



One booster per year: Suggested talking points

- **For now, data supports everyone getting one COVID-19 booster per year.**
 - There is not enough data yet to support multiple COVID-19 boosters per year.
 - Data shows that protection against infection has been falling for people who received a bivalent booster, especially older adults.
 - But, so far, protection against hospitalization still seems to be strong for everyone, including those at high risk.
 - This guidance on booster timing could change in the future if hospitalizations rise among those who received a bivalent booster or if the COVID-19 virus mutates significantly.
- **COVID-19 is still sending [thousands of people](#) to the hospital every day.**
 - Among children under age 5 and adults over 49, more than 80 percent of COVID-19 hospitalizations continue to be “for” COVID-19 rather than “with,” meaning that COVID-19 is the primary reason for those hospitalizations.
 - Nearly all adults hospitalized for COVID-19 had at least one underlying medical condition, with the most common being chronic lung disease and cardiovascular disease.
 - Over half of children and adolescents hospitalized for COVID-19 had at least one underlying medical condition, with the most common being asthma and prematurity.
- **Data continues to show COVID-19 vaccines are safe.**
 - Longer-term data supports the conclusion that bivalent boosters are very unlikely to be linked to [an increased risk of stroke](#) among older adults.
 - Myocarditis is a [rare but real risk](#) for adolescents, but the benefits of getting a primary vaccine series continue to outweigh the risks for this age group.
 - The CDC and FDA have multiple vaccine safety monitoring systems and continue to use them to screen for the risk of adverse events in real time.



One booster per year: Frequently asked questions

1. Why is the CDC considering recommending one COVID-19 booster per year for everyone?

The CDC hopes to simplify the COVID-19 booster timeline by recommending one shot per year, much like the current annual flu shot schedule. Some experts have raised the question of whether more vulnerable populations—such as older adults and immunocompromised people—will need more than one booster per year. In the most recent ACIP meeting, the CDC’s outside advisors determined that there is not enough evidence yet to recommend multiple boosters per year for any population.

2. Why are there still so many COVID-19 hospitalizations?

There are still [thousands of new COVID-19 hospitalizations](#) every day in the U.S. The majority of these hospitalizations continue to be “for” COVID-19 rather than “with.” This means that, in those cases, COVID-19 is the primary reason for hospitalization rather than a coincidental diagnosis. Underlying medical conditions are also extremely common among people hospitalized for COVID-19: Nearly all adults had at least one underlying condition, with the most common being chronic lung disease and cardiovascular disease. Over half of children and adolescents hospitalized for COVID-19 had at least one underlying condition, with asthma and prematurity being the most common. Waning immunity and low bivalent booster uptake could be reasons for the persistently high number of COVID-19 hospitalizations.

3. Do the benefits of bivalent boosters outweigh the risks for all age groups?

For adults, it’s especially clear that the benefits of bivalent boosters greatly outweigh the risks. For adolescents, who face a rare but real risk of myocarditis from mRNA vaccines, the most recent data shows that for every 1 million bivalent vaccines given to 12- to 17-year-olds, several COVID-19 hospitalizations, ICU admissions, and deaths are prevented. Meanwhile, there have been zero cases of myocarditis so far among adolescents who received a bivalent booster in a study of Pfizer booster safety data. The CDC will continue to monitor for adverse events in real time.