COVID-19 VACCINE BULLETIN 19

Welcome to Bulletin 19 from the HSE National Immunisation Office which highlights changes in clinical guidance for the COVID-19 vaccination programme. Bulletins will be published every week or more frequently, if required.

Checking previous vaccination before administering a COVID-19 vaccine

As the COVID-19 immunisation programme continues, vaccination with a number of different vaccines is being carried out in a number of different settings including general practice, hospitals and central vaccination clinics.

Before administering a COVID-19 vaccine always check:

Check:

- Has the person already received a COVID-19 vaccine?
- If yes what vaccine did they receive?
- When did they receive it?
- If you are administering a second dose of a vaccine is the interval between the first and second dose correct?
- If pregnant since first dose - delay second dose until at least 14 weeks of pregnancy

This is important in order to ensure that the correct vaccine is given at the correct time.

Vaccines used in the COVID-19 immunisation programme

The table below outlines the vaccines used in the COVID-19 immunisation programme for different groups.

	Cominaty® (Pfizer BioNTech)	COVID-19 Vaccine Moderna®	Vaxzevria® (AstraZeneca)	COVID-19 Vaccine Janssen®
Age 16-<18	√	Unlicensed	Unlicensed	Unlicensed
Age 18-49	√	√	Should be offered an mRNA vaccine	Should be offered an mRNA vaccine except where a two dose mRNA vaccine schedule is not feasible
Age 50-69	√	√	√	√
Age 70 years and older	√	√	Offer an mRNA vaccine (but can receive the vaccine)	Offer an mRNA vaccine (but can receive the vaccine)
Pregnant women of any age (at 14-36 weeks gestation)	√	√	Should be offered an mRNA vaccine*	Should be offered an mRNA vaccine*

*For pregnant women who have already received a 1st dose of Vaxzevria® (Astrazeneca) vaccine, please see **Guidelines of the National Immunisation Advisory Committee** and **NIO/HSE clinical guidance for vaccinators**

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COVID-19 vaccines for people with pre-existing allergies

There are very few people who cannot receive COVID-19 vaccines due to pre-existing allergies or history of anaphylaxis.

Most people with a history of anaphylaxis can receive a COVID-19 vaccine but they should all be observed for 30 minutes post-vaccination.

Allergy-related contraindications to COVID-19 vaccines are:

- anaphylaxis to a previous dose of COVID-19 vaccine or
- anaphylaxis to any constituents of the COVID-19 vaccine (the constituents of the vaccine can be found in the Summary of Product Characteristics for each vaccine)

The National Immunisation Advisory Committee (NIAC) and the Irish Association of Allergy and Immunology have developed a **Frequently Asked Questions document** about COVID-19 vaccines for people with pre-existing allergic conditions, and to support vaccinators e. g:

Question: Can people who have had reactions (including anaphylaxis) to any influenza vaccine receive a COVID-19 vaccine?

Answer: Yes. There are no specific associations between currently available COVID-19 vaccines and influenza vaccines.

Question: Can people with a history of anaphylaxis to a specific foodstuff receive a COVID-19 vaccine?

Answer: Yes. People reporting immediate (IgE) food allergy, including a history of anaphylaxis, delayed (non IgE) mediated food allergy and food intolerance are all suitable candidates for these vaccines. Only those with a convincing history of anaphylaxis are required to wait 30 minutes after their vaccine.

For further information see Frequently Asked Questions about COVID-19 vaccines for people with pre-existing allergic conditions:

Click here

Vaccination of people taking Methotrexate

Treatment with Methotrexate is not a contraindication to vaccination with any COVID-19 vaccine. There is no requirement to stop treatment before vaccination (National Immunisation Advisory Committee does not recommend stopping treatment with Methotrexate prior to vaccination).

