



The webinar will begin at 5 p.m. If you run into technical difficulties, please email Javier.rincon@halton.ca

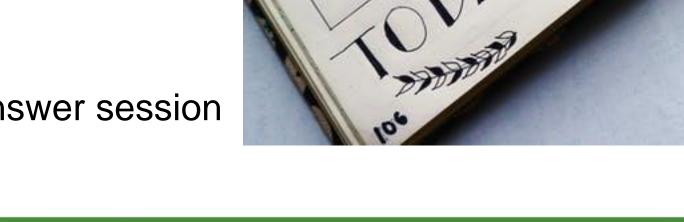






Agenda

- Update on COVID-19 vaccination in Halton
- Adverse Events Following Immunization (AEFIs)
 - What they are
 - How to report
 - Specific AEFIs
- Questions and Answer session











NEW COVID-19 LEARNING ACTIVITY AVAILABLE IN MAINPRO+®

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If you have questions, please contact the Mainpro+ team at 1-800-387-6197 ext. 560 or mainprocredits@cfpc.ca.

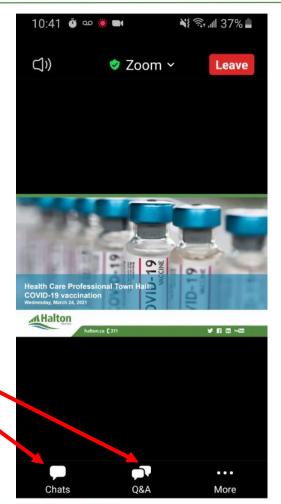


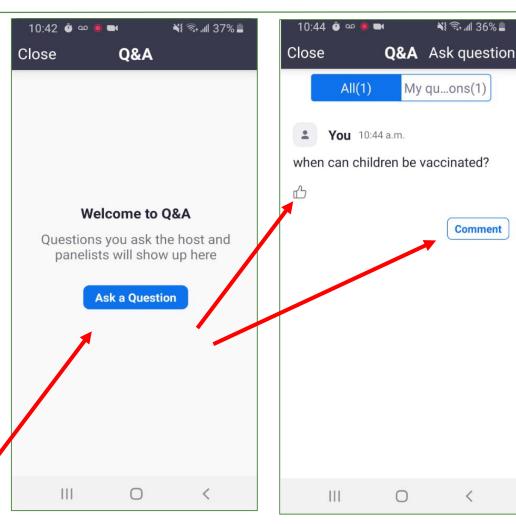


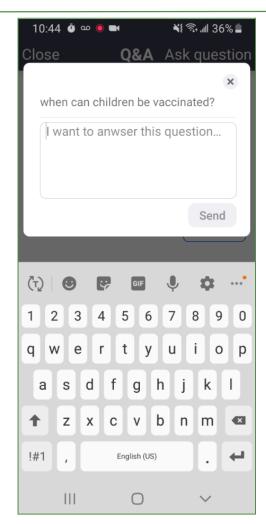




Housekeeping









Use the Q&A function to ask, vote or comment on a question









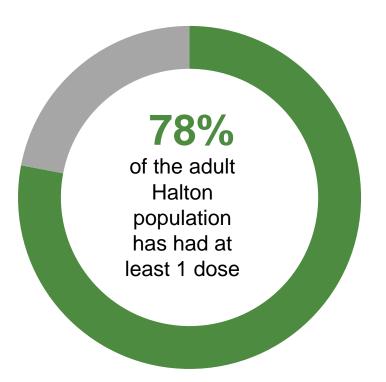


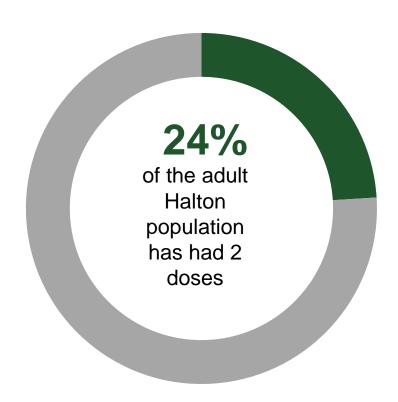




COVID-19 Vaccination coverage

As of end of day on June 22, 2021:



