



# CONTAGIOUS COMMENTS

## Department of Epidemiology

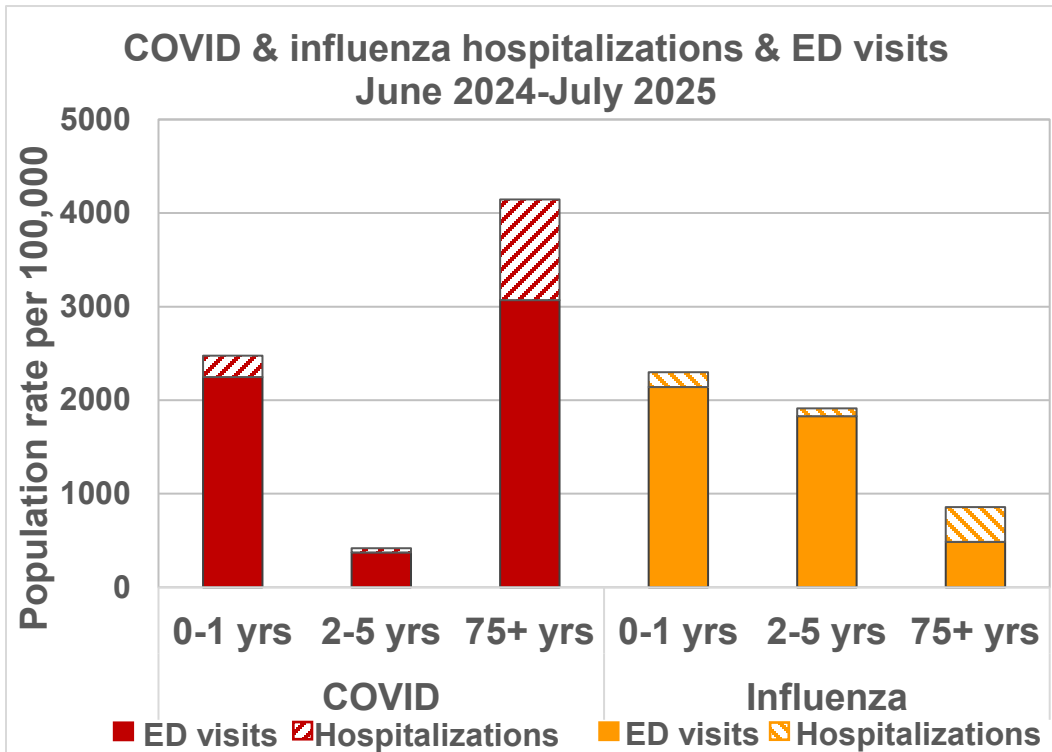
### The Vaccine-Preventable Diseases Report

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#### Highlights:

- Children <2 years of age remain at high risk for hospitalization with COVID and influenza, highlighting the importance of vaccination for seasonal respiratory diseases particularly for our youngest children.
- RSV hospitalization rates among Colorado children declined from 2023–24 to 2024–25, coinciding with the introduction of maternal RSV vaccination and infant monoclonal immunization.

#### Influenza and COVID:



During the 2024-25 influenza season 296 children died from influenza in the U.S.; this is the highest number since the Centers for Disease Control and Prevention (CDC) began tracking pediatric influenza deaths in 2004. Our current (2025-26) influenza season has been severe for children with over 143 pediatric influenza deaths reported by mid-April<sup>1</sup>, 7 of them in Colorado.

COVID hospitalizations in Colorado continued to decrease in the 2024-25 season compared to 2023-24.<sup>2</sup> Despite overall declines, rates of hospitalization and ED visits for COVID remained

high for our youngest and oldest Coloradans. Rates of emergency department (ED) visits for COVID and influenza were each over 2,000 per 100,000 for children <2 years. Young children were about three times as likely to visit the ED for influenza compared to older adults. Among adults 75 years and older, COVID hospitalizations and ED visits were more common than those for influenza in the 2024-25 season. For the 2024-25 season, Colorado children 2-5 years of age were hospitalized with COVID and influenza at similar rates and children <2 years were more likely to be hospitalized with COVID than influenza.

