

June 26, 2024

Helen Keipp Talbot, MD  
Chair  
Advisory Committee on Immunization Practices  
Centers for Disease Control and Prevention  
Atlanta, GA

Melinda Wharton, MD, MPH  
Associate Director for Vaccine Policy  
National Center for Immunization and  
Respiratory Diseases  
Centers for Disease Control and Prevention  
Atlanta, GA

Dear Dr. Talbot and Dr. Wharton,

On behalf of the undersigned organizations, we commend the Advisory Committee on Immunization Practices (ACIP) for its continued efforts to prioritize population health through vaccination recommendations.

We are writing to encourage the committee to recognize the value that broad, age-based recommendations starting at age 50 would have on illness and disease prevention among an ageing, underserved population. Beginning appropriate and indicated age-based recommendations at 50 years rather than 65 years, where supported by data, can help in promoting vaccine uptake and disease prevention among ageing adult populations, support better overall wellness, reinforce healthy ageing practices, and support health equity.

Vaccine coverage rates of adults aged 50-64 years have been observed to be roughly 8%, the lowest of all age groups.<sup>i</sup> As former ACIP chair Dr. Grace Lee noted in October 2023, the most straightforward way to increase vaccination rates in this age group – and address health disparities – is through broad, age-based recommendations. Implementing broad, age-based recommendations can positively impact disease prevention among these ageing populations and support increased health equity for vulnerable populations.

As people age, they become more vulnerable to disease and have an increased prevalence of chronic conditions. Earlier vaccinations have the potential to better protect against vaccine-preventable diseases, which is especially important in a population already vulnerable to more severe disease outcomes.<sup>ii</sup> Recommending and administering vaccines to people beginning at age 50 may increase immune responses to vaccination and protect older adults from severe illness exacerbated by chronic or comorbid conditions.<sup>iii</sup> Expanding broad, age-based vaccination recommendations to begin at age 50 could also be an effective strategy to reduce disparities in respiratory disease for vulnerable populations. Studies have shown that Black and Hispanic Americans are significantly more affected by chronic conditions, including higher rates of diabetes and death from heart disease. The increased impact of these chronic conditions can also increase risk for vaccine-preventable diseases and severe illness.<sup>iv</sup> Earlier vaccinations could provide additional support in helping to address these health inequities, lessening the burden on an often-underserved population.

We encourage ACIP to support broad, age-based recommendations for adults starting at age 50, where data supports, to simplify the adult immunization schedule and vaccine administration, and to increase uptake. These expanded recommendations can help reduce provider confusion, improve health outcomes, and encourage increased vaccination. Your continued work ensures access to vaccines that protect public

health, as well as supports efforts to adapt recommendations given evolving science and implementation needs.

Thank you for ensuring that all adults can access preventative care and for your contributions to improving health equity.

Should you have any questions, please contact Olivia Perry at [operry@allianceforpatientaccess.org](mailto:operry@allianceforpatientaccess.org)

Sincerely,

Alliance for Aging Research

Alliance for Immunizations in Michigan

Alliance for Patient Access

American Public Health Association

American Society for Meningitis Prevention

ANA-NY

Arizona Families for Vaccines

Asthma and Allergy Foundation of America

Colorado Families for Vaccines

Gerontological Society of America

Global Coalition on Aging

Global Healthy Living Foundation

HealthyWomen

Illinois Public Health Association

Immunization Coalition of Delaware

Immunize Kansas Coalition

ImmunizeDC

Indiana Association of School Nurses

Indiana Immunization Coalition

Indiana Public Health Association

Iowa Public Health Association | Iowa Immunizes Coalition

Kentucky Rural Health Association - Immunize Kentucky Coalition

Kimberly Coffey Foundation  
Louisiana Families for Vaccines  
Lupus and Allied Diseases Association, Inc.  
Maine Families for Vaccines  
March of Dimes  
Massachusetts Families for Vaccines  
Montana Families For Vaccines  
New York State Academy of Family Physicians  
New York State Association of Health Care Providers (HCP)  
New York State Public Health Association  
NYS Association for Rural Health  
Pediatric Nurse Practitioner House Calls  
SAFE Communities Coalition  
Society for Public Health Education  
South Dakota Families for Vaccines  
STChealth  
Tennessee Families for Vaccines  
The AIDS Institute  
The Immunization Partnership  
Tulsa Area Immunization Coalition

**Cc: Oliver Brooks, MD, FAAP; Wilbur H. Chen, MD, MS, FACP, FIDSA; Sybil Cineas, MD, FAAP, FACP; Matthew F. Daley, MD; Denise J. Jamieson, MD, MPH; Camille Nelson Kotton, MD, FIDSA, FAST; Jamie Loehr, MD, FAAFP; Sarah S. Long, MD; Yvonne Maldonado, MD; Robert Schechter, MD, MSc; Albert C. Shaw, MD, PhD, FIDSA**

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<sup>i</sup> Centers for Disease Control and Prevention. (2022). Vaccination Coverage among Adults in the United States, National Health Interview Survey, 2019–2020. <https://www.cdc.gov/vaccines/imz-managers/coverage/adultvaxview/pubs-resources/vaccination-coverage-adults-2019-2020.html#>

<sup>ii</sup> Centers for Disease Control and Prevention. (2023). Underlying Medical Conditions Associated with Higher Risk for Severe COVID-19: Information for Healthcare Professionals. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-care/underlyingconditions.html>

<sup>iii</sup> Romero Starke, K., Reissig, D., Petereit-Haack, G., Schmauder, S., Nienhaus, A., & Seidler, A. (2021). The isolated effect of age on the risk of COVID-19 severe outcomes: a systematic review with meta-analysis. *BMJ global health*, 6(12), e006434. <https://doi.org/10.1136/bmjgh-2021-006434>.

<sup>iv</sup> Ellis KR, Hecht HK, Young TL, Oh S, Thomas S, Hoggard LS, et al. Chronic Disease Among African American Families: A Systematic Scoping Review. *Prev Chronic Dis* 2020;17:190431. DOI: <http://dx.doi.org/10.5888/pcd17.190431>external icon