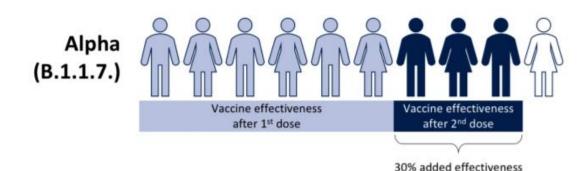




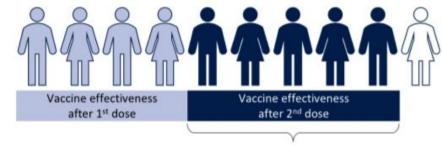


COVID-19 Delta variant

- Delta variant will likely be the dominant variant by early summer
- Vaccine effectiveness against the Delta variant is improved by two doses
- Halton is part of a provincial strategy to target Delta hotspots with accelerated two-dose coverage
- Pfizer and Moderna are both mRNA vaccines are interchangeable
 - It is more important to get fully vaccinated than wait for a specific product



Delta (B.1.617.2)



50% added effectiveness

Source: Estimated from Bernal et al, BMJ 2021; Bernal et al, medRxiv 2021

SOURCE: Ontario Science Advisory Table, Update on COVID-19 Projections, June 10, 2021









Continue public health measures



Get fully vaccinated against
COVID-19



Stay home and get tested if you are not feeling well



Wash your hands with soap and water



Maintain 2 metres **physical distance** from others

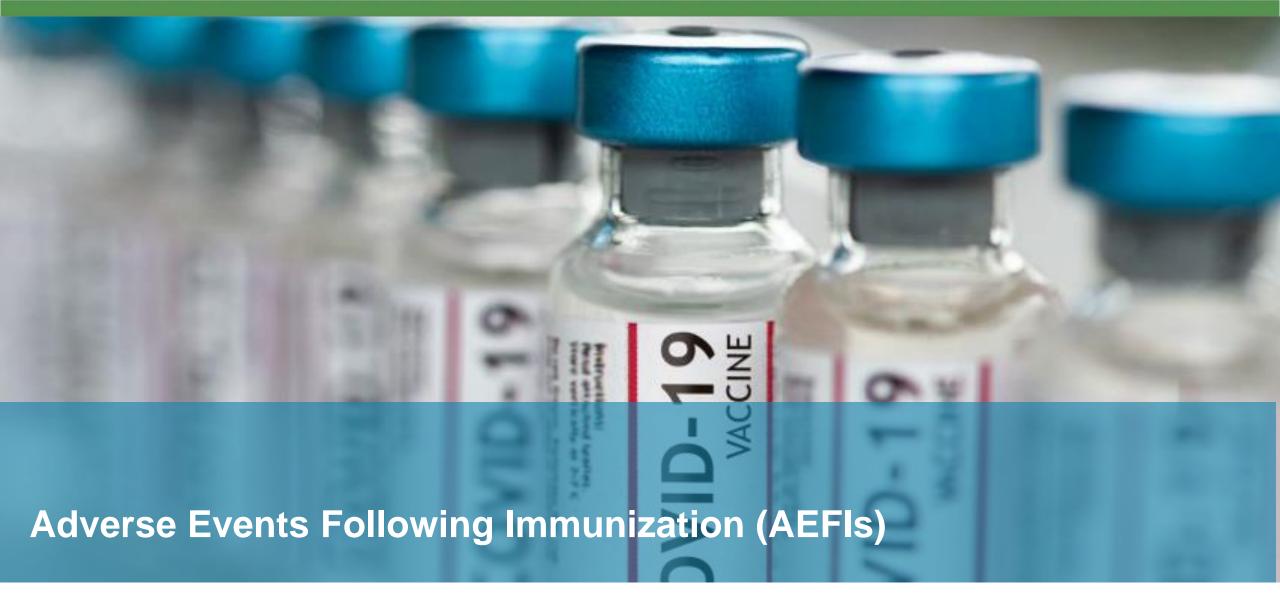


Wear a mask when physical distancing is not possible

















What is an AEFI? Why do we track them?

