Research on second boosters

Good infection controls work for healthcare workers

Numerous studies show that with effective infection control measures in the workplace healthcare worker (HCW) infections with SARS CoV-2 are more likely to occur outside of the workplace. (1, 2)

Benefits mostly those at highest risk from infection

For people at highest risk of severe breakthrough disease after 3 doses (older adults and those with significant comorbidities) there is evidence that a fourth dose strengthens and extends the duration of protection against severe disease. In younger people who are in good health, additional benefit from a fourth dose is measurable but limited and short term against infection and unknown for severe disease. (3-5)

Safety and adverse events

Although there are limited data on adverse events following a second booster, it appears to be safe and well tolerated. Adverse events include pain and fatigue, but these are generally mild. (6) The risk of myocarditis and pericarditis is lower after the first booster than after primary dose 2 and this is likely to be also the case for second boosters. (7,8) It is important to note experience to date with second boosters is mainly in older age groups.

Overseas guidance regarding healthcare workers and second boosters

A fourth dose is approved in healthcare workers in Israel (9) but in most other countries, second boosters are recommended only for those over a certain age or who have substantially higher risk of severe outcomes from SARS CoV -2 infection, especially immunocompromise.

Australia's guidelines specifically state: "Healthy people aged 16 to 64 years, who do not have a risk factor for severe COVID-19, are not recommended to receive an additional winter booster dose at this time, as their risk of severe illness after their first booster dose is likely to remain very low. This includes healthy people from occupational groups such as healthcare workers." (10)

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