

Republic of the Philippines Department of Health FOOD AND DRUG ADMINISTRATION



Reports of Suspected Adverse Reaction to COVID-19 Vaccines (01 March to 25 April 2021)

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About the report

- A summary is presented below of all received suspected adverse reaction reports following COVID-19 vaccination from 01 March 2021, the date when the first vaccine became available, up to 25 April 2021.
- Two (2) vaccines under Emergency Use Authorization (EUA) are currently being used in the vaccination program: the SARS-CoV-2 Vaccine (Vero Cell) Inactivated, [CoronaVac] and COVID-19 Vaccine AstraZeneca.
- Data are based on VigiFlow, the national database of adverse reactions in the Philippines. It includes reports from hospitals, various epidemiology surveillance units (ESUs) of the Department of Health (DOH), patients/consumers, and EUA holders.
- Symptoms or diseases that occur after vaccination are reported if there is a *suspicion* of a possible link. However, it cannot be assumed that there is a causal relationship between the suspected adverse reaction and the vaccine.
- This report contains all suspected adverse reactions regardless of any possible causal relationship.
- Additional information may become available in individual case reports at any time which may change the assessment and figures presented.
- Adverse reaction reports are necessary for the safety assessment of the vaccines, making sure that the benefits always outweigh the risks.
- Reports are constantly reviewed and monitored for the possible emergence/identification of unknown adverse reactions also known as signal. If a signal is identified, investigations, regulatory actions, and timely communication is performed by the FDA.
- A weekly report is published to summarize reported adverse reactions to the COVID-19 vaccines.

Summary

This report is based on an assessment of adverse reaction reports received by 25 April 2021. As per benefit-risk assessment, these reports do not provide a basis for revising the current recommendations regarding use of the COVID-19 vaccines.

The reports received have no new indications of unexpected adverse reactions. The reported reactions are generally in line with what is described in the product information and labels. Most of the reports are minor adverse reactions which include body pain, chills, fatigue, fever, headache, nausea, and pain in the injection sites. These usually appear on the first or second day of vaccination and may last for 2-3 days. Most people tolerate these adverse reactions while others experience greater discomfort.

The FDA posed no objection on the use of CoronaVac for the elderly population aged 60 years old and above by the DOH. The decision is based on the recommendation of independent expert panel considering the increasing need to protect the elderly population despite the limited availability of vaccines.

Considering the post-authorization experience on the use of COVID-19 vaccine AstraZeneca, information on the very rare and serious adverse events of thrombosis and thrombocytopenia, and in some cases accompanied by bleeding has been revised under the special warning and precautions for use. The vaccine is now contraindicated for patients who have experienced major venous and/or arterial thrombosis in combination with thrombocytopenia following vaccination with any COVID-19 vaccine.

COVID-19 vaccines with Emergency Use Authorization in the Philippines

At present, there are six (6) COVID-19 vaccines granted emergency use authorization:

- Pfizer-BioNTech COVID-19 Vaccine (BNT162b2)
- ChAdOx1-S [recombinant] (COVID-19 Vaccine AstraZeneca)
- SARS-CoV-2 Vaccine (Vero Cell), Inactivated (CoronaVac)
- Gam-COVID-Vac (Sputnik V)
- Ad26.COV2-S [recombinant] (Janssen COVID-19 Vaccine)
- Whole Virion Inactivated Corona Virus (Covaxin)

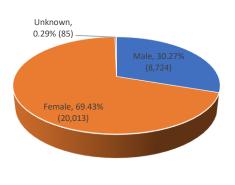
Various vaccine platforms have been approved for use in the Philippines. Pfizer-BioNTech COVID-19 vaccine is a mRNA vaccine; COVID-19 Vaccine AstraZeneca and Janssen COVID-19 Vaccine are non-replicating viral vector vaccines, Sputnik V uses the same technology having two (2) different (dose) components of viral vectors; and CoronaVac and Covaxin are inactivated vaccines. All are administered in two doses within an interval of a few weeks except for Janssen COVID-19 Vaccine which is administered as a single-dose.

Statistics regarding reports of suspected adverse reactions

As of 25 April 2021, more than 1.5 million individuals have received their first dose of COVID-19 vaccines either CoronaVac or COVID-19 vaccine AstraZeneca. Over 230,000 individuals have received their second dose of CoronaVac. An aggregate of 28,822 suspected adverse reaction reports were received, evaluated, and analyzed by the FDA.

Demographics

To provide a descriptive overview of the population reporting adverse reactions from COVID-19 vaccines. Figure 1. and Figure 2. shows the distribution of reports by age and gender.