- An adverse event following immunization (AEFI):
 - an unwanted or unexpected health effect that happens after someone receives a vaccine
 - may or may not be caused by the vaccine
- Part of the local, provincial, national and international surveillance system to monitor vaccine safety:
 - Generate and test hypotheses about AEFIs, especially in specific populations which may have been excluded or under-represented from controlled studies
 - Rapidly identify any problems with specific vaccine lots/brands
 - Estimate rates of AEFIs in real world settings





What is not an AEFI?

- Excludes side effects:
 - Known to be associated with vaccine
 - Typically mild and short-term
 - Events clearly attributed to other causes
- Excludes:
 - fever that is not accompanied by any other symptoms
 - injection site reactions that last less than 4 days
 - vasovagal syncope (without injury)
 - events that are clearly attributed to other causes









Assessing causality from AEFI reports can be challenging

- Vaccines are given to a large number of mostly healthy people to prevent disease.
 - Any change in health status temporally associated with vaccine is easily attributed to the vaccine, even if the health event was going to occur anyway
- Many health events have no known specific cause (e.g. autoimmune disorders) or have many known contributing causes (e.g. MI, stroke)
- The baseline rate of many health events are difficult to track, especially if subclinical cases are common (e.g. diarrheal illness, early pregnancy loss)





AEFI Reporting Trends in Halton

- Prior to COVID pandemic, Halton Public Health typically received 25-35 confirmed AEFI reports per year
- From January 2021 to current, Halton Public Health has received over 865 reports of possible AEFIs related to COVID-19 vaccines
- Of these 865 reports, 239 have been confirmed AEFIs among Halton residents, meeting the case definition
- 11 confirmed non-COVID vaccine AEFIs in 2021
- Reports come through various channels HCP reporting, clients self-reporting through 311/intake lines





AEFIs in Halton

Table 1: Summary of AEFIs reported among Halton residents, by vaccine product, as of June 22, 2021

	Pfizer- BioNTech	Moderna	AstraZeneca	All products combined
Total number of AEFI reports	139	58	42	239
Number of non- serious reports	136	56	35	227
Number of serious reports	3	2	7	12
Doses administered	340,299	77,526	30,491	448,316
Total reporting rate per 100,000 doses administered	40.8	74.8	137.7	53.3
Total serious reporting rate per 100,000 doses administered	0.9	2.6	23.0	2.7











AEFI adverse reactions

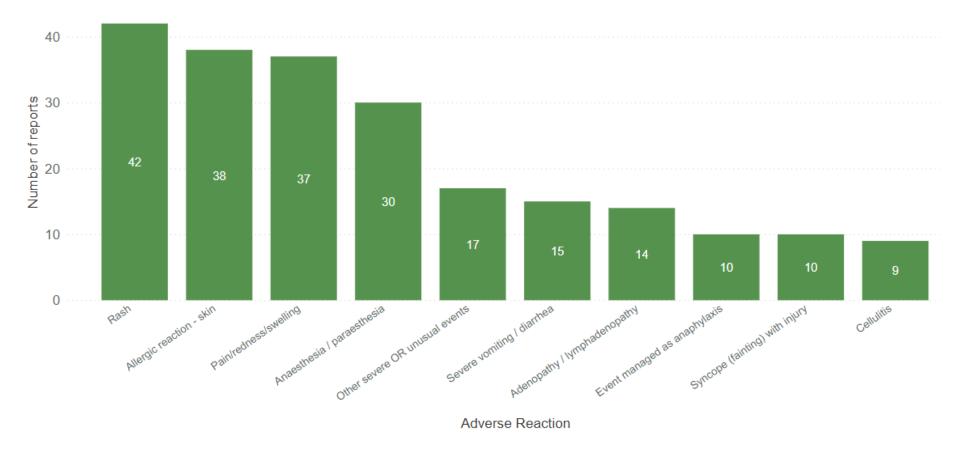




Figure 1: Top ten adverse reactions reported among Halton AEFI cases, as of June 22, 2021







Help identifying AEFIs



- AEFI fact sheet, (Public Health Ontario)
 - Table lists types of adverse events that should be reported, including estimated timelines between vaccination and onset of symptoms

TYPES OF ADVERSE EVENTS TO REPORT

The table below lists the types of adverse events that you should report to your <u>local public health unit</u>. For each event there are estimated timelines between vaccination and onset of symptoms (i.e., temporal criteria). Other events not listed below can also be reported if they are clinically significant. If you are unsure, be proactive and report.

