My name is Dr. Albert Faro, and I am the Vice President of Clinical Affairs at the Cystic Fibrosis Foundation. On behalf of the Foundation, thank you for this opportunity to provide comments to the Advisory Committee on Immunization Practices regarding development and allocation of COVID-19 vaccines.

The CF Foundation is a national organization actively engaged in the research and development of new therapies for cystic fibrosis – a rare, life-threatening genetic disease that affects over 30,000 people in the US.

The buildup of thick, sticky mucus in the lungs characteristic of the disease makes people with CF particularly prone to chronic airway infections punctuated by pulmonary exacerbations – events associated with morbidity and mortality in people with CF. A significant proportion of pulmonary exacerbations are triggered by respiratory viral infections. With continued progression of the disease, individuals with CF and advanced lung disease may pursue lung transplantation.

Due to the known risks posed by respiratory viral infections, the unique dangers of the SARS-CoV-2 virus, and the multi-system manifestations of CF, some people with CF – such as those with advanced disease or who are post-transplant and therefore immunocompromised – should be considered at high risk for poor outcomes from COVID-19 infection.

The strongest evidence to date on the dangers of COVID-19 for people with CF comes from a forthcoming global analysis of 181 COVID-19 cases among people with CF. From that analysis, it appears CF patients with advanced lung disease and those that are post-lung transplantation are at risk of severe outcomes, including death.

We therefore urge the Advisory Committee to consider information beyond the CDC’s list of comorbid conditions to inform prioritization determinations, which may mischaracterize the true risk for some rare disease populations like CF.

We further urge the Advisory Committee to give equal priority to anyone with a condition that puts them at high risk for severe disease from COVID-19 instead of adopting the National Academy of Medicine’s recommendation to first prioritize people with multiple comorbid conditions for access to a vaccine. A focus that relies on multiple conditions neglects other indications of disease severity and vulnerability. We believe that scenario inappropriately disadvantages someone whose underlying disease condition is advanced or severe. This segment of the population should be prioritized for early access to a vaccine and includes patients with CF with advanced disease or who are post-transplant.

Thank you again for your attention and consideration of people with CF as you tackle these critical issues.