ACIP COVID-19 Vaccines Work Group

Dr. Matt Daley, Work Group Chair

June 23, 2021
COVID-19 Pandemic and vaccines

- Since December, three COVID-19 vaccines authorized under EUA and recommended for use in the US

**December 2020:**
- 250,000 cases/day
- 3,000 deaths/day

**June 2021:**
- 13,000 cases/day
- 300 deaths/day

**As of June 21:**
- 318 million vaccine doses administered
- 150 million people fully vaccinated
- 53% of population ≥12 years of age

Daily Trends in Number of COVID-19 Cases in the United States Reported to CDC
COVID-19 Work Group activities – May to June 2021

- Meets weekly

- Topics covered:
  - Review of vaccines and SARS-CoV-2 variants
  - Data needed to inform discussions around additional doses of COVID-19 vaccines
  - Safety updates and review of myocarditis cases
  - Discussion of benefit-risk balance for COVID-19 vaccines in adolescents and young adults
Today’s ACIP meeting

- Discussion around cases of myocarditis/pericarditis after mRNA COVID-19 vaccination
Today’s ACIP meeting

- Discussion around cases of myocarditis/pericarditis after mRNA COVID-19 vaccination

**Vaccine Safety:**

- Identifying and characterizing rare serious adverse events
- Minimizing the occurrence of adverse events whenever possible
- Communicating risks to the public, public health officials, and healthcare providers
- Discussing known and potential benefits of vaccination with known and potential harms of vaccination
Myocarditis Cases Reported After mRNA vaccines in Israel
December 2020–May 2021

- 148 myocarditis cases occurring around the time of vaccination
- Mostly reported among younger men aged 16–19, usually after second dose
- Most cases were hospitalized, but 95% considered to be mild cases
- Israel determined a possible link between the second vaccine dose and the onset of myocarditis among young men aged 16 to 30
- Israel determined “risks for complications of coronavirus disease outweigh the risks posed by the vaccine’s side effects”
  - “Myocarditis cases observed among teenagers aged 16–19 occurred in low rates and in most cases passed with no complications”

Myocarditis and Pericarditis Following mRNA COVID-19 vaccination

- Since April 2021, there have been increased reports to Vaccine Adverse Event Reporting System (VAERS) of cases of inflammation of the heart happening after mRNA COVID-19 vaccination.

Myocarditis and Pericarditis Following mRNA COVID-19 vaccination

ACIP Response

- Vaccine Safety Technical Work Group (VaST) reviewed data from Israel, Department of Defense and CDC/FDA safety surveillance systems
- COVID-19 vaccines Work Group reviewed data and discussed benefit/risk balance
- Public ACIP meeting to review data and discuss benefit/risk assessment
Today’s ACIP meeting

- Discussion around cases of myocarditis/pericarditis after mRNA COVID-19 vaccination
- Considerations around need for booster doses of COVID-19 vaccines
Booster Doses of COVID-19 vaccines

- Majority of Americans received at least 1 dose of COVID-19 vaccine

- **Planning** required *if* booster doses of COVID-19 vaccines needed
  - Discussions around planning need to occur well in advance of future recommendations
  - Planning discussions do not imply booster doses will be recommended

- Discussions today around additional data needed to inform possible future recommendations
Today's Agenda
Wednesday, June 23

- Overview of myocarditis and pericarditis
  Dr. Matthew Oster (CDC)

- Update on COVID-19 vaccine safety, including myocarditis after mRNA vaccines
  Dr. Tom Shimabukuro (CDC)

- VaST assessment
  Dr. Grace Lee (ACIP, VaST Chair)

- COVID-19 mRNA vaccines in adolescents and young adults: Benefit-risk discussion
  Dr. Megan Wallace (CDC) and Dr. Sara Oliver (CDC)

- Discussion

- Public Comment

- Overview of data to inform recommendations for additional doses of COVID-19 vaccines
  Dr. Sara Oliver (CDC)

- Discussion
Work group members

ACIP members
- Matthew Daley (chair)
- Beth Bell
- Grace Lee
- Jose Romero
- Keipp Talbot

Ex-officio/government members
- FDA: Doran Fink, Rachel Zhang
- NIH: Chris Roberts
- IHS: Thomas Weiser, Uzo Chukwuma
- DOD: Bryan Schumacher
- CMS: Jeff Kelman
- BARDA: Christine Oshansky
- HHS: David Kim

CDC Lead
- Sara Oliver

Liaisons
- AAFP: Jonathan Temte
- AAP: Sean O’Leary
- ACOG: Denise Jamieson (primary), Laura Riley (alternate)
- ACP: Jason Goldman
- AGS: Ken Schmader
- AIM: Rob Shechter (primary), Jane Zucker (alternate)
- AMA: Sandra Fryhofer
- ANA: Kendra McMillan (primary), Ruth Francis (alternate)
- APhA: Michael Hogue
- ASTHO: Marcus Plescia
- CSTE: Susan Lett (primary), Christine Hahn (alternate)
- IDSA: Jeff Duchin (primary), Carol Baker (alternate)

Liaisons, cont’d
- NACCHO: Matt Zahn (primary), Jeff Duchin (alternate)
- NACI: Matthew Tunis
- NFID: Bill Schaffner (primary), Marla Dalton (alternate)
- NMA: Oliver Brooks
- SHEA: Marci Drees

Consultants
- Ed Belongia
- Kathy Kinlaw
- Dayna Matthew
- Kathleen Neuzil
- Stanley Perlman
- Peter Szilagyi
CDC participants

- Doug Campos-Outcalt
- Mary Chamberland
- Thomas Clark
- Amanda Cohn
- Jillian Doss-Walker
- Kathleen Dooling
- Anthony Fiore
- Julia Gargano
- Sue Gerber
- Jack Gersten
- Susan Goldstein
- Monica Godfrey
- Sam Graitcer
- Lisa Grohskopf
- Stephen Hadler
- Rita Helfand
- Terri Hyde
- Cynthia Jorgensen
- Erin Kennedy
- Sarah Kidd
- Ram Koppaka
- Gayle Langley
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- Nicole Reisman
- Hannah Rosenblum
- Janell Routh
- Stephanie Schrag
- Heather Scobie
- Edwin Shanley
- Tom Shimabukuro
- Heidi Soeters
- Mark Sotir
- Stephanie Thomas
- Natalie Thornburg
- Jennifer Verani
- Megan Wallace
- Cindy Weinbaum
- Melinda Wharton
- Kate Woodworth
- Yon Yu
For more information, contact CDC
1-800-CDC-INFO (232-4636)

Thank you!

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.