UPCOMING WEBINARS & EVENTS

Register on our website at allergyasthmaneywork.org – scroll to the bottom of our home page and click on the webinar you want to join us for.

Webinar recordings are also found here.

Chronic Urticaria: What I Wish My Patients Knew
September 22 - 4:00 PM ET
Dr. Marcus Maurer

Current & Future Treatments for Food Allergy
September 27 – 4:00 PM ET
Dr. Aikaterini Anagnostou

Global Food Allergy Summit
October 1 – 2 – Free Conference – Attend Virtually!
Look under “Events” on our website

COVID Isn’t Over:
Rebound Infections, New Guidance & More
COVID-19 Webinar Series
The mission of ALLERGY & ASTHMA NETWORK
Is to end the needless death and suffering due to asthma, allergies and related conditions through outreach, education, advocacy and research.

MEET OUR Speakers

Dr. Purvi Parikh
- Clinical Assistant Professor of Medicine NYU Langone School of Medicine & Director, Allergy and Asthma Association, Murray Hill
- National Spokesperson, Allergy & Asthma Network

Tonya Winders
- President & CEO, Allergy & Asthma Network
- President, Global Allergy & Airways Patient Platform
Today’s Program

01 CURRENT STATE OF COVID-19

02 REBOUND INFECTIONS & LONG COVID UPDATE

03 NEW INFORMATION & GUIDANCE FROM THE CDC

POLL QUESTION

We’d like to know who is with us today!

What category best describes you? (we have a limited number of answers or would offer more!)
CURRENT STATE OF COVID-19

Tonya Winders

JOHNS HOPKINS GLOBAL MAP

September 15, 2022 8:21 AM
Current Cases of COVID-19 in the US

Centers for Disease Control and Prevention

IN THE NEWS

COVID Emergencies are Being Lifted

New York Governor will allow COVID-19 state of emergency to expire as cases continue to decline.

Washington state Governor announced the upcoming rescission of all remaining COVID-19 emergency proclamations and state of emergency by Oct. 31.
IN THE NEWS

LONG COVID

Psychological distress, including depression, anxiety, worry, perceived stress, and loneliness, before COVID-19 infection was associated with an increased risk of long COVID, according to researchers at Harvard T.H. Chan School of Public Health.

The increased risk was independent of smoking, asthma, and other health behaviors or physical health conditions.

WHO released 6 policy briefs Wednesday that outline key actions for governments to take to end the pandemic.

From WHO Director-General:
“Last week, the number of weekly reported deaths from Covid-19 was the lowest since March 2020,” he said. “We have never been in a better position to end the pandemic. We’re not there yet, but the end is in sight.

“A marathon runner does not stop when the finish line comes into view; she runs harder with all the energy she has left,” Tedros said. “So must we. We can see the finish line, we are in a winning position, but now is the worst time to stop running. Now is the time to run harder and make sure we cross the line and reap the rewards of all our hard work.”
How many times have you been tested or performed a home test for COVID-19?
COVID-19 Rebound Infection

What is Rebound?

- COVID-19 rebound is a resurgence of symptoms between 2 and 8 days after initial recovery
- A recurrence of COVID-19 symptoms or a new positive viral test after having tested negative.

A brief return of symptoms may be part of the natural history of SARS-CoV-2 (the virus that causes COVID-19) infection in some persons, independent of treatment with Paxlovid (an antiviral medication) and regardless of vaccination status.
Rebound Infections

Limited Information
Case reports suggest that persons treated with Paxlovid who experience COVID-19 rebound have had mild illness.

Severe Illness
There are no reports of severe illness.

No Evidence
There is currently no evidence that additional treatment is needed with Paxlovid or other therapies where rebound is suspected.

COVID-19 Rebound Management
Risk of transmission during rebound can be managed by following the CDC’s guidance on isolation & taking other precautions like masking.

Characteristics of COVID Rebound Infections

Recurrence of symptoms or a new positive viral test after having tested negative.

Rebound patients should isolate per CDC recommendations regardless of whether you were treated with an antiviral or not.

Rebound patients should isolate per CDC recommendations regardless of whether you were treated with an antiviral or not.

Isolation should be restarted, and the person should isolate for 5 days.

Can end their re-isolation period after 5 full days if fever has resolved for 24 hours and symptoms are improving.

The individual should wear a mask for a total of 10 days after rebound symptoms started.

Some people continue to test positive after day 10 but are considerably less likely to shed infectious virus.
Based on information from the case reports, COVID-19 rebound did not represent reinfection with SARS-CoV-2 or the development of resistance to Paxlovid.

