



COVID-19 VACCINATION

ATAGI 2023 COVID-19 BOOSTER ADVICE – FIRST AND ADDITIONAL DOSE

Age	2023 COVID-19 booster dose (February 2023 guidance)		Additional COVID-19 dose (September 2023 guidance)	
	At risk [#]	No risk factors	At risk [#]	No risk factors
<5 years	Not recommended	Not recommended	Not recommended	Not recommended
5-17 years	Consider	Not recommended	Not recommended	Not recommended
18-64 years	Recommended	Consider	Consider if severe immunocompromise [^]	Not recommended
65-74 years	Recommended	Recommended	Consider	Consider
≥ 75 years	Recommended	Recommended	Recommended	Recommended

- *mRNA bivalent vaccine preferred; for ages in which a bivalent vaccine is not approved, **use a vaccine approved for that age group**. Timing: 2023 vaccine doses should be given from 6 months after a person’s last dose.
- [#]Includes those with a medical condition that increases the risk of severe COVID-19 illness (refer to **ATAGI clinical guidance**) or those with disability with significant or complex health needs or multiple comorbidities which increase the risk of poor outcomes from COVID-19.
- [^]For details, refer to the **ATAGI recommendations on the use of a third primary dose of COVID-19 vaccine in individuals who are severely immunocompromised**

Frequently Asked Questions

Q. What is the difference between the February advice and this advice?

A. The February 2023 advice remains in place and relates to those who should receive a COVID-19 vaccine dose in 2023.

This further advice released in **September 2023** is focussed on those who should receive an additional dose of a COVID-19 vaccine.

ATAGI continues to encourage all adults who were recommended to have a COVID-19 vaccine dose in **February 2023**, and who have not yet had one, to receive a vaccine dose as soon as possible.

Q. My patient has already had a booster in 2023, but they are not mentioned in the new advice. Can they get another one?

A. No. Age remains the strongest risk factor for severe COVID-19 disease.

COVID-19 vaccines provide good protection against serious illness and death. Much of the population are currently well-protected against severe disease from COVID-19 due to 'hybrid immunity', a combination of protection from previous vaccination and prior infection.

Q: Why is ATAGI recommending an additional COVID-19 dose for older people only?

A. The primary aim of COVID-19 vaccination continues to be to reduce the risk of serious illness and death from COVID-19.

Age remains the strongest risk factor for severe COVID-19 disease.

Much of the population, particularly younger individuals with no other medical conditions, are currently well-protected against severe disease from COVID-19 from a combination of their previous vaccinations (including those who have already received a 2023 dose) and additional immunity gained from a previous infection.

SARS-CoV-2 has consistently caused more severe illness, hospitalisation and deaths in older adults, particularly those with major medical comorbidities.

Most cases of severe illness (e.g., requiring hospitalisation) continue to be in older adults, particularly those aged 75 years and older. COVID-19 cases also continue to be reported in residential aged care facilities.

Q. Why is ATAGI recommending an additional COVID-19 dose when only half of residents of aged care homes have had a 2023 booster?

A. As at 23 August 2023, over 66% of eligible aged care residents have received a 2023 COVID-19 booster dose.

Age remains the strongest risk factor for severe COVID-19 disease and most cases of severe illness (e.g., requiring hospitalisation) continue to be in older adults, particularly those aged 75 years and older.

COVID-19 vaccines provide good protection against serious illness and death, however this protection wanes over time. Current evidence suggests that people aged 75 years and older will gain significant improvements in protection if they receive another dose of vaccine 6 months after their 2023 dose.

ATAGI continues to note that there is minimal benefit from having a COVID-19 vaccine dose too soon after infection. However, current SARS-CoV-2 testing rates have dropped significantly and from a practical perspective, it is challenging for many individuals to know if or when they last had an infection.

Where previous infection details are unknown, it is appropriate to proceed with a first 2023 dose, or an additional dose for eligible people outlined in this update.

This change will make it easier for providers and eligible patients, including those in residential aged care homes, who may be unsure if they have had a recent infection to consider receiving a COVID-19 dose.

Q. My patient [has a comorbidity/is immunocompromised/has a disability]. Should/can they have another dose?

- A. People with medical comorbidities and/or immunocompromising conditions can be at risk of severe disease from COVID-19 compared with healthy individuals.

ATAGI continues to encourage individuals who were recommended to have a COVID-19 vaccine dose in **February 2023**, and who have not yet had one, to receive a vaccine dose as soon as possible.

ATAGI **recommends** that all adults aged ≥ 75 years **should receive** an additional COVID-19 vaccine dose if 6 months have passed since their last dose.

The following groups should **consider** an additional 2023 COVID-19 vaccine dose if 6 months have passed since their last dose, after discussion with their healthcare provider:

- All adults aged 65 to 74 years, and
- Adults aged 18 to 64 years with severe immunocompromise.

Details of medical comorbidities and what constitutes severe immunocompromise can be found in the **ATAGI Clinical Guidance for COVID-19 vaccine providers**. **These examples are not exhaustive**, and you should use your clinical judgement to assess individual patient risk.

