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SPECIAL ARTICLE

COVID-19 Vaccine Distribution and Allocation: What Physicians Need to Know

As of mid-January 2021, U.S. state and local governments had received nearly 40 million doses of COVID-19 vaccine. Unfortunately, only about half of these doses have made their way into people, demonstrating that the development of safe, effective vaccines is only the first of many steps toward vaccinating enough people to end the COVID-19 pandemic. Many physicians find the slow pace of vaccination frustrating and are eager to contribute to efforts to assure widespread vaccination. Some physicians find themselves in a confusing maze of bureaucracy when seeking vaccine for themselves and their nonphysician staff. Physicians are also fielding a deluge of vaccine questions from their patients, relatives, friends, and neighbors and need information to provide good answers.

To prepare physicians and others to engage in the vaccination effort, Annals of Internal Medicine and the American College of Physicians has hosted a series of virtual programs on COVID-19 vaccine (1, 2). The third of these programs, held on 22 January 2021, focused on the timely and very practical issues of vaccine distribution and allocation. The Centers for Disease Control and Prevention (CDC), retail pharmacies, state health departments, and health systems each have essential roles in vaccine distribution and allocation. Panelists included Dr. Amanda Cohn (Chief Medical Officer of the National Center for Immunization and Respiratory Diseases and Executive Secretary of the CDC Advisory Committee on Immunization Practices(CDC), Dr. David G. Fairchild (Chief Medical Officer of CVS MinuteClinic), Dr. Mark Levine (Commissioner of Health, State of Vermont), and Dr. Wayne J. Riley (President, SUNY Downstate Health Sciences University). Dr. Jason Goldman, the ACP Liaison to the CDC Advisory Committee on Immunization Practices and a general internist in Florida, moderated a lively discussion during which he posed questions to the panelists submitted by forum attendees.

A successful U.S. vaccination program requires many entities to be pulling toward the same goal-vaccination of enough people to achieve community-level immunity as quickly as possible. Major challenges include matching supply and demand at the local level, confusing and inconsistent prioritization criteria, misinformation about vaccine safety and effectiveness, logistical challenges that limit the types of settings with the capacity to efficiently administer vaccinations, and vaccine registries that lack interoperability. In addition, improvements to the public health system and addressing health inequities are vital, not only to address the current pandemic, but to address ongoing health issues and the next pandemics to come (3). The panelists emphasized that simplicity, transparency, collaboration, accessibility, and fairness are fundamental to the vaccination program's ultimate success. View the forum in the video that accompanies this article (available at Annals.org) to hear the panelists' perspectives on how to best incorporate these principles as the COVID-19 vaccination effort moves forward.

Distribution and allocation of COVID-19 vaccine is a complex enterprise launched during stressful times within pandemic-weary health care and public health systems. While much attention is given to the stumbles encountered during the initial weeks of vaccination, we must not lose sight of the tremendous achievement of going from the first identified U.S. case of infection with a deadly, novel coronavirus to the availability of tens of millions doses of 2 highly effective vaccines (4). Rather than seeing the stumbles during these first weeks of vaccination as reason for despair, we must use them as opportunities to learn how to do things better during both the current and future public health crises.

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See also:

Web-Only Video: COVID-19 Vaccine Forum III CME/MOC activity

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