No other respiratory pathogens were identified among known cases.

Possible transmission of infection during COVID-19 rebound has been described; however, it remains unknown whether the likelihood of transmission during rebound differs from the likelihood of transmission during the initial infection.

A Look at Paxlovid – Antiviral Therapy

**Recommendation**

Paxlovid continues to be recommended for early-stage treatment of mild to moderate COVID-19 among persons at high risk for progression to severe disease. Paxlovid treatment helps prevent hospitalization and death due to COVID-19.

**Notes on Paxlovid**

- Paxlovid has Emergency Use Authorization to be used for anyone ages 12 & older at high risk for severe COVID disease.
- Antiviral pill – taken at home
- Must start within 5 days of developing symptoms
- 3 pills twice daily for 5 days
- 89% reduction in the risk of hospitalization
- Expected to work against Omicron variant
- Must have underlying conditions
- Long list of side effects
- Long list of medications that Paxlovid may interact with
**Rebound Recommendations for Healthcare Providers**

**Treatment**
Currently no evidence that additional treatment for COVID-19 rebound is needed
Patient monitoring is most appropriate management

**Isolation**
Follow CDC guidance isolation & take precautions to prevent further transmission
Re-isolate for 5 days
Wear a mask for a total of 10 days

**Evaluation**
Consider clinical evaluation of patient if symptoms persist or worsen

**Report**
Providers are encouraged to report cases of COVID-19 rebound to Pfizer after treatment with Paxlovid

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**Rebound Recommendations for Patients**

Talk to your doctor or healthcare provider if you are at increased risk of developing severe COVID-19 to discuss treatment options

Consider requesting Paxlovid or another treatment if you meet the eligibility criteria

Contact your doctor or healthcare provider if your COVID symptoms persist or worsen

Find evidence-based answers to your questions
What You Need to Know

- Post-COVID conditions can include a wide range of ongoing health problems; these conditions can last weeks, months, or years.
- Post-COVID conditions are found more often in people who had severe COVID-19 illness, but anyone who has been infected with the virus that causes COVID-19 can experience post-COVID conditions, even people who had mild illness or no symptoms from COVID-19.
- People who are not vaccinated against COVID-19 and become infected may also be at higher risk of developing post-COVID conditions compared to people who were vaccinated and had breakthrough infections.
- While most people with post-COVID conditions have evidence of infection or COVID-19 illness, in some cases, a person with post-COVID conditions may not have tested positive for the virus or known they were infected.
- CDC and partners are working to understand more about who experiences post-COVID conditions and why, including whether groups disproportionately impacted by COVID-19 are at higher risk.

Long COVID-19 Symptoms

01 General symptoms
- Tiredness or fatigue that interferes with daily life
- Symptoms that get worse after physical or mental effect
- Fever

02 Respiratory & heart symptoms
- Difficulty breathing or shortness of breath
- Cough
- Chest pain
- Heart palpitations

03 Neurological symptoms
- Brain fog
- Headache
- Sleep issues
- Dizziness
- Change in smell or taste
- Depression or anxiety

04 Digestive symptoms
- Diarrhea
- Stomach pain

05 Other symptoms
- Joint or muscle pain
- Rash
- Changes in menstrual cycles
What CDC Is Doing to Learn about Post–COVID Conditions

CDC and partners are doing research on post-COVID conditions in a variety of populations and settings. These partnerships are essential for expanding the base of evidence needed for addressing post-COVID conditions. CDC and its partners are working to:

- **Characterize and assess post-COVID conditions** to estimate both the risk of experiencing post-COVID conditions and the numbers of people experiencing these conditions by demographic group.
  - Identify risk factors to better understand how to prevent post-COVID conditions.
  - Identify groups disproportionately affected by post-COVID conditions.
  - Assess the burden (health and financial costs) of post-COVID conditions.
- **Identify successful interventions** to prevent and lessen the effect of post-COVID conditions. This research includes
  - Assessing if COVID vaccinations reduce the occurrence of post-COVID conditions.
  - Promoting equity in healthcare access and utilization for people with post-COVID conditions.
- **Disseminate clinical guidance and other education materials** for healthcare providers, patients, and the public to improve understanding of post-COVID conditions and reduce stigma.
Vaccine Coverage in the US

Center for Disease Control and Prevention

COVID-19 Vaccines by Type
Vaccine News

CDC Director Rochelle P. Walensky, M.D., M.P.H., endorsed the CDC Advisory Committee on Immunization Practices’ (ACIP) recommendations for use of updated COVID-19 boosters from Pfizer-BioNTech for people ages 12 years and older and from Moderna for people ages 18 years and older.

