

Second booster vaccination against COVID-19

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Executive summary

Health Council of the Netherlands



As of November 2021, a COVID-19 booster vaccination is being offered to all persons over the age of 18. Vaccination offers protection against illness caused by infection with the SARS-CoV-2 virus. However, the protection level decreases over time. A booster vaccination after the initial set of vaccinations restores this protection level, albeit temporarily. The Minister of Health, Welfare and Sport has asked the Health Council of the Netherlands to investigate the usefulness and need for a second booster vaccination against COVID-19.

The Sub-Committee on COVID-19 Vaccinations has studied this request in the context of the current epidemiological situation and the latest scientific knowledge.

At this time, the Committee sees no need to offer a second booster vaccination to all adults. The Omicron variant of the SARS-CoV-2 virus is less pathogenic than earlier variants and the

wave of infections is expected to peter out.

For these reasons, the expected health benefits of a second booster vaccination for the general population are minimal.

That being said, the Committee recommends offering a second booster vaccination to the most vulnerable groups to err on the side of caution. The most vulnerable groups are persons aged 70 or over, nursing home residents, adults with Down syndrome and adults with severe immune disorders. They are at greater risk of serious illness upon infection. In addition, the protection offered by the initial booster vaccination has decreased the most among persons who received one earlier in the booster campaign.

There remains some uncertainty about the progression of the Omicron wave. For most age groups, the number of infections appears to

have peaked. However, the number of infections is still rising among persons aged 70 and over. The number of hospitalisations is expected to peak in late February. The imminent easing of coronavirus restrictions is expected to lead to a brief increase in the number of infections.

Among the most vulnerable groups, this can lead to severe COVID-19 leading to hospitalisation or death. In the view of the Committee, the limited available data on the effectiveness of the second booster vaccination suggest that a second booster vaccination would offer these vulnerable groups additional protection against the risk of hospitalisation or death. An alternative to offer the most vulnerable groups the necessary protection is not available in the short term. According to the Committee, the choice not to offer a second booster vaccination at this time may cause harm to health that outweighs the risk of the (usually



mild) side effects of the vaccination for these groups.

report with preliminary suggestions for the scope of any additional COVID-19 booster vaccinations in the coming months.

As for the first booster vaccination, the Committee recommends using an mRNA vaccine to be administered at least three months after the previous booster vaccination. For specific groups of patients with severe immune disorder, it would be up to medical specialists jointly to determine the optimal vaccination schedule.

The above recommendations are valid for the short term. Although the current wave of infections appears to have peaked, the Committee recommends staying alert to an unforeseen progression of the wave. A new and unforeseen progression of the wave or the risk of serious infection may give cause to expand the scope of the recommendations to specific groups of persons aged under 70. To this end, the Committee will conduct an evaluation in the second half of March. Additionally, the Committee will prepare a follow-up advisory



The Health Council of the Netherlands, established in 1902, is an independent scientific advisory body. Its remit is “to advise the government and Parliament on the current level of knowledge with respect to public health issues and health (services) research...” (Section 22, Health Act).

The Health Council receives most requests for advice from the Ministers of Health, Welfare and Sport, Infrastructure and Water Management, Social Affairs and Employment, and Agriculture, Nature and Food Quality. The Council can publish advisory reports on its own initiative. It usually does this in order to ask attention for developments or trends that are thought to be relevant to government policy.

Most Health Council reports are prepared by multidisciplinary committees of Dutch or, sometimes, foreign experts, appointed in a personal capacity. The reports are available to the public.

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