Historically, the CDC has recommended seasonal influenza and COVID vaccination for everyone over 6 months of age. Young children, older adults, pregnant people, and those with certain medical conditions are at higher risk for COVID and influenza complications and severe disease. People at higher risk include those with respiratory, cardiac, neurologic, hematologic, endocrine, metabolic, kidney, and liver diseases as well as people who are immunocompromised or living in nursing homes and long-term care facilities.

In January 2026, the U.S. Department of Health and Human Services (HHS) announced changes to the childhood immunization schedule. The updated HHS and CDC recommendations moved COVID and influenza vaccination from a

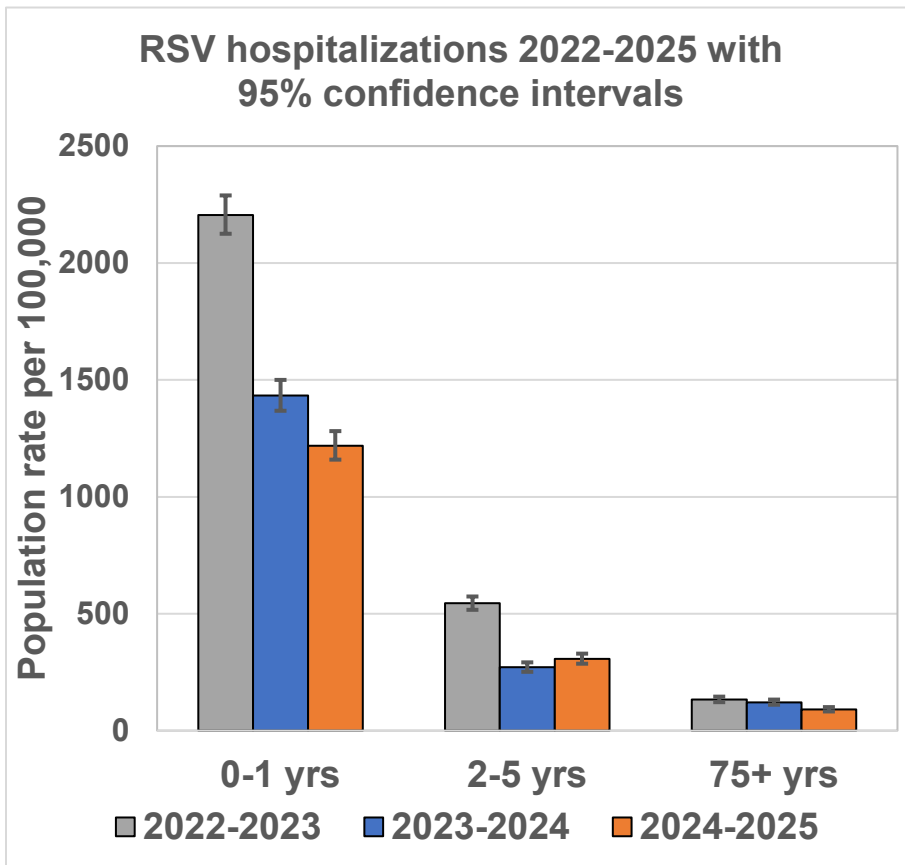
## The Vaccine-Preventable Diseases Report

routine recommendation to shared clinical decision making for all children.<sup>3</sup> These proposed changes have been paused after recent legal challenges.<sup>4</sup> Based on the risk of COVID and influenza disease in children and the safety of these vaccines, the American Academy of Pediatrics (AAP) and most other medical professional societies continue to recommend COVID vaccination for children <2 years of age and those with high-risk conditions and seasonal influenza vaccination for all children over 6 months of age. The American College of Obstetricians and Gynecologists continues to recommend COVID vaccination during pregnancy to protect patients and their babies.