Updated COVID-19 boosters add Omicron BA.4 and BA.5 spike protein components to the current vaccine composition, helping to restore protection that has waned since previous vaccination by targeting variants that are more transmissible and immune-evading.

The Food and Drug Administration’s (FDA) authorization of updated COVID-19 boosters, and CDC’s recommendation for use, are critical next steps forward in our country’s vaccination program—a program that has helped provide increased protection against COVID-19 disease and death.

What’s new in the new Omicron booster vaccine?

- The newly authorized shots are the first updates to the original COVID-19 vaccines that were introduced in late 2020. They use the same mRNA technology as the original vaccines.

- The key difference between the original COVID-19 shots and the new “bivalent” version is that the latter consists of a mixture of mRNA that encodes the spike proteins of both the original SARS-CoV-2 virus and the more recent omicron subvariants, BA.4 and BA.5.

- The bivalent vaccines can only be used as a booster shot at least two months after the completion of the primary series — or initial required shots — or following a previous booster shot.
Notes on Side Effects of Omicron Vaccine:

Side effects are not expected to be much different from what you may have experienced with previous vaccine and booster doses.

“We just don’t have any data on this [yet], essentially giving two vaccines in one shot — but biologically, I just wouldn’t expect the side effects, severity or the safety profile of the shots to be different from the current mRNA vaccines and boosters,” Dr. Paul Offit, director of the Vaccine Education Center at Children’s Hospital of Philadelphia and member of an independent advisory group to the U.S. Food and Drug Administration, tells CNBC Make It.

Side effects:
- Pain
- Fatigue
- Headache
- Muscle pain
- Chills
- Joint pain
- Redness and swelling at injection site
- Fever

“The updated COVID-19 boosters are formulated to better protect against the most recently circulating COVID-19 variant. They can help restore protection that has waned since previous vaccination and were designed to provide broader protection against newer variants. This recommendation followed a comprehensive scientific evaluation and robust scientific discussion. If you are eligible, there is no bad time to get your COVID-19 booster and I strongly encourage you to receive it.”

Rochelle Walensky
Director
Centers for Disease Control & Prevention
# New CDC Guidance

<table>
<thead>
<tr>
<th>Streamlined</th>
<th>Actions</th>
<th>Tools</th>
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</thead>
<tbody>
<tr>
<td>CDC is streamlining its COVID-19 guidance to help people better understand their risk, how to protect themselves and others, what actions to take if exposed to COVID-19</td>
<td>Describes what actions to take if people are sick or test positive for the virus</td>
<td>With so many tools available to us for reducing COVID-19 severity, there is significantly less risk of severe illness, hospitalization and death compared to earlier in the pandemic</td>
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**COVID-19 continues to circulate globally**

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“*We’re in a stronger place today as a nation, with more tools—like vaccination, boosters, and treatments—to protect ourselves, and our communities, from severe illness from COVID-19. We also have a better understanding of how to protect people from being exposed to the virus, like wearing high-quality masks, testing, and improved ventilation. This guidance acknowledges that the pandemic is not over, but also helps us move to a point where COVID-19 no longer severely disrupts our daily lives.*”

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**Greta Massetti, PhD, MPH**  
Branch Chief, Field Epidemiology and Prevention Branch  
MMWR Author
Defining Isolation & Quarantine

**Isolation**
Relates to behavior after a confirmed infection. Isolation for 5 days followed by wearing a well-fitting mask will minimize the risk of spreading the virus to others.

**Quarantine**
Refers to the time following exposure to the virus or close contact with someone known to have COVID-19.

CDC updated guidance comes as the Omicron variant continues to spread throughout the U.S. and reflects the current science on when and for how long a person is maximally infectious.

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Isolation & Quarantine for **Positive** COVID-19

- **Omicron variant**
  Allows us to shorten the recommended time of isolation for the public

- **Isolate for 5 days**
  If asymptomatic or symptoms are resolving – isolate for 5 days

- **Follow with mask**
  Following the 5 days of isolation, follow with 5 days of wearing a mask around others.

- **Change**
  These changes are motivated by science

- **Transmission**
  Majority of SARS-CoV-2 transmission occurs early in the course of illness

- **Infectious**
  Generally, most infectious 1 – 2 days prior to symptoms and 2 – 3 days after symptoms present
Quarantine for **Exposure** to COVID-19

- For people who are unvaccinated or are more than six months out from their second mRNA dose (or more than 2 months after the J&J vaccine) and not yet boosted, CDC now recommends quarantine for 5 days followed by strict mask use for an additional 5 days.

