

Help Limit Confusion With COVID-19 Vaccines for 2025-2026

Changes with 2025-2026 COVID-19 vaccines are causing confusion.

Who should be vaccinated? Continue to bring up COVID-19 vaccination for ages 6 months and up...and offer the chance for patients or caregivers to speak with the pharmacist about vaccination.

Be aware that FDA labels for 2025-2026 COVID-19 vaccines limit use to ages 65 and older...and younger patients at high risk.

But now the Advisory Committee on Immunization Practices (ACIP) has voted to recommend “shared clinical decision-making” for all patients 6 months and older. This means these patients and their healthcare providers should work together to decide about COVID-19 vaccination.

It comes on the heels of numerous medical organizations publishing their own scientific recs...and advocating against limiting access.

For instance, Am Academy of Pediatrics recommends COVID-19 vaccines for all kids 6 to 23 months, and those 2 to 18 years at high risk or whose parent chooses vaccination. Am Academy of Family Physicians also recommends this for kids...plus routine vaccination for adults. And American College of Obstetricians and Gynecologists still recommends vaccination in pregnancy.

Pull in your pharmacist to help patients weigh benefits and risks.

For example, MANY patients have a risk factor for severe illness from COVID-19 infection...diabetes, heart or lung disease, obesity, depression, smoking, pregnancy, immunocompromise, etc.

But data show COVID-19 vaccination reduces risk of long COVID, hospitalization, death, adverse pregnancy outcomes from COVID-19, etc.

And despite stronger heart warnings for mRNA COVID-19 vaccines, myocarditis is still rare...about 27 cases per million doses in males 12 to 24 years...and less common and severe than with COVID-19 infection.

Keep in mind who can get immunized at your pharmacy will depend on your state law, standing order, etc. Help patients get an Rx if needed.

Anticipate that most payers will still cover COVID-19 vaccination.

Which vaccine should be used? All 2025-2026 COVID-19 vaccines will be monovalent. mRNA options (Comirnaty, Spikevax, mNexspike) preferentially target LP.8.1...protein-based Nuvaxovid targets JN.1.

Dispense any age-appropriate option. For patients 65 years and older, use any product...Comirnaty (Pfizer-BioNTech), Spikevax (Moderna), mNexspike (Moderna), or Nuvaxovid (Novavax).

But for younger patients, it varies. Spikevax can be used starting at 6 months...Comirnaty at 5 years...and mNexspike or Nuvaxovid at age 12.

Watch for errors. For example, new mNexspike is a lower dose (10 mcg/0.2 mL) than Spikevax (50 mcg/0.5 mL).

Plus storage is different. After thawing, Spikevax can be kept in the fridge for up to 60 days...or 12 hours at room temp. But mNexspike is good for up to 90 days in the fridge...or 24 hours at room temp.

mNexspike is also being promoted as more effective...especially for ages 65+. But only 1 more COVID-19 case is

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prevented for every 73 people in this group. And mNexspike costs about \$35 more per dose.

Keep in mind that combo flu/COVID-19 vaccines won't be available this fall...and it's okay to give the separate vaccines at the same visit.

See our *COVID-19 Vaccines 2025-26* resource for doses, storage, etc...plus answers to FAQs about safety and effectiveness.

Key References:

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