News From the HUB

Central Ohio Pathways HUB

639 Active Clients

3,107 Total Clients Served

21,990 Pathways Initiated

16,163 Pathways Completed!!

Care Coordination in the #CentralOhioHUB
Partners in Health Outlines Updates on COVID Boosters

The following is information from PIH-US on Boosters and Third Doses from their "ADDITIONAL VACCINE DOSES KEY PIH-US TALKING POINTS & FAQ" Informational Document. A link to the full document that contains more information can be found after the info below.

What is a booster shot and why might it be needed?
A booster shot is an additional dose of a vaccine given after the initial recommended dose. Boosters are typically offered for populations whose immunity from those initial doses has started to naturally wane, or whose risk of severe disease is highest, as an additional layer of protection. For most people under age 65, the vaccines offered in the U.S. provide effective protection against severe disease, hospitalizations, and death.

Who is eligible to receive a booster shot?
The FDA recently authorized booster shots for certain groups of people who received their second dose of the Pfizer or Moderna COVID-19 vaccine at least six months ago, and for anyone who received the J&J vaccine at least two months ago. Those who receive the Pfizer or J&J booster will receive the same/full original dose, while those who receive the Moderna booster will receive half of the original dose as a booster.

Anyone who received an initial J&J dose is eligible for a booster dose, while the CDC recommends the following eligibility for an additional booster dose of the Pfizer or Moderna vaccine:

- Adults 65+ and residents of long-term care facilities should receive a booster dose
- Adults 50-64 with underlying medical conditions should receive a booster dose
- People 18-64 with underlying medical conditions may receive a booster dose, based on individual risks and benefits
- People 18-64 who are at increased risk of COVID-19 exposure and transmission because of occupational or institutional settings may receive a booster shot, based on individual risks and benefits (this currently includes health care workers, teachers, day care workers, grocery staff, staff of congregate settings, etc.)

People who are immunocompromised who received either the Pfizer or Moderna vaccines (for first and second doses) are also eligible for a third dose of the shot they received, at least four weeks after their second dose. The third shot for these patients who suffer from compromised immune systems and need an additional layer of protection is not technically considered a “booster,” but rather as part of their recommended vaccine series. At this time, there is not enough data to determine the effectiveness of the J&J vaccine for those who are immunocompromised with an additional dose of the J&J vaccine, and thus the FDA’s EUA amendment only applies to mRNA COVID-19 vaccines for this population.

If you are not eligible for a booster shot, it is recommended that you adhere to CDC and local mitigation guidance for masking and social distancing.

What is a third dose? Is it different than a booster?
In short, a third dose is for people who are severely immunocompromised to complete their initial series and a booster is an additional dose recommended for some members of the general public to “boost” their immunity
Vaccine effectiveness for those who are immunocompromised is significantly lower when compared to those who are not immunocompromised. The third shot for patients who suffer from compromised immune systems and need an additional layer of protection is not technically considered a “booster,” but rather as part of their recommended vaccine series. This is known as a third dose. People who are severely immunocompromised who received either the Pfizer or Moderna vaccines (for first and second doses) are eligible for a third dose of the shot they received, at least four weeks after their second dose.

A booster shot is an additional dose of a vaccine given after the initial recommended dose. Boosters are typically offered for populations whose immunity from those initial doses has started to naturally wane, or whose risk of severe disease is highest, as an additional layer of protection. For most people under age 65, the vaccines offered in the U.S. provide effective protection against severe disease, hospitalizations, and death.
non-melanoma skin cancer, and it is the second leading cause of cancer death. This year, the American Cancer Society estimates that more than 281,550 new cases of invasive breast cancer and 49,290 new cases of non-invasive breast cancer will be diagnosed in women in the United States. While there has been an overall 40 percent decline in breast cancer deaths over the last 30 years—thanks to gains in awareness, early diagnosis, and treatment—there is a persistent mortality gap between Black women and white women.

Data compiled by the American Cancer Society highlight the need to continue working toward closing this devastating gap. Previously, Black women were found to have a slightly lower incidence rate of breast cancer. This is no longer the case: The incidence rate for Black women is close to that of white women. However, the mortality rates are markedly different, with Black women having a 40 percent higher death rate from breast cancer. Among women under 50, the disparity is even greater: The mortality rate among young Black women is double that of young white women. It is clear that the advances in treatment that have dramatically reduced breast cancer mortality overall have not equally benefitted all groups.

HCGC INTERVIEW WITH NURTURE COLUMBUS

HCGC’s Communications Manager, McKenzie Carter recently interviewed Allyson Wessells, a Lactation Consultant to share Allyson’s insight on how access to healthcare, equity, and socioeconomic and racial health disparities connect to breast health.

McKenzie Carter: Hi, Allyson. Thank you for taking the time to contribute your thoughts to this discussion around breast health during Breast Cancer Awareness month. We thought it would be interesting and relevant to take a look at what you do as a Board Certified Lactation Consultant (IBCLC) and relate it to the overall health of the women you serve. Tell us a little bit about yourself and your company.

