

To: [REDACTED] 5.1.2e [REDACTED] 5.1.2e @rivm.nl]; [REDACTED] 5.1.2e [REDACTED] 5.1.2e @rivm.nl]
From: [REDACTED] 5.1.2e
Sent: Wed 1/27/2021 7:51:30 AM
Subject: RE: vaccination plan report: 60-69 year olds
Received: Wed 1/27/2021 7:51:31 AM
[vaccination plan 60 plus report](#) [REDACTED] 5.1.2e docx

Attached my comments.

I have the same worries about the FOI – and hence the conclusion.
 Given that it goes to zero it seems it is assumed that the full FOI comes from this age group.

Best wishes,

[REDACTED] 5.1.2e

From: [REDACTED] 5.1.2e <[REDACTED] 5.1.2e @rivm.nl>
Sent: 27 January 2021 08:49
To: [REDACTED] 5.1.2e <[REDACTED] 5.1.2e @rivm.nl>; [REDACTED] 5.1.2e <[REDACTED] 5.1.2e @rivm.nl>
Subject: RE: vaccination plan report: 60-69 year olds

Hi [REDACTED] 5.1.2e

Good to see the 60-64 as the group that might be vaccinated with AZ.

A few questions about the report:

- is it possible to include a 30% VE option for AZ vaccine, as this was mentioned by the Health Council?
- what is the mode of vaccine action assumed in the SEIR model: is it leaky (the vaccine acts by reducing force of infection)? Or all or nothing (vaccine acts by moving person from susceptible to the immune compartment)?
- the hospital admissions are calculated using the duration of hospital stay. That is not correct. Is the quantity presented here the number of occupied hospital beds?
- is the incidence that is presented here incidence of infection? Or incidence of reported cases? Is it per day or per week?
- Table 2: cumulative over what period? February till August?
- Figure 1: incidence per day, per week?

Is it possible to look into these questions this morning?

Furthermore, I just realized that the rapid decline towards a zero incidence can be considered as an artefact of focusing only at the 60-69 year olds. Perhaps it might help to provide also a simulation where the force of infection is held constant throughout the simulations. Do you think that is feasible at this stage?

Best wishes

[REDACTED] 5.1.2e

From: [REDACTED] 5.1.2e <[REDACTED] 5.1.2e @rivm.nl>
Sent: dinsdag 26 januari 2021 20:27
To: [REDACTED] 5.1.2e <[REDACTED] 5.1.2e @rivm.nl>; [REDACTED] 5.1.2e <[REDACTED] 5.1.2e @rivm.nl>
Subject: RE: vaccination plan report: 60-69 year olds

Thanks! Looks good

Best

[REDACTED] 5.1.2e

From: [REDACTED] 5.1.2e <[REDACTED] 5.1.2e @rivm.nl>
Date: 26 January 2021 at 18:31:42 CET
To: [REDACTED] 5.1.2e <[REDACTED] 5.1.2e @rivm.nl>; [REDACTED] 5.1.2e <[REDACTED] 5.1.2e @rivm.nl>
Subject: RE: vaccination plan report: 60-69 year olds

Hi both,

Here's an updated version of the report with the split strategies (65-69 receive Pfizer and the vaccine is varied in 60-64 year olds).

Best,

[REDACTED] 5.1.2e

From: 5.1.2e <5.1.2e@rivm.nl>
Sent: dinsdag 26 januari 2021 15:56
To: 5.1.2e <5.1.2e@rivm.nl>; 5.1.2e <5.1.2e@rivm.nl>
Subject: RE: vaccination plan report: 60-69 year olds

Hi 5.1.2e

Thanks, it looks very good. We don't have a fixed format for reporting to the ministry and the Health Council. It will be good to explicitly divide the age group into 60-64 and 65-69 year olds, as it is now very unlikely that AZ will be licensed for 65+.

Best

5.1.2e

From: 5.1.2e <5.1.2e@rivm.nl>
Sent: dinsdag 26 januari 2021 13:33
To: 5.1.2e <5.1.2e@rivm.nl>; 5.1.2e <5.1.2e@rivm.nl>
Subject: vaccination plan report: 60-69 year olds

Hi 5.1.2e

I've drafted a short report on the modelling work I've been doing to answer the question of whether to delay vaccination in the 60-69 year olds. Please feel free to edit/add to the report. This is my first report for the ministry, so I'm not sure of the format. I wanted to get this to you both early, so that there is still time to do additional scenarios before we finalise the draft tomorrow to send to others. Please let me know if presenting results from other scenarios (such as varying the time between the start of AstraZeneca and Pfizer vaccines) would be useful. Frankly, in light of the new data on the AstraZeneca vaccine, I think the answer to this question is now simple: we need to wait to vaccinate this population with the Pfizer vaccine.

Best,

5.1.2e

5.1.2e, 5.1.2e

5.1.2e

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