

**MSSNY Committee on Infectious Diseases  
Meeting  
April 28, 2022  
Via zoom**

**Present**

Joshua Cohen, MD Commissioner  
Janine Fogarty, MD Asst.  
Commissioner  
William Valenti, MD Chair  
Karen Myrie, MD, MPH, Co-Vice Chair  
Monica Sweeney, MD  
Helena Mirza, Alliance

Danielle Wales, MD  
Saiganesh Ravikumar, Student

**Excused**

James Braun, DO, Co-Vice-Chair

**Invited Guest**

Parag Mehta, MD, President-elect

**Absent**

Philip Kaplan, MD  
Carmen Rodriguez, MD  
Ryan Schlobach, MD

**Staff**

Pat Clancy, Sr. Vice  
President/Managing Director  
Maureen Ramirez, Administrative Asst.

**1. Welcome**

**2. Minutes February 10, 2022 – not acted on due to lack of quorum**

**3. MSSNY-DOH Vaccine Workgroup** – Dr. Valenti and Pat Clancy reported to the group and indicated that the link would be sent out to current members of the committee

**4. COVID 19 discussion -** Pat Clancy mentioned to Dr. Valenti, that she would like him to draft a message that can be sent out to MSSNY membership regarding therapeutics stating there seems to be extreme confusion regarding who qualifies to take them. People are calling their physicians when they test positive and ask them to prescribe the therapeutics. Dr. Valenti agreed saying there are many physicians that are unfamiliar with this process. If they won't do it, then send a patient to someone who will. Dr. Valenti said he has a problem with telling a patient you're not sick enough and don't treat them. The drugs are in very good supply. Pat Clancy suggested they bring Dr. Heslin from the NYSDOH in on it, so he can review what is being sent and offer input.

Dr. Sweeney asked if it was being sent only to committee members or the general membership. Pat Clancy indicated it would be mailed to the general MSSNY membership. MSSNY just had a committee member resign their membership on the committee because she suffers from long haul COVID. Dr. Valenti hopes some of that can be avoided with the proper treatment and solid information. The current guidelines are somewhat restrictive, they advise treatment to people with underlying conditions. How long are you willing to wait and what are the consequences of waiting vs. prompt treatment. We should be able to create the language that the drugs are widely available and until more data is available, in

addition to prioritizing people by underlying conditions and hospitalization risks, consider treatment for all. Physicians should be asked to check availability in their area thru the government portal. In areas where the drugs are widely available, treatment should be less restrictive.

Does anyone want to comment on drug treatment experiences?

Joshua Cohen -Moderna just asked for FDA approval for the vaccines for under the age of 6.

Bill Valenti -Children are not widely vaccinated. In addition, children do not qualify for antivirals unless you give them remdesivir and that can only be administered intravenously. We may also want to comment on preventing the spread within the household especially to the unvaccinated children.

Monica Sweeney – Many people are not getting the 1<sup>st</sup> booster even though they've received the 2 shots. Now, the 2<sup>nd</sup> booster is available. The message should encourage people to get the 1<sup>st</sup> booster shot. The message should be that you can avoid breakthrough infection with vaccine plus booster.

Pat Clancy commented: "we can do this in two parts, we can have one message on the therapeutics and another encouraging vaccination and boosters." It is the job of all physicians to make sure their patients are vaccinated and boosted.

Bill Valenti – then the question is "what do people need to get on board"? if we have physicians that are not vaccinating and boosting? The staffing shortage is a real issue.

Monica Sweeney – a very short video that could be on a continuous loop in the physician's office telling people why they should be vaccinated and boosted would be of great help.

**3) 2<sup>nd</sup> booster** – April 1, 2022 updated guidance from NYS DOH for people 12 years of age and older. Pat Clancy will include the NYS DOH updated guidance with the message on vaccines. The guidance indicates considering people 12 and older that have underlying conditions, however,

**Fall booster** – is there another booster coming in the fall?

Dr. Valenti believes what is coming in the fall is a new vaccine formulation that does a better job, more of a universal vaccine. The thing that might help with all of this is a better understanding of what the antibody tests mean.

Dr. Valenti explained that the committee was hoping to send out two letters to the MSSNY membership explaining the benefits of vaccination and antivirals. The DOH has indicated in discussion at the COVID Work Group meetings that clinical judgment also needs to be considered.

Pat Clancy suggested that clinical judgement needs to be a talking point in both messages.

Dr. Valenti pointed out that there may need for be a gentle reminder for those who have yet to receive the 1<sup>st</sup> booster – that there is need for catching up.

**Fall Vaccination** – It remains to be seen what the face of COVID will be in the fall.

Dr. Myrie - There are questions about at home tests and organizations are requiring a confirmatory PCR test too. So, if someone tests positive in a group congregant setting. The organization require a confirming PCR before the residents in congregant settings are isolated or quarantined.

Dr. Myre explained, if an adult working with the teens advises that they have a positive home test, her facility requires a PCR test and waits for that result before making any decisions regarding isolation and/or quarantine. In reference to the youth, the facility will isolate the residents and take a PCR test and wait for the results. If it's negative, they will be released from quarantine. Regarding the vaccine, the facility asks for parental consent. They require it for the booster as well.

Dr. Myrie – we often receive kids and if they're running a fever or have symptoms, we isolate. They are often not symptomatic for more than a day or two. They are then removed from isolation. The big piece is to get the parental approval while these kids are incarcerated. Often the parent will give permission and the youth will say "no, I'm not taking it".

Dr. Valenti – it's important that we get the proper representation in the workgroup. The congregant setting is very unique and comes with its own difficulties.

**COVID Therapeutics** – Dr. Valenti says he has learned that the drugs have become widely available well beyond the New York State's distribution list. community health centers and pharmacists are getting the drug, so there is access and there is no reason to restrict utilization. The federal government is moving to get more Paxlovid into pharmacies.

**Next Meeting: October 27, 2022**