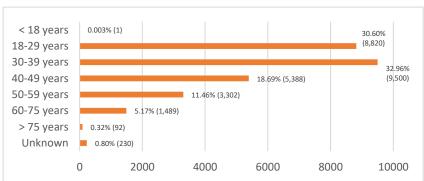


Figure 1. Report distribution by gender

Figure 2. Report distribution by age

The early phase of the vaccination program is intended for the frontline health workers, thus, the high number in the female and younger population might be associated with the data that our health system is dominated by female (75%) and young adults under the age of 35 (65%).¹ An increasing number of reports from the age group 40 years and above were observed in the last few weeks. This may be attributed to the coverage of priority groups of senior citizen and individuals with comorbidities.

Distribution of reports of adverse reactions for each vaccine

Data shown below are cumulative reports from the start of the vaccination program on 01 March 2021 up until 25 April 2021.

Table 1. Distribution of reports of adverse reactions for each vaccine

Vaccine	Number vaccinated with first dose ^b	Number vaccinated with second dose ^b	Total number of reports ^a	Reports of non- serious events	Reports of serious events
CoronaVac	983,612	230,998	9,695	9,502	193
AstraZeneca	525,046	0	19,127	18,886	241
TOTAL	1,508,658	230,998	28,822	28,388	434

Data source: aVigiFlow, bNVOC daily report as 6PM, 25 April 2021

Notes: Additional information may become available in individual cases which may change the figures presented

Data concerning various vaccines are not directly comparable. COVID-19 vaccines profile varies, they have not been used for equal periods of time and they have been administered to number of people with different profiles including various age and sex.

¹ Human Resource for Health in the Time of the COVID-19 Pandemic: Does the Philippines Have Enough? https://www.drdf.org.ph/sites/default/files/pdf/COVID-19-Research-Brief-08.pdf

Reports of suspected serious adverse reaction

Adverse reactions experienced after vaccination are considered serious when it resulted to any of the following criteria:

- In-patient hospitalization/prolongation of existing hospitalization
- Significant disability/incapacity
- Life-threatening (e.g. anaphylaxis) and death
- · Birth defect or congenital malformations
- Considered to be medically important event

Hypersensitivity including severe allergic reactions

Severe allergic reactions have been reported on the use of COVID-19 vaccines including CoronaVac and AstraZeneca. It is very rare (0.003% for CoronaVac and 0.002% for AstraZeneca from local data) and occurs only in a few vaccinated individuals. It typically occurs in people with a history of severe vaccine reactions. Severe allergic reactions generally occur soon after vaccination and is usually managed with Epinephrine in combination with other medicines. Thus, vaccinees are observed for at least 15 minutes after receiving the vaccine. Epinephrine is readily available in all vaccination sites.

Hypersensitivity including severe allergic reactions to COVID-19 vaccine AstraZeneca have been identified to be biologically possible. AstraZeneca revised the labeling of their product to reflect the changes that the second dose of the vaccine should not be given to those who have experienced a severe hypersensitivity reaction to the first dose of COVID-19 vaccine AstraZeneca.

Increased blood pressure

Blood pressure increased has been continuously reported as the top adverse reaction to inactivated vaccine and still included as one of the top ten reported reactions to viral vector vaccine. Monitoring blood pressure is part of the screening processes for COVID-19 vaccination program in the Philippines.

According to Sison, Divinagracia & Nailes (2019), the latest data on prevalence of hypertension were 28%; 9% of which are unaware that they have hypertension. The BP control rate of 20% may be attributed to the increasing reports of blood pressure increased. Anxiety during vaccination may also cause elevation in blood pressure levels.²

An updated joint statement from the Philippine Heart Association and Philippine Society of Hypertension on elevated blood pressure readings during COVID-19 vaccination was released last 14 April 2021 revising their recommendations on the screening process, observation period, and other information related to COVID-19 vaccination.

² Immunization stress-related response (ISRR) - A synopsis https://www.who.int/immunization/sage/meetings/2019/april/2_A_synopsis_of_ISRR_Draft_SAGE.PDF?ua=1

Thrombocytopenia and coagulation disorders

The European Medicines Agency's (EMA) safety committee had concluded that unusual blood clots with low platelets should be listed as a very rare side effect of COVID-19 vaccine AstraZeneca. AstraZeneca revise their label reflecting the information on thrombocytopenia and coagulation disorders.

COVID-19 Vaccine AstraZeneca is now contraindicated to patients who have experienced major venous and/or arterial thrombosis in combination with thrombocytopenia following vaccination with any COVID-19 vaccine.

Information on thrombocytopenia and coagulation disorders were discussed in the label under special warnings and precautions for use.

Since this is very rare event, the benefits of the vaccine continue to outweigh the known and potential risks. Considering the new safety information as well as the points and recommendations raised by the World Health Organization, and various independent expert panels, the FDA recommended the continuation of inoculation of the COVID-19 vaccine AstraZeneca.