Adverse event type	TEMPORAL CRITERIA for Non-live vaccines	TEMPORAL CRITERIA for Live vaccines
Injection site reactions	Non-live vaccines	Live vaccines
Pain or redness or swelling lasting 4 days or more OR extending beyond the nearest joint	0 to 2 days	0 to 7 days
Infected abscess	0 to 7 days	0 to 7 days
Sterile abscess	0 to 7 days	0 to 7 days
Nodule	0 to 7 days	0 to 7 days
Celultis	0 to 7 days	0 to 7 days
Systemic reactions	Non-live vaccines	Live vaccines
Rath	0 to 7 days	0 to 42 days
Adenopathy/lymphadenopathy	0 to 7 days	0 to 42 days
Severe vomiting/diarrhea	0 to 3 days	0 to 42 days
Parotitis	N/A	0 to 30 days
Hypotonic-hyporesponsive episode (HHE); under 2 years of age only	0 to 2 days	0 to 2 days
Persistent crying/screaming under 2 years of age only	0 to 3 days	0 to 3 days
Allergic reactions	Non-live vaccines	Live vaccines
Event managed as anaphylaxis (i.e., epinephrine administered)	0 to 24 hours	0 to 24 hours
Oculorespiratory Syndrome (ORS)	0 to 24 hours	0 to 24 hours
Allergic skin reaction (e.g., hives)	0 to 2 days	0 to 2 days
Neurologic events	Non-live vaccines	Live vaccines
Convulsions/seizure	0 to 3 days	0 to 42 days
Encephalopathy/encephalitis	0 to 42 days	0 to 42 days
Meningitis	0 to 15 days	0 to 42 days
Anaesthesia/paraesthesia	0 to 42 days	0 to 42 days
Paralysis	0 to 42 days	0 to 42 days
Myelitis/transverse myelitis	0 to 42 days	0 to 42 days
Acute disseminated encephalomyelitis (ADEM)	0 to 42 days	0 to 42 days
Guillian Barré Syndrome (GBS)	1 to 0 weeks	1 to 8 weeks
Bell's pality	0 to 3 months	0 to 3 months
Other events of interest*	Non-live vaccines	Live vaccines
Arthritis/arthralgia	0 to 30 days	0 to 42 days
Intussusception	N/A	0 to 42 days
Thrombocytopenia	0 to 42 days	0 to 42 days
Syncope (fainting) with injury	0 to 30 minutes	0 to 30 minutes
Kawasaki disease	0 to 42 days	0 to 42 days
Other sevene/unusual events	Reportable regardless of timeline	Reportable regardless of timeline

^{*}Other adverse events of special interest for COVID-19 vaccine have been added to the <u>Ontario AGFI Reporting Form,</u> please refer to the form for a complete list of types of adverse events to report.

For questions about AEFI reporting, contact your local public health unit PublicHealthOntario.ca/VaccineSafety











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How to report AEFIs following COVID-19 vaccine

Complete Ontario AEFI
reporting form (Ministry of
Health) – 3 page form updated
in May 2021

Fax to 905-465-3403 or Email to AEFI@halton.ca



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What to report? (Adverse Event Following Immunization)

Local reaction at injection site

- Pain/redness/swelling extending past nearest joint
- pain/redness/swelling lasting >4 days
- Infected abscess
- Sterile abscess
- Nodule
- Cellulitis

Systematic reactions

- Fever >38.0°C (only with another event)
- Rash
- Adenopathy/lymphadenopathy
- Hypotonic-hyporesponsive episode (HHE)
- Persistent crying/screaming
- Severe vomiting/diarrhea (3 episodes/24 hrs)
- parotitis

Allergic reactions

- Event managed as anaphylaxis
- Oculorespiratory syndrome (ORS)
- Allergic reaction skin (e.g. hives)

