their COVID-19 vaccination using the <u>Vaccine Clinic Finder</u>.