- Alternatively, if a 5-day quarantine is not feasible, it is imperative that an exposed person wear a well-fitting mask at all times when around others for 10 days after exposure.

- Individuals who have received their booster shot do not need to quarantine following an exposure, but should wear a mask for 10 days after the exposure.

- For all those exposed, best practice would also include a test for SARS-CoV-2 at day 5 after exposure.

- If symptoms occur, individuals should immediately quarantine until a negative test confirms symptoms are not attributable to COVID-19.

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**CDC: Vaccine is the best way to protect yourself & reduce the impact of COVID-19 on our communities.**

- **Vaccine effectiveness**
  - Vaccine effectiveness against infection from 2 doses of an mRNA vaccine is ~ 35%

- **Booster dose**
  - A COVID-19 booster dose restores effectiveness to 75%

  COVID-19 vaccination decreases the risk of severe disease, hospitalization, and death from COVID-19.
Let's Review the Guidance:

If You Test Positive for COVID-19 (Isolate)

Everyone, regardless of vaccination status.

- Stay home for 5 days.
- If you have no symptoms or your symptoms are resolving after 5 days, you can leave your house.
- Continue to wear a mask around others for 5 additional days.

*If you have a fever, continue to stay home until your fever resolves.*

Let's Review the Guidance:

If You Were Exposed to Someone with COVID-19 (Quarantine)

If you:

Have been boosted
OR
Completed the primary series of Pfizer or Moderna vaccine within the last 6 months
OR
Completed the primary series of J&J vaccine within the last 2 months

- Wear a mask around others for 10 days.
- Test on day 5, if possible.

*If you develop symptoms get a test and stay home.*
Let's Review the Guidance:

If you:

- Completed the primary series of Pfizer or Moderna vaccine over 6 months ago and are not boosted
- OR
- Completed the primary series of J&J over 2 months ago and are not boosted
- OR
- Are unvaccinated

- Stay home for 5 days. After that continue to wear a mask around others for 5 additional days.
- If you can’t quarantine you must wear a mask for 10 days.
- Test on day 5 if possible.

If you develop symptoms get a test and stay home

Consult
If you had moderate severe illness or have a weakened immune system, consult your doctor before ending isolation.

Symptoms worsen or restart
After you have ended isolation, if your COVID-19 symptoms worsen, restart your isolation at day 0.

Screening
Recommend screening testing of asymptomatic people without known exposures will no longer be recommended in most community settings.

Physical distance
Physical distance is just one component of how to protect yourself and others. It is important to consider the risk in a particular setting, including local COVID-19 Community Levels and the important role of ventilation, when assessing the need to maintain physical distance.
Medications to treat COVID-19:

- Antiviral medications (Lagevrio [molnupiravir], Paxlovid [nirmatrelvir and ritonavir], and Veklury [remdesivir]) and monoclonal antibodies (bebtelovimab) are available to treat COVID-19 in persons who are at increased risk for severe illness
  - Including older adults, unvaccinated persons, and those with certain medical conditions.
- Antiviral agents reduce risk for hospitalization and death when administered soon after diagnosis. The federal Test to Treat initiative facilitates rapid, no-cost access to oral COVID-19 treatment for eligible persons who receive a positive SARS-CoV-2 test result.
  - Recent expansion of prescribing authority of Paxlovid to pharmacists intends to further facilitate access.
  - Continued efforts are needed to reduce racial and ethnic differences in receipt of monoclonal antibody therapies and disparities in dispensing rates for oral antiviral prescriptions by community social vulnerability.

As transmission of SARS-CoV-2 continues, the current focus on reducing medically significant illness, death, and health care system strain are appropriate and achievable aims that are supported by the broad availability of the current suite of effective public health tools. Rapid identification of emergent variants necessitating a shift in prevention strategy makes continued detection, monitoring, and characterization of novel SARS-CoV-2 variants essential. Incorporating actions to mitigate the impact of COVID-19 into long-term sustainable routine practices is imperative for society and public health.
POLL QUESTION

Are you planning to get the new Omicron variant vaccine booster shot?

QUESTIONS

Record your questions in the question box

We’ll get to as many as we can!
Next Webinar

Join us for our upcoming webinar

Chronic Urticaria: What I Wish My Patients Knew

Monday, September 19, 2022
10:00 AM ET

Breathe Better Together

allergyasthamanetwork.org

Please remain online for 2 – 3 minutes to complete an evaluation survey! Thank you!