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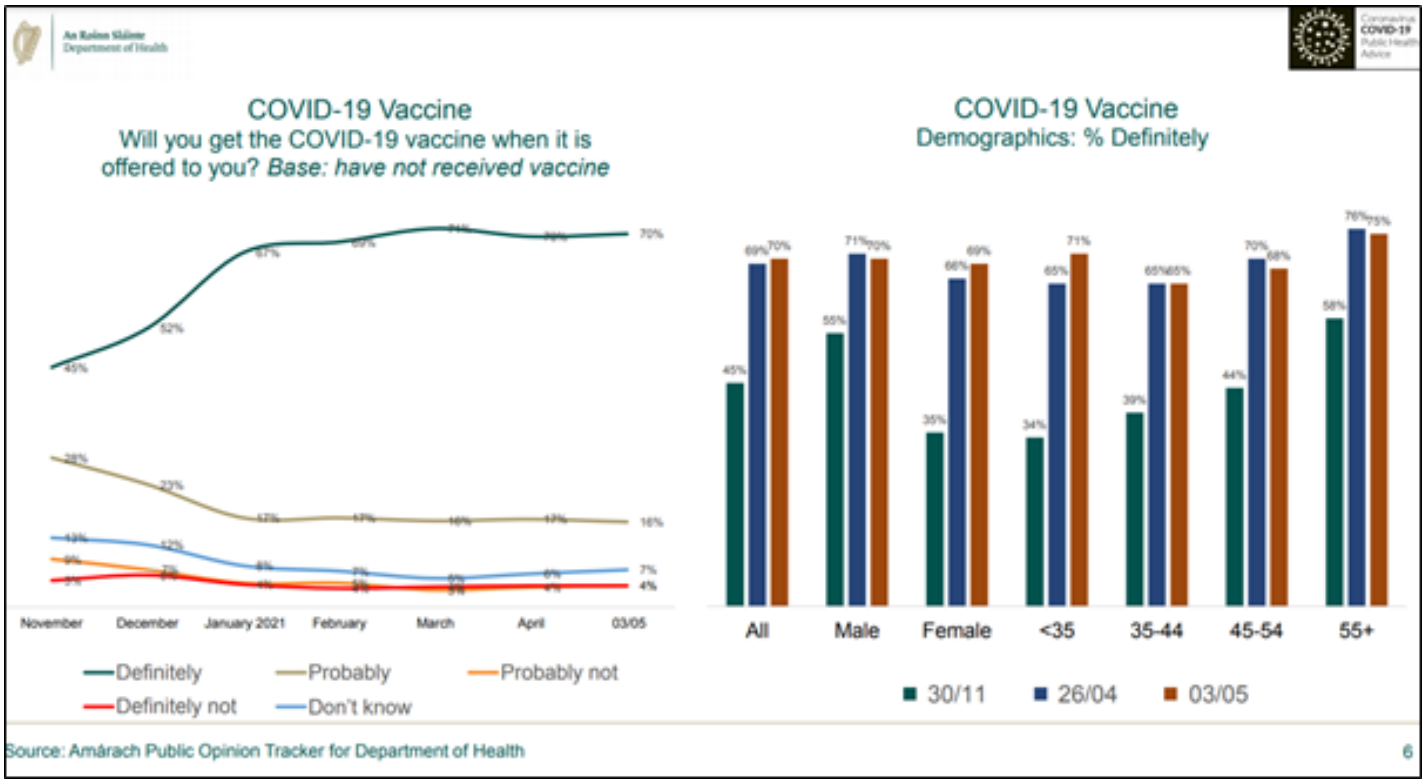
Amárach public opinion surveys on COVID-19 and COVID-19 vaccines

The latest survey from the Department of Health dated 3rd May 2021 shows that acceptance of COVID-19 vaccines remains high: 70% of people participating in the survey would definitely get a COVID-19 vaccine when it is offered to them and 86% of people will definitely or probably get it.



Read more here

Vaccine safety monitoring

Safety of COVID-19 vaccine Janssen® from US CDC

This update on safety monitoring of COVID-19 vaccine Janssen® in the US reported on adverse events March-April 2021. By April 21, nearly 8 million doses of the Janssen COVID-19 vaccine had been administered. Review of safety monitoring data found that 97% of reported reactions after receipt of the vaccine were non-serious and consistent with preauthorization clinical trials data. Seventeen thrombotic events with thrombocytopenia have been reported, including three non-cerebral-venous sinus thrombosis events.

Ongoing monitoring for rare and common adverse events after vaccination is continuing for each authorized COVID-19 vaccine, including the Janssen COVID-19 vaccine.

Read more here

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Anxiety-Related Adverse Event Clusters after COVID-19 Vaccine Janssen® Vaccination in the US

This report from the CDC examined reports of syncope and other anxiety-related events after vaccination with COVID-19 vaccine Janssen®.

Five mass vaccination sites reported 64 anxiety-related events, including 17 events of syncope (fainting) after receipt of Janssen COVID-19 vaccine. The reporting rates of syncope to the US Vaccine Adverse Event Reporting System (VAERS) after Janssen COVID-19 and influenza vaccines (2019–20) were 8.2 and 0.05 per 100,000 doses, respectively.

The authors concluded that vaccine providers should be aware of anxiety-related events after vaccination and observe all COVID-19 vaccine recipients for any adverse reactions for at least 15 minutes after vaccine administration.

Read more here

Latest vaccine safety monitoring report from the UK

The UK's Medicines and Health Products Regulatory Authority (MHRA) has published their most recent review of adverse events reported to them after vaccination with COVID-19 vaccines.

The conclusions of the report are as follows:

- Vaccines are the best way to protect people from COVID-19 and have already saved thousands of lives. Everyone should continue to get their vaccination when asked to do so unless specifically advised otherwise.
- As with all vaccines and medicines, the safety of COVID-19 vaccines is being continuously monitored
- Cases of an extremely rare specific type of blood clot with low blood platelets continue to be investigated.