Neurologic Events

- Convulsions/seizures
- Encephalopathy/encephalitis
- Meningitis
- Anaesthesia/paresthesia
- Paralysis
- Bell's Palsy
- Guillian-Barre Syndrome (GBS)
- Myelitis/Transverse Myelitis
- Acute disseminated encephalomyelitis

Other events of interest

- Thrombocytopenia
- Arthritis/arthralgia
- Intussusception
- Kawasaki Disease
- Syncope with injury
- Other severe or unusual events









What is an AESI? (Adverse Events of Special Interest)

Vaccine-associated enhanced disease (VAED)	Multisystem inflammatory syndrome in children or adults (MIS-C/A)
Acute respiratory distress syndrome (ARDS)	Acute cardiovascular injury
Coagulation disorders	Acute kidney injury
Acute liver injury	Anosmia, ageusia
Chilblain – like lesions	Single Organ Cutaneous Vasculitis
Erythema multiforme	Acute pancreatitis
Rhabdomylysis	Subacute thyroiditis





What to report vs not report



What to report

Events requiring medical consultation or unusual/unexpected events

Injection site reactions >4 days or extending beyond nearest joint

Systematic reactions (rash, severe vomiting)

Allergic reactions (severe hives, anaphylaxis)

Neurologic events

Other events of interest



What not to report

Fever, without any other symptoms

Injection site reactions lasting <4 days

Vasovagal syncope (without injury)

Events clearly attributed to other causes







What to expect after reporting an AEFI

- Review by Medical Officer of Health or Associate Medical Officer of Health
- Public Health may call HCP for further details
- AEFI status and categorization determined
- Communication to HCP regarding final determination and immunization schedule moving forward
- Reported to Public Health Ontario and then Public Health Agency of Canada
- AEFI reporting enables:
 - Post-market vaccine surveillance locally, provincially, nationally
 - Reporting of AEFIs to HCPs and the public (e.g. PHO's <u>Adverse Events</u> Following Immunization (AEFIs) for COVID-19 in Ontario and the <u>Vaccine</u> Safety Surveillance Tool)















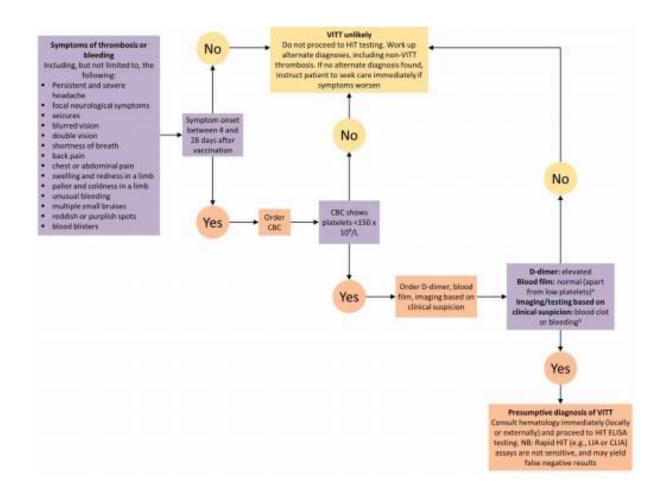




VIIT (Vaccine-induced Immune Thrombocytopenia)

Symptoms of thrombosis

- Persistent, severe headache
- Focal neurological symptoms
- Seizures
- Blurred vision
- Double vision
- Shortness of breath
- Back pain
- Chest or abdominal pain
- Swelling and redness in a limb
- Pallor and coldness in a limb
- Unusual bleeding
- Multiple small bruises
- Reddish or purplish spots
- **Blood blisters**



Ontario COVID-19 Science Advisory Table, May 10, 2021.