Reports involving death

As of 25 April 2021, 45 fatal events were received. Most of these events occurred in people with multiple existing comorbidities. There were cases of confirmed COVID-19 infections leading to severe cases with fatal outcome. Another causes of deaths are cardiovascular disease which belongs to the three leading causes of death in the Philippines (PSA 2020). An independent committee assessed 24 of these events as coincidental events or not related to the vaccine and three (3) cases were indeterminate. Other cases are still under investigation and continuously being reviewed.

To date, there were no reports of fatal events directly associated with the use of the vaccines currently in use.

Confirmed COVID-19 infections

Reports included 51 confirmed COVID-19 infections. Most of the reported infections were asymptomatic cases. There were 10 severe cases with a fatal outcome which, upon assessment, are not related to the use of the vaccine. These cases are attributable to the rising number of COVID-19 infections as of this writing.

The vaccines currently being used in the COVID-19 vaccination program are non-replicating viral vector and inactivated vaccines. It does not contain any live virus and does not cause COVID-19 infection in vaccine recipients.

Number of suspected adverse reactions per category

A total of 28,822 case reports containing 71,546 suspected adverse reactions were received from the start of the vaccination program. Multiple suspected adverse reactions may be reported in a single case. Suspected adverse reactions were coded using the Medical

Dictionary for Regulatory Activities (MedDRA) terminology to allow international comparison of reports.

The data presented below are categorized by System Organ Class (SOC), the highest in the hierarchy of MedDRA. They are grouped by manifestation site (e.g. gastrointestinal, cardiac) and etiology (e.g. infections, examinations).

Reactions to inactivated vaccine

CoronaVac

Classification	Number of suspected reactions
General symptoms & reactions in the administration site E.g. Pain and reaction in the injection site, chills, discomfort	3,876
Cardiac symptoms E.g. Palpitations, bradycardia	372
Ear symptoms E.g. Ear swelling, vertigo	12
Examinations E.g. Increased blood pressure, increased heart rate	2,672
Eye symptoms E.g. Eye itchiness, blurred vision	89
Gastrointestinal symptoms E.g. Abdominal pain, diarrhea, nausea, vomiting	1,096
Hepatobiliary symptoms E.g. Jaundice	1
Immune system symptoms E.g. Allergic reactions	98
Infections E.g. Cold symptoms	372
Metabolism and nutrition-related symptoms E.g. Decreased appetite	48
Musculoskeletal symptoms E.g. Back pain, joint pain, pain in extremities	723
Neurological symptoms E.g. Dizziness, headache, syncope	3,108
Procedural symptoms E.g. Procedural hypertension, vaccination adverse reaction	302
Psychiatric symptoms E.g. Feeling anxious	36
Renal and urinary symptoms E.g. Urine coloring yellow, urine frequency	6
Reproductive symptoms E.g. Vaginal bleeding, vaginal spotting	5
Respiratory symptoms E.g. Cough, nasal congestion, throat irritation	1,019
Skin symptoms E.g. Cold sweat, rash, redness	1,711
Symptoms in blood and lymphatic system E.g. Pain in the lymph nodes	18
Vascular symptoms E.g. Flushes, low blood pressure	652

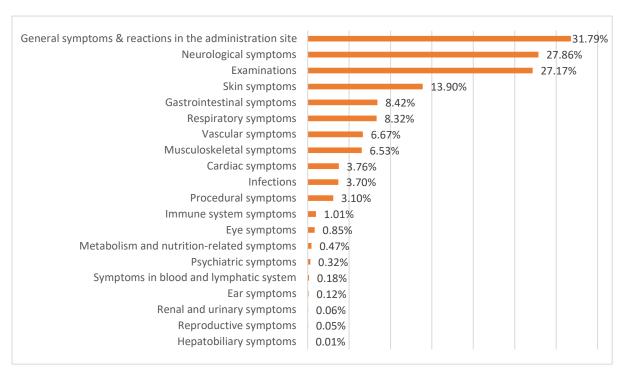


Figure 3. Suspected adverse reaction distribution by SOC for inactivated vaccine

As shown in Figure 3, the SOC containing the greatest number of events were general symptoms and reactions in the administration site (3,876), followed by neurological symptoms (3,108), examinations (2,672), skin symptoms (1,711), gastrointestinal symptoms (1,096), respiratory symptoms (1,019), musculoskeletal symptoms (723), vascular symptoms (652), cardiac symptoms (372) and infections (372). The top reported events are blood pressure increased (26.79%), headache (16.69%), vaccination/injection site pain (16.13%), dizziness (9.49%), rash (8.71%), pyrexia (7.66%), pruritus (5.30%), hypertension (4.59%), nausea (4.26%), and fatigue (3.85%).