In 2025, the FDA restricted COVID vaccination licensing and CDC changed their guidance to recommend COVID vaccination for adults of all ages through individual-based decision-making (rather than the prior universal recommendation for vaccination). There have not been any recent changes from CDC to seasonal influenza vaccination guidance for adults. The American Academy of Family Physicians and the American College of Physicians continue to recommend seasonal influenza and COVID vaccination for all adults. The Vaccine Integrity Project facilitated an updated evidence review of seasonal respiratory vaccinations<sup>5</sup> and has compiled guidance from medical societies here: <https://www.cidrap.umn.edu/vaccine-integrity-project/immunization-info>.

In the years since the beginning of the COVID pandemic in 2020, influenza vaccination uptake has dropped.<sup>6</sup> Confusion around federal vaccine guidance threatens to further depress uptake of COVID and influenza vaccination. At the end of February, 18% of adults and 9% of children across the U.S. had received an updated COVID vaccine during the 2025-26 season; 47% of adults and 48% of children had their influenza vaccine.<sup>7</sup> Across all age groups 31% of Coloradans had received an updated COVID vaccine and 13% had received an influenza vaccine by early April 2026.<sup>8</sup>

### Respiratory Syncytial Virus (RSV):



During the 2024-25 respiratory virus season there were fewer RSV hospitalizations in Colorado children <2 years of age and among adults 75 years and older compared to the prior season. The 2022-23 season was a historically abnormal and severe RSV season for young children whereas hospitalization rates in 2023-24 were more of a return to pre-COVID-pandemic levels. The availability of maternal immunization and long-acting monoclonal antibodies to prevent RSV in infants hold promise of blunting the impact of this disease on young children.

There was a slight increase in RSV hospitalizations for Colorado children 2-5 years during the 2024-25 season. Many clinicians have wondered whether passive immune protection from RSV during the first season may delay disease into subsequent seasons. Older children with larger airways have a decreased risk for severe RSV outcomes overall and at least

one study has shown no increased risk of severe RSV disease in the second season among children who received nirsevimab in their first year of life.<sup>9</sup> More data are needed to determine if shifting epidemiology of RSV infection and transmission may lead to changes in hospitalization trends across different pediatric age groups over time.

Both the CDC and AAP continue to recommend immunization to protect infants from RSV disease through either maternal vaccination during pregnancy or long-acting monoclonal antibody for infants 0-8 months of age during their

## The Vaccine-Preventable Diseases Report

first RSV season. Abrysvo® is the only RSV vaccine approved for pregnant people and should be given at 32-36 weeks gestation. For patients who have received RSV vaccine during a prior pregnancy, there is not currently a recommendation for repeat vaccination in a subsequent pregnancy. Infants born to a mother who did not receive RSV vaccine during pregnancy or who received RSV vaccine within 14 days prior to delivery should receive either nirsevimab or clesrovimab for RSV prevention.<sup>10</sup> Clesrovimab is a long-acting monoclonal antibody against RSV that became available for use during the 2025-26 season and is similar to nirsevimab. Clesrovimab is not approved for use during the second year of life. Children 8-19 months of age at high risk for RSV disease should receive nirsevimab during their second RSV season as well. Risk groups include children with chronic lung disease, severe immunocompromise, cystic fibrosis with severe features, and American Indian and Alaska Native children at higher risk due to social determinants of health. Though RSV was mentioned in the HHS announcement of vaccine schedule changes in January 2026, the CDC's risk-based recommendations for infant RSV immunization were not changed.

The CDC and medical professional societies<sup>5</sup> continue to recommend RSV vaccination for all adults  $\geq 75$  years of age and for those 60-74 years of age who are at increased risk of severe RSV disease. Risk factors for severe RSV disease among adults include cardiovascular, hematologic, lung, liver, metabolic, neurologic and renal disease, severe obesity, diabetes, and residence in a nursing home.