Myocarditis and pericarditis

Symptoms of myocarditis/pericarditis

- Chest pain
- Shortness of breath
- Arrhythmias
- Feeling of having a rapid or abnormal heart rhythm

- More common:
 - Males, 12-29 y.o.
 - after 2nd dose
- Usually within 1 week of vaccination
- Usually recover with conservative treatment
- No change in vaccine recommendations, at this time





Reports of myocarditis/pericarditis after COVID-19 vaccination FAQ for health-care providers (source: Sick Kids)







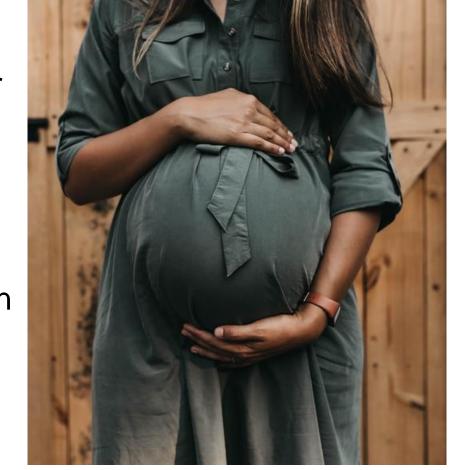
Changes to menstrual cycle and impact on fertility

Menstrual Cycle

- Anecdotal reports of changes to menstrual cycle
- Possible that immunomodulatory effects of vaccine have impact, but would be temporary. Persistent changes to menstrual cycle should be investigated for other causes

Fertility

- No evidence of impact on fertility in men or women
- No plausible cross-reactivity between spike protein antibodies and syncytin-1
- In Pfizer trial, no difference in conception rate between vaccine and placebo
- In contrast, strong evidence of worse outcomes from COVID-19 during pregnancy











What about...

- Herpes simplex virus (HSV) flare, Shingles?
 - No evidence of relationship, not a contraindication to vaccine
 - Concerns may have been prompted by a case series of herpes zoster in people with inflammatory rheumatic disease
 - Six cases of HZ within 14 days of immunization, one case of HZ ophthalmicus. Control group consisted of healthy vaccine recipients
 - Does not appear to be a greater rate than expected for this group.
- Second dose symptoms Why are they worse? How long after vaccination can they start (3-5 days?)
 - Increased side effects following the second dose in a multi-dose series is typical. The immune system is primed to respond to the second dose
 - AZ is different in that side effects appear to be greater following the first dose compared to the second





Any expected AEFIs from mixing platforms?

- UK Com-COV trial preliminary findings that heterologous vaccination schedules related to increased side effects (both Pfizer – AZ and AZ – Pfizer)
- Increased systemic reactogenicity: fever chills, fatigue, headache, joint pain, malaise, and muscle ache
- Spanish CombivacS trial did not find a difference

All side effects short-lived, no serious adverse events reported NACI recommends mRNA second dose for those with AZ first dose





Questions?

Email <u>doctors@halton.ca</u>
Call 311

halton.ca/COVIDvaccines





















AEFIs demographics

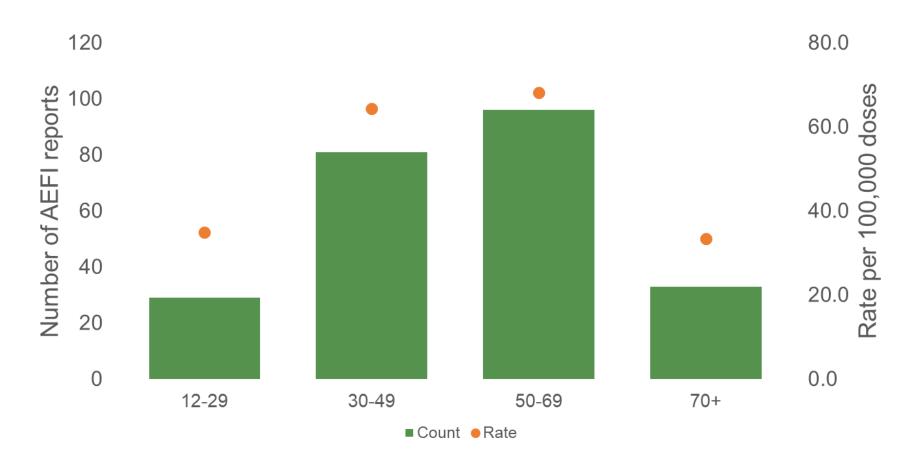




Figure 2: Number and age-specific rate of AEFI reports in Halton residents, as of June 22, 2021