Q. My patient is under 65 in a Residential Aged Care Home, can they have an additional dose?

- A. ATAGI continues to encourage all adults who were recommended to have a COVID-19 vaccine dose in **February 2023**, and who have not yet had one, to receive a vaccine dose as soon as possible.

ATAGI **recommends** that all adults aged ≥ 75 years **should receive** an additional COVID-19 vaccine dose if 6 months have passed since their last dose.

Patients aged 65 to 74 years, or 18-64 with severe immunocompromise, may wish to **consider** an additional dose, taking into account their medical history when determining if an additional booster should be considered. Providers should be aware that for patients in these cohorts, an additional dose will be of most benefit if:

- You are unsure if the patient has had SARS-CoV-2 infection previously (and they are therefore unlikely to have protection from hybrid immunity),
- The patient has medical comorbidities that increase their risk of severe COVID-19, or disability with significant or complex health needs, and/or
- Resides in a residential aged care facility.

For younger people or older adults without severe immunocompromise who have already had a dose in 2023, **no further doses are currently recommended**. Patients in these cohorts have a lower baseline risk of severe illness if they have already been vaccinated, and particularly if they have also had prior infection.

A further dose will offer little additional benefit even if it has been more than 6 months since their last dose.

Q. My patient has not had a 2023 booster yet, is it too late for them to have one?

- A. All adults who were recommended to have a COVID-19 vaccine dose in **February 2023**, and who have not yet had one, are encouraged to receive a vaccine dose as soon as possible.

Q: When should providers give a 2023 COVID-19 booster dose?

- A. 2023 booster dose or an additional dose should be given from 6 months after a person's last dose or infection.

However, where previous infection details are unknown, it is appropriate to proceed with a first 2023 dose, or an additional dose for eligible people outlined in this update.

ATAGI notes that current SARS-CoV-2 testing rates have dropped significantly. Therefore, from a practical perspective, it is challenging for many individuals to know if or when they last had an infection, and in these circumstances, it is appropriate to proceed the dose.

A person may also be vaccinated earlier in exceptional circumstances, such as before starting an immunosuppressant, before overseas travel or if someone cannot reschedule vaccination easily (such as in an outreach vaccination program).

There are no additional safety concerns for individuals receiving a COVID-19 vaccine who may have had undetected SARS-CoV-2 infection within the past 6 months.

Q. Why aren't other groups, such as people with a disability, medical comorbidities, and Aboriginal and Torres Strait Islanders who may be at higher risk of severe disease from COVID-19, included in this updated advice?

- A. The primary aim of COVID-19 vaccination continues to be to reduce the risk of serious illness and death from COVID-19.

COVID-19 vaccines provide good protection against serious illness and death, however this protection wanes over time. Current evidence suggests that people aged 75 years and older will gain significant improvements in protection if they receive another dose of vaccine 6 months after their 2023 dose.

People with a disability, medical comorbidities, Aboriginal and Torres Strait Islanders, can be at risk of severe disease from COVID-19 compared with healthy individuals and ATAGI continues to encourage individuals who were recommended to have a COVID-19 vaccine dose in **February 2023**, and who have not yet had one, to receive a vaccine dose as soon as possible.

Details of medical comorbidities and what constitutes severe immunocompromise can be found in the **ATAGI Clinical Guidance for COVID-19 vaccine providers**. **These examples are not exhaustive**, and you should use your clinical judgement to assess individual patient risk and take a patient medical history into account when determining if an additional booster should be considered.

Q. I'm not sure if a patient has ever had COVID-19. Do I need to do a test to find out before they have another dose?

- A. No. ATAGI notes that testing rates have dropped significantly and there are likely to have been many people with undetected SARS-CoV-2 infection within recent months.

There are no additional safety concerns for individuals receiving a COVID-19 vaccine who may have had undetected SARS-CoV-2 infection within the past 6 months.

It is important to note that there is no correlate of protection for SARS CoV-2, therefore antibody tests are not recommended at an individual level to document infection or response to a COVID-19 vaccine.

This is different to other vaccine preventable diseases (e.g., Hepatitis B), where antibody tests can be used to tell if a person has previously been infected.

Q. My young patients have not had any COVID-19 vaccines since their first doses more than 2 years ago, surely they need another one now?

- A. Much of the population are currently well-protected against severe disease from COVID-19 due to ‘hybrid immunity’, a combination of protection from previous vaccination and prior infection.

An additional dose is not currently recommended for younger age groups, since their baseline risk of severe illness is extremely low if they have already been vaccinated, and particularly if they have also had prior infection.

ATAGI will continue to monitor COVID-19 infection rates and clinical outcomes, new variants, vaccine availability and effectiveness to inform future recommendations for additional COVID-19 vaccine doses.

Q. My patient had COVID-19 last month, but their last dose was more than 6 months ago – should they have an additional dose? Do they still need to wait six months since they had COVID-19 to get their 2023 booster?

- A. There is minimal benefit from having a COVID-19 vaccine dose soon after infection.