At the end of February, 43% of U.S. adults  $\geq 75$  years of age had received an RSV vaccine during the 2025-26 season.<sup>7</sup> In Colorado, 40% of adults  $\geq 75$  years had received an RSV vaccine by early April.<sup>8</sup> At the end of January, 40% of U.S. pregnant women 18-49 years of age had received an RSV vaccine<sup>11</sup> and 53% reported their infant had received RSV monoclonal antibody during the 2025-26 season.<sup>12</sup> With broader availability and improved uptake of these prevention strategies, we may see further decreases in RSV hospitalizations in infants and older adults this season and in the future.

### Tracking Respiratory Viral Disease Activity:

You can follow respiratory disease activity in Colorado in real time using data from the Colorado Department of Health and Environment (CDPHE) here: <https://cdphe.colorado.gov/viral-respiratory-diseases-report>. Children's Hospital Colorado also shares data from our clinical microbiology laboratory in Bug Watch. Sign up to receive these updates by email or find them posted here: <https://www.childrenscolorado.org/health-professionals/publications/>.

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VPD by age group	July 2023-June 2024				July 2024-June 2025			
	Hospitalized Cases	Rate per 100,000	ED Cases	Rate per 100,000	Hospitalized Cases	Rate per 100,000	ED Cases	Rate per 100,000
<b>COVID</b>	15703	264.9	94069	1586.7	11988	200.7	66758	1117.6
<b>0-1</b>	444	353.4	4424	3521.3	287	228.5	2823	2247.2
<b>2-5</b>	176	68.9	1384	541.7	115	45.1	951	372.6
<b>6-19</b>	306	29.7	4254	412.7	223	21.8	2630	256.9
<b>20-39</b>	2658	153.2	18867	1087.6	1825	104.6	12241	701.5
<b>40-59</b>	2496	170.0	24551	1672.0	1944	130.9	17049	1148.4
<b>60-79</b>	6038	541.1	31758	2845.9	4688	413.5	24268	2140.4
<b>80+</b>	3585	1813.8	8831	4468.0	2906	1415.3	6796	3309.8
<b>Influenza</b>	4070	68.7	33561	566.1	5137	86.0	33361	558.5
<b>0-1</b>	181	144.1	2328	1853.0	199	158.4	2689	2140.6
<b>2-5</b>	188	73.6	4381	1714.6	213	83.5	4668	1829.0
<b>6-19</b>	322	31.2	9282	900.5	301	29.4	8477	828.0
<b>20-39</b>	520	30.0	8464	487.9	520	29.8	7337	420.5
<b>40-59</b>	740	50.4	5048	343.8	918	61.8	4944	333.0
<b>60-79</b>	1439	129.0	3316	297.2	1983	174.9	4087	360.5
<b>80+</b>	680	344.0	742	375.4	1003	488.5	1159	564.5
<b>RSV</b>	3827	64.6	9477	159.9	3436	57.5	8317	139.2
<b>0-1</b>	1800	1432.7	4075	3243.5	1531	1218.7	3279	2610.2
<b>2-5</b>	693	271.2	2256	882.9	784	307.2	2303	902.4
<b>6-19</b>	118	11.4	603	58.5	111	10.8	708	69.2
<b>20-39</b>	115	6.6	661	38.1	96	5.5	577	33.1
<b>40-59</b>	214	14.6	654	44.5	220	14.8	513	34.6
<b>60-79</b>	569	51.0	902	80.8	446	39.3	682	60.2
<b>80+</b>	318	160.9	326	164.9	248	120.8	255	124.2

**Table 1:** Colorado Emergency Department Visits and Hospitalizations by Age Group for COVID, Influenza, and RSV during the 2023-24 and 2024-25 Respiratory Seasons.

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