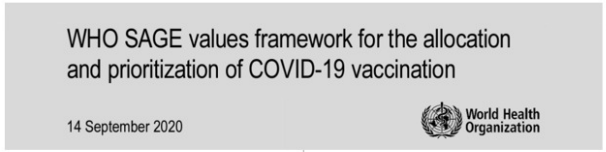
Why propose an Optimization Roadmap?

Current state

Step 1
A values framework



Step 2
Roadmap for prioritizing uses of COVID-19 vaccines (Prioritization Roadmap).

Step 3
Vaccine-specific (interim) recommendations

+ cross-product interim statements & good practice guidance

Interim statement on dose-sparing strategies for COVID-19 vaccines (fractionated vaccine doses)

Interim statement on heterologous priming for COVID-19 vaccines

Interim recommendations for an extended primary series with an additional vaccine dose for COVID-19 vaccination in immunocompromised persons

Interim guidance, 26 October 2021

Interim statement on COVID-19 vaccination for children and adolescents

Interim statement on booster doses for COVID-19 vaccination

Update 4 October 2021

What's changed

- ***Prioritization*** based on limited vaccine supply (due to manufacturing capacity and global access constraints) ⟶

  Optimization to be based on **vaccine access and coverage equity**
  - includes vaccine and vaccination supplies, absorptive capacity, acceptance, and other potential barriers to immunization

- **Vaccine *supply* scenarios** (e.g., 10-20-50%) ⟶

  Vaccine *coverage* targets (e.g., 10-40-70%)

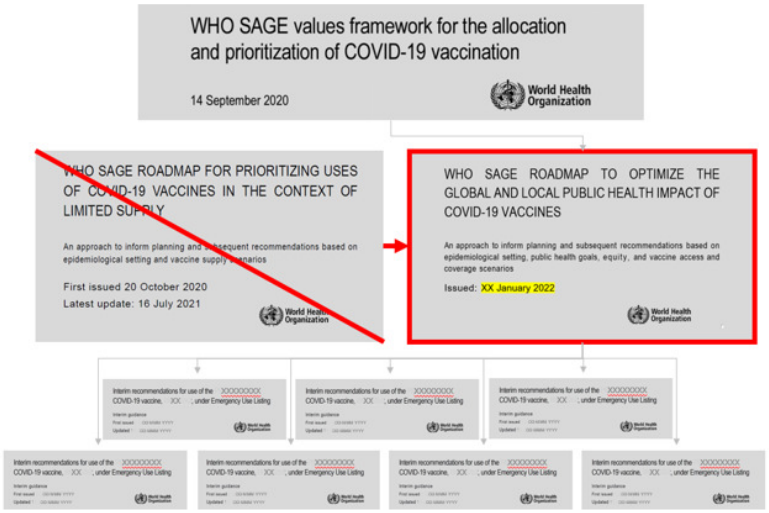
- ***Primary vaccine series*** for ***high-risk*** **priority-use groups** ⟶

  To achieve a range of ***public health*** *and* ***societal goals***, considerations of 1) ***lower risk groups*** (e.g., primary series in adolescents and children); and 2) ***booster doses***

Context for proposed Optimization Roadmap:

Values- and evidence-based approach to optimizing global and local COVID-19 vaccine impact

Updated state

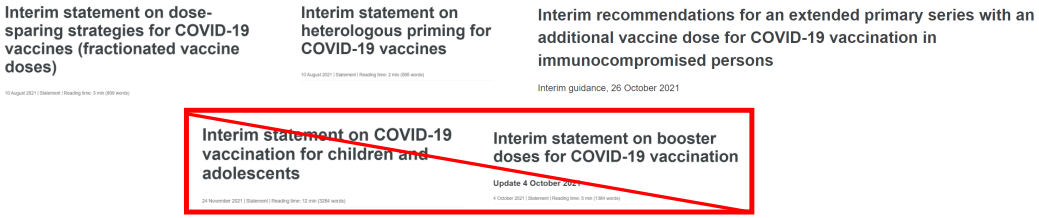


unchanged

updated context & considerations

to follow new roadmap

+ cross-product interim statements & good practice guidance



New roadmap context

- Global, regional, and national decisions on ***optimization*** of vaccine use should be based on:
  - **evidence** of **public health benefit** *AND*
  - **obligations** to secure **global and local equity** in vaccine **access and coverage**
- Global and local policies on ***booster dose use*** and vaccination of ***lower risk subgroups*** should consider the **continuing inequities** in global and local vaccine **access and coverage**
- Although data are only available for **some vaccines,** *emerging* evidence over a period of **~6 months** after primary series vaccination indicates that, to date, **initial vaccine effectiveness declined**:
  - **moderately** against **infection** and **symptomatic disease**
  - **minimally** against **severe disease**

Proposed Optimization Roadmap: *Key considerations*

Vaccination programmes should ensure **fair access** to a **sufficient level of protective immunity** against **severe disease and death**, while **minimizing risks**.

Higher priority-use groups should be offered ***primary series doses*** **first**, before offering COVID-19 vaccine doses to **lower priority-use groups**, **unless** there is adequate justification to do otherwise, which may include:

- significant **vaccine delivery** or **acceptability obstacles** in **higher priority-use groups** that would result in **vaccine wastage**

In such cases, efforts to **overcome access barriers** to reach **higher priority-use groups** should be **prioritized**.

Lower priority-use groups should be offered ***primary series doses*** **first**, before offering ***booster doses*** to **higher priority-use groups**, **unless** there is adequate justification to do otherwise, which may include:

- **sufficient evidence** that such a policy will **optimize use** of vaccine doses to **minimize severe disease and death** (use case 1)
- a **pressing need** to deploy booster doses to **health workers** to **curtail the impact** of COVID-19 on **health systems** (use case 2)

In addition to evidence to recommendation domains, policy **decisions to implement *primary series vaccination*** of **lower risk subgroups** (e.g., young adults, adolescents and children) and ***booster doses*** in **high-risk priority-use groups** should consider:

- **epidemiologic setting** (transmission pattern, seroprevalence, variants of concern)
- **time** since completion of primary vaccination series
- vaccine **access and coverage**
- **specific vaccine** product*

*(although all WHO Emergency Use Listed vaccines have a favorable benefit-harm profile, vaccine products differ in their safety and efficacy profiles for all or for some subgroups; therefore, the specific vaccine used in the primary series should be considered in determining if and when a booster dose is offered to a subgroup)