Much of the population are currently well-protected against severe disease from COVID-19 due to ‘hybrid immunity’, a combination of protection from previous vaccination and prior infection.

ATAGI notes that current SARS-CoV-2 testing rates have dropped significantly, so from a practical perspective it is challenging for many individuals to know if they have had a recent infection. In these circumstances it is appropriate to proceed with an additional dose.

Where previous infection details are unknown, it is appropriate to proceed with a first 2023 dose, or an additional dose for eligible people outlined in the update.

Additionally, a person may be vaccinated earlier than the recommended 6-month interval in exceptional circumstances, such as before starting an immunosuppressant, before overseas travel or if someone cannot reschedule vaccination easily (such as in an outreach vaccination program).

There are no additional safety concerns for individuals receiving a COVID-19 vaccine who may have had undetected SARS-CoV-2 infection within the past 6 months.

Q. COVID-19 doesn't seem to be that serious anymore, why should I still be vaccinating patients?

A. Nationally there was a gradual increase in COVID-19 case notifications from March to June 2023 across all age groups. While the number of cases has declined substantially in recent weeks, virus transmission will continue to occur. COVID-19 cases also continue to be reported in residential aged care facilities.

Among cases reported to the National Notifiable Diseases Surveillance System (NNDSS) during the 4th Omicron wave (October 2022 – April 2023), around 7.2% of people aged 75 years and older were hospitalised with COVID-19.

ATAGI continues to encourage all adults who were recommended to have a COVID-19 vaccine dose in [February 2023](#), and who have not yet had one, to receive a vaccine dose as soon as possible.

Q. Are the vaccines that are currently available still providing good protection against COVID-19?

A. Yes, COVID-19 vaccines provide good protection against serious illness and death. All currently available COVID-19 vaccines are anticipated to provide benefit as a booster dose, however bivalent mRNA booster vaccines are preferred over other vaccines.

Clinical decisions relating to types of vaccines are matter for individuals and their vaccine provider.

For more information on which vaccines are available for each age group refer to the [COVID-19 vaccine doses and administration](#) webpage.

Q. What if a patient missed one of their COVID-19 vaccine doses, should they receive another one?

A. ATAGI continues to recommend a primary course¹ of vaccination against COVID-19, followed by a booster dose for those [eligible](#) under the [2023 booster dose recommendations](#).

This is irrespective of how many booster doses a patient has had prior to 2023. We are no longer numbering booster doses and a “catch-up” schedule is not required if they missed a booster dose (i.e. 1st or 2nd booster doses).

If their last COVID-19 vaccine dose was 6 months ago or longer, and eligible as per the table above, a patient can be given a **2023 booster dose** or **additional booster dose**.

Q. I'm not sure about how many COVID-19 vaccine doses my patient is recommended to have?

A. We are no longer numbering booster doses.

A **2023 booster dose** is recommended for [eligible](#) people if their last COVID-19 vaccine dose was 6 months ago or longer as per the [2023 booster dose recommendations](#).

This is irrespective of how many booster doses a patient has had in the past.

¹ 1. Primary course vaccination recommendations

COVID-19 vaccination is recommended for all people aged 5 years or older to protect against COVID-19.

COVID-19 vaccination is recommended for children aged 6 months to under 5 years with severe immunocompromise, disability, and those who have complex and/or multiple health conditions that increase the risk of severe COVID-19.

For most people, a primary vaccination course consists of 2 doses.

A third primary dose is recommended for people aged 6 months or older with severe immunocompromise.

[Clinical recommendations for COVID-19 vaccines](#) | [Australian Government Department of Health and Aged Care](#)

If the patient has had a 2023 booster dose and is aged ≥ 75 years, they should receive an additional COVID-19 vaccine dose if 6 months have passed since their last dose.

Q. How does my patient choose which booster vaccine is most suitable for them?

A. Regarding vaccine choice, all currently available COVID-19 vaccines are anticipated to provide benefit as a booster dose, however bivalent mRNA booster vaccines are preferred over other vaccines. You can find the full statement [here](#).

Q. Can patients get a booster every 6 months?

A. No. The eligibility criteria for the 2023 booster recommended by ATAGI in **February 2023** is only intended to apply to the first vaccine dose for eligible patients in 2023 i.e., it is not intended that the eligibility criteria operate as “rolling” advice for additional doses.

The **September 2023** advice outlines who is most likely to benefit from an additional dose of COVID-19 vaccine in 2023.

The September 2023 advice recognises that older age remains the strongest risk factor for severe COVID-19 disease, and much of the population are currently well-protected against severe disease from COVID-19 due to ‘hybrid immunity’, a combination of protection from previous vaccination and prior infection.

ATAGI continues to encourage all adults who were **recommended to have a COVID-19 vaccine dose in February 2023**, and who have not yet had one, to receive a vaccine dose as soon as possible.

Note: It is the responsibility of the vaccination provider to upload the COVID-19 vaccination into the patients AIR either within 24 hours and no later than 10 working days after vaccination.