



SUMMARY OF NATIONAL ADVISORY COMMITTEE ON IMMUNIZATION (NACI) STATEMENT OF DECEMBER 9, 2022

Updated recommendations on the use of COVID-19 vaccine booster doses in children 5 to 11 years of age and concurrent vaccine administration



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PARTNERSHIP, INNOVATION AND ACTION IN PUBLIC HEALTH.**

— Public Health Agency of Canada

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Résumé de la déclaration du Comité consultatif national de l'immunisation (CCNI) du 9 décembre 2022 : Recommandations mises à jour sur l'utilisation des doses de rappel du vaccin contre la COVID-19 chez les enfants de 5 à 11 ans et l'administration concomitante de vaccins

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OVERVIEW

- On December 9, 2022, Health Canada authorized the Pfizer-BioNTech Comirnaty BA.4/5 Bivalent (10 mcg) COVID-19 vaccine as a booster dose in children 5 to 11 years of age. This is the only bivalent COVID-19 vaccine authorized for this age group at this time.
- On December 9, 2022, the Public Health Agency of Canada (PHAC) released updated recommendations from the National Advisory Committee on Immunization (NACI) on the use of a COVID-19 vaccine booster dose in children 5 to 11 years of age and concurrent administration of COVID-19 vaccines with other recommended vaccines. This guidance is based on current evidence and NACI expert opinion.

There are two updates in this release:

Recommendations on the use of a COVID-19 vaccine booster dose in children 5 to 11 years of age

Consistent with [NACI guidance on the use of a COVID-19 booster dose in children 5 to 11 years of age released on August 19, 2022](#), NACI continues to recommend that:

- **Children 5 to 11 years of age who have an underlying medical condition that places them at high risk of severe illness due to COVID-19, including children who are immunocompromised, should be offered a Pfizer-BioNTech Comirnaty (10 mcg) COVID-19 vaccine booster dose at least 6 months after completion of a primary series or SARS-CoV-2 infection. (*Strong NACI recommendation*)**
- **All other children 5 to 11 years of age may be offered a Pfizer-BioNTech Comirnaty (10 mcg) COVID-19 vaccine booster dose at least 6 months after completion of a primary series or SARS-CoV-2 infection. (*Discretionary NACI recommendation*)**
- In accordance with [current NACI guidance](#) on fall COVID-19 booster doses for older populations (12+), a bivalent Omicron-targeting vaccine is the preferred vaccine product for children aged 5 to 11 years who are receiving a booster dose.
- NACI recommends that a booster dose be offered at least 6 months after completion of a primary series or SARS-CoV-2 infection. A shorter interval of at least 3 months may be considered in certain circumstances – a healthcare provider can help with this decision.
- NACI is currently recommending only one booster dose after the primary series for children 5 to 11 years of age. At the discretion of a healthcare provider, a bivalent booster dose could be offered at the recommended interval to children considered at high risk of severe COVID-19 who have previously received a booster dose with the original Pfizer-BioNTech Comirnaty mRNA vaccine.

- Most children who get COVID-19 have mild or no symptoms; however, some children experience severe disease and require hospitalization and children who have an underlying medical condition may be at higher risk of severe disease. Severe COVID-19 outcomes, including hospitalization, are lower in children who are vaccinated.
- Preliminary safety data from Canada and the United States suggest the BA.4/5 bivalent vaccines are well tolerated. When administered as a booster dose in older age groups, the BA.4/5 bivalent vaccines have a similar safety profile to the original mRNA COVID-19 vaccines.

Recommendations on the concurrent administration of COVID-19 vaccines with other recommended vaccines

- **NACI now recommends that COVID-19 vaccines may be given concurrently with (i.e. same day), or any time before or after, non-COVID-19 vaccines (including live and non-live vaccines) for individuals 6 months of age and older. (*Discretionary NACI recommendation*)**
- NACI previously recommended that a COVID-19 vaccine should be given 14 days before or after a non-COVID-19 vaccine for children 6 months to 5 years of age. This was a precautionary measure to help determine if a potential side effect was due to a COVID-19 vaccine or a non-COVID-19 vaccine.
- No safety signals (including the risk of myocarditis) have been identified for either the Pfizer-BioNTech Comirnaty (3 mcg) or Moderna Spikevax (25 mcg) COVID-19 vaccines in children 6 months to 5 years of age from clinical trials or ongoing safety surveillance data from Canada and the United States. In addition, there is no evidence of safety concerns of concurrent administration of COVID-19 and non-COVID-19 vaccines based on data from adult populations.

NACI continues to monitor the evolving COVID-19 situation and will update guidance as needed.

For the full statement, including supporting evidence and rationale, please see [NACI Statement: Updated recommendations on the use of COVID-19 vaccine booster doses in children 5 to 11 years of age and concurrent vaccine administration.](#)

For more information on NACI's recommendations on the use of COVID-19 vaccines, please refer to the [COVID-19 vaccine chapter](#) in the [Canadian Immunization Guide \(CIG\)](#), as well as additional statements on the [NACI web page](#).

QUOTES

“At this time, it is not assumed that every child will need a COVID-19 booster dose but they are particularly important for children 5 years of age and older with underlying conditions that place them at high risk of severe illness from COVID-19. Among the products available, bivalent booster doses are preferred because we expect that they will perform at least as well as original booster products, and may also have additional benefits for a broader immune response against other variants. We also recognize that people, particularly children, have fallen behind in some of their routine immunizations during the pandemic, and hope that the new recommendation on concurrent administration will improve access and uptake for all recommended childhood vaccines.”

- Dr. Shelley Deeks, NACI Chair

“Given very high rates of infection during the Omicron wave, COVID-19 cases have been considerably higher among children compared to earlier waves. In those aged 5 to 11 years, availability of a bivalent Omicron-containing mRNA vaccine provides a good option as a booster dose to increase the immune response that has waned since the primary series and is now the preferred booster product for this age group. Receiving a booster dose is especially important for children who are at high risk of severe COVID-19 illness.

Although most children who get COVID-19 have mild or no symptoms, the risk of severe outcomes, including hospitalization is lower in children 5 to 11 years of age who are vaccinated with a primary series compared to those who are not. For parents and guardians considering COVID-19 vaccination, it is reassuring to know that no unexpected safety signals have been identified among children in this age group.

In addition, NACI's updated guidance on concurrent administration of COVID-19 vaccines with other vaccines will make it easier for young children to stay up to date with all their recommended vaccines, including the 2022-23 seasonal influenza vaccine. As always, parents and caregivers should be respected and supported in making informed and confident decisions.”

- Dr. Theresa Tam, Chief Public Health Officer