Further information on the type of suspected adverse reactions (ADRs) reported for the COVID-19 Pfizer/BioNTech vaccine, the COVID-19 Vaccine AstraZeneca and the COVID-19 Vaccine Moderna is provided.

Read more here

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Latest from research

Data on effectiveness from Israel following national roll-out of Pfizer-BioNTech COVID-19 vaccine

This observational study reviews the impact of the national roll out of the Pfizer-BioNTech mRNA based COVID-19 vaccine on outcomes in Israel.

By the start of April over 70% of the adult population (aged 16 and over) were fully vaccinated (21 days interval between doses). 7 days after completing the full vaccination schedule the following outcomes were found: 95% effectiveness against COVID-19 and 92% against asymptomatic COVID-19. It was around 97% effective against symptomatic COVID-19, COVID-19 related hospitalisation and deaths. The vaccine was effective against the B.1.1.7 (Kent) variant. This study provides further large-scale real-world effectiveness of this COVID-19 vaccine in line with the results from clinical trials.

Read more here

Impact of Pfizer-BioNTech COVID-19 vaccine on variants (B.1.1.7 and B.1.351)

Report from Qatar on the use of impact of a single dose of the Pfizer-BioNTech COVID-19 mRNA vaccine on COVID-19 variants: B.1.1.7 (Kent) and B.1.351 (South Africa). These two variants were the main circulating strains in the country. A case-control observational review identified that two doses of the Pfizer-BioNTech COVID-19 vaccine (after 2 weeks) was nearly 90% effective against the B.1.1.7 variant and 75% effective against the B.1.351 variant. However, more importantly, it was around 97% effective against severe COVID-19 and COVID-19 related deaths in a population where both strains were pre-dominant. A cohort study design again found the vaccine to be 87% against the B.1.1.7 variant and 72% against the B.1.351 variant.

Read more here

Immune response following 1 dose of Pfizer-BioNTech COVID-19 vaccine

The immune response (antibody, T and B cell) against COVID-19 variant (B.1.1.7 and B.1.351) in healthcare workers in the UK was measured followed one dose of the Pfizer-BioNTech COVID-19 vaccine (comparing those with or without previous COVID-19 infection). The study found that pervious infection in conjunction with a single dose of the vaccine led to a better immune response (neutralising antibodies) against variants when compared to those who were infection naive and received a single dose of the vaccine. The study highlights the importance of completing the second dose of the vaccine schedule in those who are infection naïve.

Read more here

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HSELand COVID-19 Vaccination Programme

Following feedback from learners we worked with HSeLand to make our COVID-19 vaccination programme more user friendly.

Learners now have the option of completing vaccine specific information for each of the COVID-19 licensed vaccines.

Search for the COVID-19 vaccination programme on HSeLand.ie and enrol on vaccine specific course.

If you choose to do more than 1 vaccine specific programme you will only need to complete the introduction materials once and then complete the vaccine specific information.

Don't forget to complete the assessment to receive your certification of completion.

If you have previously completed our programme you do not need to redo the programmes unless updates have been made to content. HSeLand will send an email to learners when updates are available.

Register here

Website

Visit our website www.immunisation.ie regularly for the most up to date information to support vaccinators and health professionals responding to queries.

Our dedicated COVID-19 Vaccination section contains

- Information from the National Immunisation Advisory Committee
- Clinical guidelines
- COVID-19 vaccine studies
- IM Injection technique reminders
- Dedicated pages for the licensed COVID-19 vaccines

Visit here

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Do you have queries?

For questions about the COVID-19 Vaccination programme

- Transfer of client services, queries or complaints, please email C19vaccinequery@hse.ie
- COVID-19 vaccine orders or deliveries to GPs, please email gpvaccines@hse.ie
- Health Professionals for your own COVID-19 vaccination appointments, please email Covid19.support@hse.ie
- Legal queries, potential challenges related to vaccination and obtaining a consent, please email lead.integratedcare@hse.ie and dervelagray@rcpi.ie
- For clinical queries, please email immunisation@hse.ie

Should vaccines be exposed to temperatures outside of these parameters please contact the National Immunisation Office immediately. Contacts include:

- Achal Gupta: achal.gupta@hse.ie mobile 087 4064810
- Mariangela Toma: mariangela.toma@hse.ie mobile 087 7575679
- Cliona Kiersey: cliona.kiersey@hse.ie mobile 087 9915452
- Email the immunisation inbox: immunisation@hse.ie

Queries that are not clinical or technical cannot be answered by the National Immunisation Office.

The National Immunisation Office is not involved in the allocation or delivery of COVID-19 Vaccines.

Recommendations about COVID-19 vaccine are changing as more information becomes available so please visit our **website** for the most up to date information.