Allyson Wessells: Thank you for inviting me to share. I am a physical therapist and IBCLC with Nurture Columbus, a central Ohio business that I founded with my partner Julie Oberholzer. I am also an active member of the Ohio Lactation Consultant Association (OLCA) and serve as its president through June of this year. Nurture Columbus specializes in prenatal and postpartum lactation and developmental support and education. We support families on all things relating to infant feeding, so that includes: breastfeeding, chestfeeding, bottle feeding, pumping, and weaning.

MC: Such important, needed services in our community and everywhere. Can you explain how breastfeeding relates to breast health and cancer prevention?

AW: Breast cancer is the most commonly diagnosed cancer among women in the United States. So, understanding the function of the breast and its relation to disease prevention is equally important. The breast can be considered an organ of the immune system, uniquely transforming beyond pregnancy to nourish a new human with vital nutrients and antibodies, among thousands of other protective factors. Longer duration of breastfeeding is associated with optimizing a child’s physical and mental health for a lifetime ahead while also reducing a mother’s risk for many diseases, including breast cancer. Awareness of human milk as a species specific nourishment that equips our immune systems to better defend our bodies is something everyone should promote. Mothers who choose to breastfeed should have easy access to skilled lactation care and community support proven to help meet breastfeeding goals, improve maternal and infant health and promote overall health.
MC: Yes, accessibility is so important, so it's inspiring to hear that Nurture Columbus offers in-home lactation consulting and in-home physical therapy. How have you seen Nurture Columbus grow so far?

AW: Private health plan coverage for Nurture Columbus IBCLCs has grown the volume of families accessing our services and achieving their goals such that the Nurture team is now expanding. It has been such an inspiration to be able to do this work with families in central Ohio, but we know that there are so many families that we cannot access due to equity issues in access and payment.

MC: What are your hopes for Nurture Columbus in the future in regards to access and payment equity for services provided by an IBCLC?

AW: Reimbursement is important to sustaining credible, evidence-based IBCLC care, so we hope public health plan reimbursement becomes proportional so the IBCLC field can grow across diverse communities and more equitably fulfill a mission to reduce socioeconomic and racial health disparities, including breast cancer rates, through better access to care that improves breastfeeding rates.

MC: Thank you for the work you and your colleagues do in the community to support new families and their babies. We look forward to continuing to see Nurture Columbus make an impact in Central Ohio!

References

More About Allyson
Allyson Wessells completed a Bachelor’s degree in Biology from Ohio University in 1997, and a Master of Physical Therapy degree from Northwestern University in 1999. After welcoming her first child in 2007, she became a La Leche League leader. Through this role she discovered how much she loves working with new families as they learn about breastfeeding, and that a gap in lactation care exists within our healthcare system. She pursued specialist certification, becoming an International Board Certified Lactation Consultant (IBCLC) in 2014. As a physical therapist and a lactation consultant, she values helping others understand how our bodies move for optimal health. Allyson can also be found advocating for families, and educating lactation and medical professionals throughout the city. She served as President for the Ohio Lactation Consultant Association (OLCA) from 2019-2021, and continues to be an active member of OLCA as well as the Ohio and American Physical Therapy Associations. Special interests include assessing and treating conditions such as torticollis and tongue tie, as well as identifying and improving infant developmental challenges that can impact breastfeeding.
CHW Profile Project

This month, HCGC continued their Community Health Worker Profile Project, interviewing various Central Ohio Pathways HUB CHWs on their experiences and successes.

This month, we interviewed Tiara Shields, a Central Ohio Pathways HUB CHW at Physicians CareConnection. Tiara shared her experiences as a CHW with the COVID-19 pandemic and COVID-19 vaccine efforts.

ACEs Conference

Jenelle Hoseus, CEO of the Central Ohio Pathways HUB, and Dr. Tanikka Price, Education Director of the Central Ohio Pathways HUB, presented on The Effects of Adverse Childhood Experiences (ACEs) on Social Determinants of Health and the Central Ohio Pathways HUB’s Response. In their presentation, they described ACEs and social determinants of health, and how ACEs contribute to social determinants of health. They also presented on how the Central Ohio Pathways HUB model responds to social determinants of health, thereby addressing the lasting effects of ACEs.

NEXT CHW MONTHLY MEETING

PARTNER NEWS AND EVENTS

OSU: Addressing Inequities Through the Flu
CMA Continues Opposition in Latest Attempt to Limit Vaccine Mandates

National Lead Poisoning Prevention Week and How State and Local Current Prevention Efforts Provide Resources for Families in Poverty

Ohio Health Policy News: Children of Color More Likely to Die from Flu

Ohio Domestic Violence Network: Ohio Domestic Violence Fatalities

City of Columbus Announces Nearly $9 Million in Support for Central Ohio Shelters

Columbus Dispatch: Local Latina Professionals Discuss Importance of Latina Equal Pay Day

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Monthly Meeting Resources

Following each Monthly Meeting and Regional Learning Session, the agenda, speaker information, slide deck and other relevant resources are uploaded to the HCGC website for your reference.

View Resources

For a Calendar of Events visit: www.hcgc.org/meetings--events

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