

FDA Updates of COVID-19 Vaccine Safety Activities

Vaccines and Related Biological Products Advisory Committee June 10, 2021

Steve Anderson, PhD, MPP

Director, Office of Biostatistics and Epidemiology (OBE) FDA - Center for Biologics Evaluation and Research (CBER)

US Vaccine Surveillance Programs: Post-Authorization



- a. Vaccine Adverse Event Reporting System (VAERS)
 - Management shared by CDC and FDA
 - Discussed by Dr. Shimabukuro CDC

FDA Vaccine Active Surveillance Programs: Post-Authorization

Active Surveillance Monitoring Programs

- a. FDA-CMS Medicare data: Claims data
- b. FDA BEST system: Claims and EHR data

FDA-CMS Medicare Data: Active Surveillance



Federal Partners

- Data cover very large population of approximately 34 million elderly US beneficiaries <u>></u> 65 years of age
- >92% of US elderly use Medicare
- Consists of claims data with access to medical charts

FDA BEST: Active Surveillance

Biologics Effectiveness and Safety Initiative

- Use of <u>claims data</u> for Vaccine Safety:
 - 3 major partners Optum, CVS Health, HealthCore

• Emphasis on detection of rare vaccine adverse events (<1/100,000 doses)





FDA Near Real-Time Surveillance COVID-19 Vaccines:

FDA

CMS + BEST Claims Databases

Data Source (Claims)	Update Frequency	Number of Patients Covered, Millions (National)	Status of Rapid Cycle Analyses
CMS	Daily	105	Initiated early March
Optum* (Pre-Adjudicated)	Bi-Weekly	22	Initiated mid-May
CVS Health*	Monthly	26	Initiation: 1 st week of June
HealthCore*	Monthly	76	Initiation: 3 rd week of June

FDA Near Real-Time Surveillance COVID-19 Vaccine Dose Totals CMS + BEST Claims Databases



Databases	Pfizer	Moderna	Janssen
CMS* (data cutoff: 05/22/2021)	8,630,677	8,815,039	309,315
Optum (Pre-adjudicated) (data cutoff: 05/17/2021)	1,971,547	1,178,754	129,369
CVS Health (data cutoff: 04/30/2021)	1,648,417	1,122,970	104,267
HealthCore	3,508,200	2,507,711	214,111

(data cutoff: 05/31/2021)

FDA COVID-19 Vaccine Safety Signal Detection

Conducting "Near real-time surveillance" of 16 safety outcomes of interest:

• Approach used by US government agencies for H1N1 Monitoring in 2009 & 2010

• Approach routinely used by FDA and CDC annually for vaccines

FDA Near Real-Time Surveillance of COVID-19 Vaccines



9

Working list of at least 16 possible adverse events of special interest (AESI)

Acute myocardial infarction	Bell's Palsy	Narcolepsy
Anaphylaxis	Encephalomyelitis	Non-hemorrhagic Stroke
Appendicitis	Guillain-Barré syndrome	Pulmonary Embolism (PE)
Disseminated intravascular coagulation (DIC)	Hemorrhagic Stroke	Transverse Myelitis
Deep Vein Thrombosis (DVT)	Myocarditis/Pericarditis	Immune thrombocytopenia (ITP)
	Thrombosis with Thrombocytopenia	(

Data Coverage of US population



- US government-wide approach provides advantages in covering broader portion of US population
- Primary coverage by three age stratifications

- ≥ 65 years: FDA-CMS (VSD, VA, BEST)
- 18 64 years: VSD, VA, BEST
- − ≤17 years: VSD, BEST

FDA BEST Data Coverage of US population:

FDA

Pediatric Population: Number of Enrollees from January 2021-Present

Data Source	Age < 12 years	Age 12-17 years	Age 18-64 years
CVS Health	2,209,147	1,320,594	12,562,033
Optum (Pre-adjudicated)	1,943,993	1,149,942	10,613,669
HealthCore	2,688,839	1,694,841	15,630,314

Initial Results Myocarditis/Pericarditis Near Real-Time Surveillance in BEST and CMS

Database	Vaccine	Vaccine Doses	Myocarditis/Pericarditis Events after Vaccination (42 days risk interval)	Safety Signal
CMS, ages ≥65 years (data through 5/22)	Pfizer-BioNTech	8.6 M	636	No
	Moderna	8.8 M	601	No
	Janssen	0.31 M	23	No

Initial Results Myocarditis/Pericarditis Near Real-Time Surveillance in BEST and CMS

Database	Vaccine	Vaccine Doses	Myocarditis/Pericarditis Events after Vaccination (42 days risk interval)	Safety Signal
Optum Pre-	Pfizer-BioNTech	1.9 M	63	No
adjudicated,	Moderna	1.1 M	32	No
ages 12-64 years (data through 5/17)	Janssen	0.13 M	4	No





Epidemiological Studies to follow up on potential signals identified by VAERS and Near Real-Time Surveillance:

- Study Protocols inferential studies, SCRI, cohort analyses, etc.
 - To follow CVST/TTS and Myocarditis/Pericarditis
 - Focus on subpopulations pediatric, pregnant persons, elderly and residents of long-term care facilities, comorbidities, etc.

Acknowledgments

- Richard Forshee
- Azadeh Shoaibi
- Hui-Lee Wong
- CBER Surveillance Team
- Manette Niu
- CBER OBE Colleagues
- CDC Colleagues
- CMS Colleagues
- VA Colleagues
- FDA Partners: Acumen, IBM Watson and new partners in FY2021



Thank you!

Questions?



RESERVE SLIDES

FDA BEST COVID-19 Vaccine Protocols

- Background Rates of Adverse Events of Special Interest for COVID-19 Vaccine Safety Monitoring Protocol
- 2. COVID-19 Vaccine Safety Surveillance: Active Monitoring Master Protocol
- 3. Assessment of Risk of Safety Outcomes Following COVID-19 Vaccination Draft Master Protocol
- 4. Assessment of the Performance of COVID-19 Diagnosis Code Using SARS-CoV-2 Test Results Draft Protocol



Learn More on BEST's Vaccines and Allergenics website

Through multiple contracts and partnerships, CBER works with a diverse group of scientists and clinicians to conduct active surveillance.

CBER Surveillance



Note: CERSI: Centers of Excellence in Regulatory Science and Innovation