



June 17, 2024

Since its founding 125 years ago, the National Consumers League (NCL) has advocated for the enactment and implementation of meaningful government regulations and programs that benefit and improve the lives of American consumers. Of particular relevance to the work of the Centers for Disease Control (CDC) and the Advisory Committee on Immunization Practices (ACIP), is NCL's history of carrying on the effort begun by our founder, Florence Kelly, who championed vaccines and worked to increase public access to and confidence in immunizations and other forms of medical preventive health measures. It is in fulfilling that aspect of our commitment to the public that we offer these comments.

Last year, the COVID vaccine was not yet available when public health agencies, pharmacies, and other vested stakeholders began active campaigns urging people to get the flu vaccine. That outreach had reasonably good success, as shown via a December 2023 Gallup survey<sup>1</sup>. This survey found that 47% of Americans had already received their flu vaccine, and when adding in those who were planning on getting the vaccine, the number jumps to nearly two-thirds. However, in sharp contrast, only 29% reported receiving the new COVID 19 shot! Even when taking into account those who reported that they planned on getting the updated COVID vaccine, the Gallup survey found that just over half of Americans were not planning on receiving the updated vaccine. Consequently, over 70% of the population is now potentially vulnerable as we approach the fall and winter season, the seasons in which we have seen COVID spikes in previous years.

While many factors no doubt contributed to the significant disparity in public response to the two vaccines, a simple fact is that the COVID vaccine was not available at the time our attention was being heavily directed toward

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<sup>1</sup> <https://news.gallup.com/poll//547625/new-covid-shot-uptake-lagging-behind-annual-flu-shot-rates.aspx>

protection options for the anticipated fall respiratory season by getting our flu shot. Many people went dutifully to their doctor, pharmacy, or local clinic to receive a flu shot and felt protected for the season. Certainly, not having the option of getting their COVID vaccination took a toll, impacting the number of people who might otherwise have chosen to do so. Consumers could not “double up” when receiving their flu shot by getting the COVID vaccine at the same time. Many individuals instead faced inconvenience by having to schedule a separate doctor appointment or clinic visit in order to receive another vaccination. Add to that the significantly limited outreach to the public regarding availability and importance of the new COVID vaccine, as well as the ever-present continuation of vaccine fatigue and misinformation, then the catalysts behind the differing numbers becomes clear. It is important to address each of these reasons in order to increase uptake. This ACIP meeting has the ability to address one of the factors.

Therefore, we urge ACIP to do all within its power to make certain that both flu and the COVID vaccines, which are so essential to public health, are made available simultaneously this fall, thus removing one significant obstacle to vaccine uptake and decreasing the impact of COVID this season.

NCL would also like to ask that current recommendations for the new RSV vaccine be reviewed. Many adults were not familiar with the term Respiratory Cyclic Virus/RSV when these new vaccinations became approved and available to the public. Though RSV annually takes a heavy toll on children, older adults and those with compromised immune systems, most of those who did know about it only recognized the impact for children. Since the approval of the vaccine, general awareness of RSV’s danger has increased, yet many adults who are at risk are still learning. Those at the most risk may yet be unaware of the importance of getting vaccinated. We believe that the Shared Clinical Decision Making (SCDM) requirement for RSV vaccinations for older adults presents a barrier to access for a population that truly can benefit from receiving this immunization. We are aware that there has been discussion at ACIP about removing this requirement for the cohort over 75 but NCL is advocating for removing the SCDM requirement for adults over age 60 so as to include a population who, by virtue of the age-related decline in their immune systems, are more at risk.

NCL appreciates the opportunity to share our thoughts and concerns on these issues. NCL also appreciates the excellent work ACIP does in helping to protect the health of our nation's children and adults.