

A3VTF Quarterly Meeting Minutes

October 30, 2023

Hosted by Merck

WebEx Conference

Moderator:

Leanne Alexander, MPH, BSN, RN, Associate Director Vaccine Policy & Government Relations, Merck

- Welcome:
 - Joshlynn Edwards, MPH, ADPH, Immunization Division

- CHW Train the Trainer on the ABC's of Childhood Vaccinations:
 - Carolyn Bern, MPA, Director of Governmental Affairs & Community Relations, ADPH
 - Linda Lee, APR, Executive Director, AL Chapter- AAP

- HPV Vaccination Data in Alabama:
 - Casey Daniel, PhD, MPH, Director of Epidemiology & Public Health, USA College of Medicine, Associate Professor of Family Medicine, USA Health Mitchell Cancer Institute

- CDC's Bridge Access Program:
 - Lamont Dupree, Associate Director, North Alabama AHEC Program

- Cell-Based Influenza Vaccine Overview:
 - Brandon F. Young, PhD, Medical Science Liaison, Mid-Atlantic Region, CSL Seqirus

- Next Steps/Adjourn:
 - Joshlynn Edwards, MPH, ADPH, Immunization Division

Alabama Adolescent and Adult Vaccination Task Force (A3VTF)

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Meeting Participants*

Present:

Leanne Alexander, Merck Vaccine Policy
Krista Bailey, BCBS
Daniel Bankson, Alabama Medicaid
Robin Bartlett, University of Alabama Capstone College of Nursing
Carolyn Bern, ADPH, Governmental Affairs and Community Relations
Richard Beverly, BCBS
Lilanta Bradley, University of Alabama
Tanita Crowell, ADPH, Immunization Division
Dr. Casey Daniel, University of South Alabama College of Medicine
Anitra Daniels, ADPH, Immunization Division
Angela Davis, AMC
Greg Dotson, CSL Seqirus
Lamont Dupree, North AL AHEC
Joshlynn Edwards, ADPH, Immunization Division
Betsy Fenter, Vax 2 Stop Cancer
Tonya Gandy, ADPH
Emily Gardner, Vax 2 Stop Cancer
Barbara Gibbs, MCHD
Jenny Gilmore, proxy for Kelly Warren
Kimberly Graham, Alabama Medicaid Agency
Lakita Hawes, ADPH, Cancer Division
Jaida Lane, ADPH, Immunization Division
Alyssa Lee, University of South Alabama
Linda Lee, Alabama Chapter-American Academy of Pediatrics
Karen Leeling, North AL AHEC
Kelli Littlejohn, AMA
Dan McConaghy, Alabama Pharmacy Association
Amy Morris, ADPH, FHS
Patrick Neither, Merck
Jerome Pinson, CSL Seqirus
Bakeba Raines, Alabama Medicaid
Savannah Robinson, ADPH, Immunization Division
Barbara Schuler, VAX 2 STOP CANCER
Allison Souders, Alabama Pharmacy Cooperative Inc. (APCI)
Dr. Wes Stubblefield, ADPH, District Medical Officer

Tina Tarsitano
Stephanie Thomas, ADPH, Immunization Division
Chevonne Tyner, ADPH, Immunization Division
Heather Vega, Alabama Medicaid
Jean Wakerle, Alabama Medicaid
Kassi Webster, BCBS
Michael Williams, Alabama Medicaid Agency
Nancy Wright, ADPH
Dr. Brandon Young, CSL Seqirus
Dr. Jennifer Young-Pierce, USA Mitchell Cancer Institute

**Note: If you attended the meeting and your name/organization isn't listed above, please submit an email to Joshlynn.Edwards@adph.state.al.us confirming your attendance.*

Meeting Minutes

Introductions:

- The meeting was called to order at 10:00 am by Joshlynn Edwards, ADPH, Immunization Division. Ms. Edwards welcomed everyone in attendance, called roll, and introduced the meeting's moderator Leanne Alexander, MPH, BSN, RN, Associate Director Vaccine Policy & Government Relations, Merck. Ms. Alexander introduced the following speakers:
 - Carolyn Bern, MPA, Director of Governmental Affairs & Community Relations, ADPH
 - Linda Lee, APR, Executive Director, AL Chapter- AAP
 - CHW Train the Trainer on the ABC's of Childhood Vaccinations
 - Casey Daniel, PhD, MPH, Director of Epidemiology & Public Health, USA College of Medicine, Associate Professor of Family Medicine, USA Health Mitchell Cancer Institute
 - HPV Vaccination Data in Alabama
 - Lamont Dupree, Associate Director, North Alabama AHEC Program
 - CDC's Bridge Access Program
 - Brandon F. Young, PhD, Medical Science Liaison, Mid-Atlantic Region, CSL Seqirus
 - Cell-Based Influenza Vaccine Overview

CHW Train the Trainer on the ABC's of Childhood Vaccinations:

- Carolyn Bern, MPA, Director of Governmental Affairs & Community Relations, ADPH and Linda Lee, APR, Executive Director, AL Chapter- AAP discussed the following:
 - Grant to support CHWs across the state:
 - Will create statewide training plan for CHWs to talk about childhood vaccines
 - Will use trusted messengers (grandparents) to go into communities
 - Will target different cultural areas- disability, Native American, Black Belt of Alabama, Hispanic, etc.
 - CHW will be paired with a pediatrician
 - Will cover 8 cities in the state (one in each public health district)
 - Expected to run from spring to summer 2024
 - Funding will cover travel and provide a stipend for CHW and pediatrician
 - Curriculum will be developed after trainings are complete
 - Currently awaiting funding approval

