# A Current View of SARS-CoV-2 Vaccine Policies Amongst Pediatric Renal Transplant Centers and Relationships to State Policy

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#### INTRODUCTION

- First year mortality rates among children with incident ESRD are lowest after renal transplantation.
- Eligible candidates typically receive standard immunizations leading up to transplant, with instructions to avoid live virus vaccines postoperatively.
- Since first approval for emergency use in adolescents in May 2021, SARS-CoV-2 vaccination recommendations have expanded to include children down to 6 months of age.
- Despite limited data, two available vaccines have demonstrated similar effectiveness and favorable adverse effect profiles to those approved for adults. However, skepticism remains and has led to significant heterogeneity in vaccination practices, especially amongst transplant centers.

### **METHODS**

- Identification of each state's Covid-19 vaccination policies using most recent data (August 2022) from National Conference of State Legislatures<sup>©</sup> and National Academy of State Health Policy<sup>©</sup>
- Using the Scientific Registry of Transplant Recipients, 100 US Transplant Centers that performed at least one pediatric renal transplant (included deceased and living donors) between January-December 2021 were contacted and interviewed by phone

COVID-19 vaccination polices are **not standardized** across pediatric renal transplant centers, and state policy is not the primary influence.

### **RESULTS**

- · Of the 36 centers that responded
- 23 recommend vaccination (63.9%)
- 7 require vaccination prior to listing (19.4%)
- 6 require vaccination prior to transplant, but allow inactive listing before completion (16.7%)
- 17 states have legislation in place that prohibits proof of vaccination status for access to government services
- 65% of centers that do not require vaccination are located outside the aforementioned states

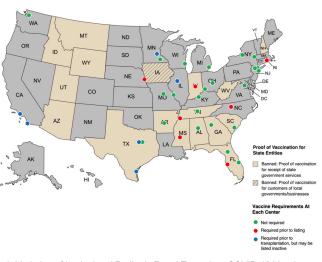


Figure 1: Variation of Institutional Pediatric Renal Transplant COVID-19 Vaccine Policies and the Relationship to State Legislation Banning Proof of Vaccination.

## **CONCLUSIONS**

Current pediatric renal transplant center COVID-19 vaccination policies vary significantly throughout the country, without a clear dominant influence. This lack of standard vaccination practice may create inequities and excess mortality risks in children who are unable to be listed and transplanted expeditiously.

