Covid-19 is still there, the flu is back, let’s protect ourselves!

Press release of the French National Academy of Medicine

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Despite a sharp decrease in the case fatality rate since the first two waves of 2020, largely attributable to the immunity conferred by vaccination, people are still dying from Covid-19 in France: out of 153,000 deaths attributed to this pandemic, about 30,000 have occurred since the beginning of 2022, more than three quarters of them after the age of 65. Appearing at the start of the school year in September, the eighth epidemic wave was activated by the replacement of the BA.1 and BA.2 sub-lineages of the Omicron variant by the BA.5 sub-lineage, which has become the most frequent in France and worldwide. It has led to an increase in hospitalizations and severe forms with an average of 70 deaths per day since mid-October.

Although this new episode clearly shows that the pandemic is not over, the vaccination coverage of the French population has stopped progressing for several months, even among those most at risk of severe forms. The protective efficacy of a booster dose against hospitalization and death is however well established, although it tends to decrease after 3 months to around 70 to 80% [1]. This is why the administration of a second booster (4th dose) was recommended in July, 6 months after the last dose for those over 60 years old, 3 for those over 80 [2]. This booster campaign was poorly attended by eligible people, with only 38.4% of 60-79 years old people and 51.1% of those of 80 and over having received this second booster on October 24.

The recent marketing of bivalent vaccines has revived the hope of improving the protection of the most vulnerable people as part of an autumn vaccination campaign. These are the Spikevax bivalent Original/Omicron BA.1® vaccine (Moderna) and the Comirnaty Original/Omicron BA.4-5® vaccine (BioNTech-Pfizer). The latter, including the currently dominant Omicron BA.5 sublineage, has a potential but unproven advantage.

The genetic evolution of the virus continues within the Omicron BA.5 sublineage with new BQ.1 derivatives, including BQ.1.1 which is spreading in Europe and several parts of the world with mutations that could promote immune escape.

Moreover, the Covid-19 pandemic should not overlook the threat of a more deadly seasonal flu than in previous years (it was absent during the winter of 2020-2021, but reappeared the following season in the first quarter of 2022), and the risk of excess mortality related to viral coinfections [3].

As the expectation of second-generation Covid vaccines can no longer justify procrastination by undecided individuals since bivalent vaccines are accessible, the French National Academy of Medicine recommends:

- to maintain the vaccine protection for the most vulnerable people by administering an additional booster dose, respecting a period of six months after the last dose for people aged 60 and over, and a period of three months for people aged 80 and over, residents in institutions for elderly and immunocompromised people;
- to include in this target population adults and children with risk factors for severe forms of the disease or living in contact with vulnerable people, as well as pregnant women;

- to no longer postpone these booster shots for eligible individuals, as the preference for one of the two available bivalent vaccines should not be a cause of delay;

- to combine these anti-Covid boosters with the influenza vaccination in the same autumn vaccination campaign [4];

- to maintain the habit of barrier measures, even after vaccination, in particular wearing a mask, in public transport and in crowded public places.

References

1. DREES. Protection provided by the booster dose of the Covid-19 vaccine wanes after 3 months for seniors. March 18, 2022.