HPV Vaccination Data in Alabama:

- Casey Daniel, PhD, MPH, Director of Epidemiology & Public Health, USA College of Medicine, Associate Professor of Family Medicine, USA Health Mitchell Cancer Institute discussed the following:
 - Change in vaccine rates ages 11-15 from 2020-2023
 - 2020-2022- dip in uptake/usage
 - 2023- somewhat bounced back except for meningitis
 - HPV uptake for ages 11-15
 - 2020-2022- down 6%
 - 2022-23- up 2.2 %
 - Net change- -3.8%
 - HPV completion for ages 11-15
 - 2020-2022- down 6%
 - 2022-2023- up 2.6%
 - Net change- -3.4%
 - Comparing available data
 - Alabama ImmPRINT (ages 11-15) vs. NIS-Teen Data (ages 13-17), 2020
 - Tdap- 4.5% difference
 - Meningitis- 18.6% difference
 - HPV uptake- 16.4% difference
 - HPV completion- 22.9% difference
 - Alabama ImmPRINT (ages 11-15) NIS-Teen Data (ages 13-17), 2022
 - Tdap- 28.45% difference
 - Meningitis- 30.1% difference
 - HPV uptake- 31.8% difference
 - HPV completion- 35.2% difference

- Possible reasons for discrepancies
 - Age difference
 - Under reporting
- Map of vaccine rates by county ages 11-15 and 9-13, 2022:
 - HPV uptake
 - HPV completion
 - Tdap UTD
 - MCV UTD
- HPV uptake by county ages 11-15, 2020
 - Lowest- Winston, Russell, Fayette, Cleburne
 - Highest- Dallas, Bullock, Tallapoosa, Coosa
- HPV completion by county ages 11-15, 2022
 - Lowest- Clarke, Winston, Marion, Lamar
 - Highest- Bullock, Tallapoosa, Coosa, Barbour
- HPV uptake by county ages 9-13, 2020
 - Lowest- Winston, Russell, Fayette, Cleburne
 - Highest- Dallas, Bullock, Tallapoosa, Perry
- HPV completion by county ages 9-13, 2022
 - Lowest- Clarke, Winston, Franklin, Greene
 - Highest- Bullock, Tallapoosa, Coosa, Barbour
- Use data to:
 - Look at vaccine rates in the state
 - Closely examine counties/regions within the state
 - Look at hot spots of HPV- associated cancers
 - Examine VFC provider access, uptake, etc.
 - Map providers, current access points and potential access points to see possible opportunities to increase vaccine

CDC's Bridge Access Program:

- Lamont Dupree, Associate Director, North Alabama AHEC Program discussed the following:
 - Bridge Access Program:
 - Created to provide a “bridge” for uninsured or underinsured individuals to access new COVID vaccine at no cost
 - All COVID vaccines are covered under program
 - For individuals 18 and older
 - Organizations can register on vaccine.org
 - Expires December 31, 2024

Cell-Based Influenza Vaccine Overview:

- Brandon F. Young, PhD, Medical Science Liaison, Mid-Atlantic Region, CSL Seqirus discussed the following:
 - Influenza Vaccine Production- Egg-based process:

- Strain selection and reassortant development
- Seed strain evaluation
- Propagation of vaccine strain
- Processing of vaccine
- Formulation
- 6 months for vaccine delivery
- Influenza Vaccine Production-Egg-based manufacturing challenges:
 - Egg acquisition requires long lead time
 - Not all strains grow well in eggs
 - Embryonated egg supply may be impacted by avian influenza outbreaks
 - Mutations may occur during propagation of flu viruses in eggs
- Cell-based vs. Egg-based manufacturing:
 - Isolation of circulating viruses
 - Cell-based- isolation and analysis of circulating flu viruses
 - Egg-based- seasonal FDA reference strains selected
 - Creation of seed strains
 - Cell-based- reference strains grown in cells, CVVs produced and standardized for manufacturing, does not go through eggs
 - Egg-based- reference strains passed through eggs, CVVs produced and standardized for manufacturing
 - Propagation of vaccine strains
 - Cell-based-propagation of cells to optimum density, inoculation with live virus in a closed system; live virus harvested in serum-free medium
 - Egg-based- embryonated chicken eggs inoculated with live virus, propagation and harvest of live virus
 - Inactivation and purification of virus
 - Cell-based- inactivation of live virus and purification
 - Egg-based- H and N proteins purified to create surface antigen vaccine
 - Formulation and filling
 - Both- strains mixed and packaged under sterile conditions to create multivalent vaccine
- Rationale for Cell-based:
 - Production does not depend on having a large supply of eggs
 - Production can be readily increased to meet unexpected changes in demand
 - Production within closed-system bioreactors reduces the risk of contamination
 - Antibiotics and preservatives are not used in the production process

Next Steps/Adjourn:

- The meeting was adjourned by Ms. Edwards at 11:30 am. The next meeting was scheduled for January 23, 2024.