Reactions to non-replicating viral vector vaccine

• COVID-19 vaccine AstraZeneca

Classification	Number of suspected reactions
General symptoms & reactions in the administration site E.g. Pain and reaction in the injection site, chills, discomfort	26,122
Cardiac symptoms E.g. Palpitations, bradycardia	328
Ear symptoms E.g. Ear swelling, vertigo	23
Examinations E.g. Increased blood pressure, increased heart rate	1,617
Eye symptoms E.g. Eye itchiness, blurred vision	242
Gastrointestinal symptoms E.g. Abdominal pain, diarrhea, nausea, vomiting	2,695
Hepatobiliary symptoms E.g. Jaundice	1
Immune system symptoms E.g. Allergic reactions	163

Infections	644	
E.g. Cold symptoms	044	
Metabolism and nutrition-related symptoms	388	
E.g. Decreased appetite		
Musculoskeletal symptoms	6,473	
E.g. Back pain, joint pain, pain in extremities		
Neurological symptoms	10,246	
E.g. Dizziness, headache, syncope	10,240	
Procedural symptoms	3,035	
E.g. Procedural hypertension, vaccination adverse reaction	3,033	
Psychiatric symptoms	33	
E.g. Feeling anxious	33	
Renal and urinary symptoms	6	
E.g. Urine coloring yellow, urine frequency		
Reproductive symptoms	13	
E.g. Vaginal bleeding, vaginal spotting	13	
Respiratory symptoms	1,131	
E.g. Cough, nasal congestion, throat irritation	1,131	
Skin symptoms	1,709	
E.g. Cold sweat, rash, redness	1,709	
Symptoms in blood and lymphatic system	28	
E.g. Pain in the lymph nodes	20	
Vascular symptoms	433	
E.g. Flushes, low blood pressure	455	

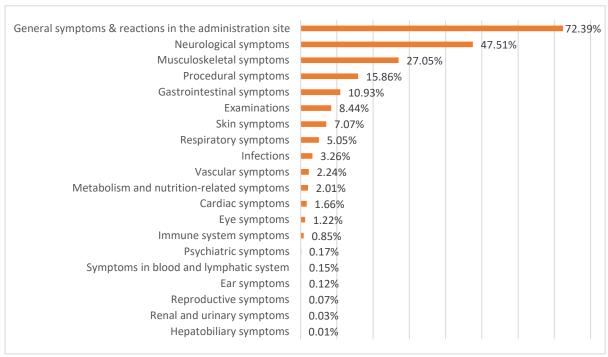


Figure 4. Suspected adverse reaction distribution by SOC for viral vector vaccine

As shown in Figure 4, the SOC containing the greatest number of events were General symptoms and reactions in the administration site (26,122), followed by neurological symptoms (10,246), musculoskeletal symptoms (6,473), procedural symptoms (3,035), gastrointestinal symptoms (2,695), skin symptoms (1,709), examinations (1,617) and

respiratory symptoms (1,131). The top reported events are pyrexia (47.02%), headache (41.64%), vaccination/injection site pain (26.76%), myalgia (21.10%), chills (20.14%), vaccination complication (15.82%), fatigue (15.03%), malaise (11.79%), arthralgia (10.34%), and blood pressure increased (8.15%).

Outcome of suspected adverse reactions

The outcome of cases of suspected adverse reactions to COVID-19 vaccines is shown in Figure 5. Overall, most of the reported cases have *recovered/resolved*, although there were few cases who have *recovered but with sequalae*. Almost 10% of cases are *recovering/resolving* while less than 1% are have *not recovered/not resolved* at the time of reporting. A proportion of 0.16% were reported with fatal outcome as discussed in the section Reports involving death.

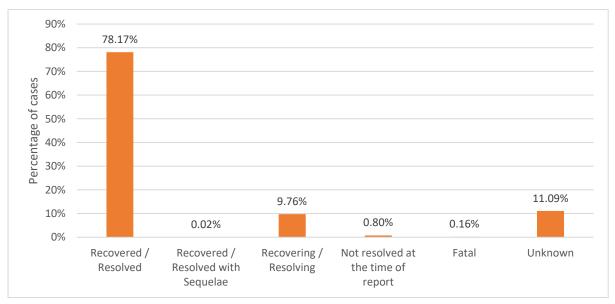


Figure 5. Case outcome

Reporting of suspected adverse reactions following vaccination

Individuals who received their COVID-19 vaccination shots can report any suspected adverse reaction to any of the following:

- Immunization site where you were vaccinated
- Directly to the vaccine emergency use authorization holder
- FDA online reporting system

Kindly **report only to one** of the above to avoid duplication of reports.