New Hampshire Coronavirus Disease 2019 Weekly Call for Healthcare Providers and Public Health Partners

May 27, 2021

Ben Chan Elizabeth Talbot Beth Daly Lindsay Pierce

Thursday noon-time partner calls will focus on science, medical, and vaccine updates geared towards our healthcare partners



Agenda

- Epidemiology update
- Myocarditis update: <u>VaST Work Group Technical Reports</u>
- CDC <u>Science Brief</u>: COVID-19 vaccine efficacy and effectiveness (pending update)
- Moderna <u>Announcement</u> on TeenCOVE study results
- Novavax preliminary phase 3 clinical trial results (<u>medRxiv</u>)
- Questions & Answers (Q&A)



U.S. National Daily Incidence of COVID-19



Department of Health and Human Services

https://covid.cdc.gov/covid-data-tracker/#trends dailytrendscases

Number of New COVID-19 Cases per Day in NH





% of Tests (Antigen and PCR) Positive for COVID-19 (7-Day Average)



Date Laboratory Test Completed

https://www.nh.gov/covid19/dashboard/overview.htm#dash



Number of People Hospitalized with COVID-19 Each Day in NH (Hospital Census)



Date

blic Health Services



Average Number of COVID-19 Deaths per Day in NH (Based on Date of Death)



Level of Community Transmission

Level of Transmission

Substantial

Minimal
Moderate
Substantial

New Cases per 100k over 14 days **120.2**

7-Day Total Test Positivity Rate

2.1%

Data as of: 5/26/2021

https://www.covid19.nh.gov/dashboard/schools

Myocarditis Update

VaST Work Group Technical Report

- ACIP's COVID-19 Vaccine Safety Technical (VaST) Work Group has been reviewing COVID-19 vaccine safety data on a weekly basis
- Review of adverse event reports in two surveillance systems
 - <u>Vaccine Adverse Event Reporting System</u> (VAERS)
 - <u>Vaccine Safety Datalink</u> (VSD)
- There was not a safety signal identified at time of last VaST report (May 17th): reports of myocarditis after COVID-19 vaccination did not differ from expected baseline rates
 - Multiple causes of myocarditis, including: viral infections (cold viruses, COVID-19), bacterial infections (Lyme disease), etc.
- Providers should report events of myocarditis/pericarditis following COVID-19 vaccination into VAERS
- Further review, analysis and information pending from CDC

Moderna's Preliminary TeenCOVE study results

Moderna Announces TeenCOVE Study of its COVID-19 Vaccine in Adolescents Meets Primary Endpoint and Plans to Submit Data to Regulators in Early June

May 25, 2021

- Moderna's phase 2/3 TeenCOVE study enrolled 3,732 participants aged 12-17 years
- Randomized 2:1 to receive the Moderna COVID-19 vaccine (100 mcg dose) or placebo
- Immunogenicity was non-inferior compared to clinical trial adult comparator group
- Vaccine efficacy was 100% after 2 doses (0 cases in vaccine group vs. 4 cases in placebo group)
- No safety concerns identified
- Plan to submit data to FDA in early June

Protein-Based (Protein Subunit) Vaccines Acellular subunit vaccines that contain proteins but no genetic material

- Whole proteins or fragments
- Some on nanoparticles
- Some with adjuvants

All made using living organisms, such as bacteria and yeast, which require substrates on which to grow them, and strict hygiene to avoid contamination

More expensive to produce than mRNA vaccines

Advantages

- Incapable of causing disease, very safe
- Suitable for people with compromised immune systems
- Stable
- Familiar: HBV, acellular pertussis

Novavax

- Protein subunit vaccine, adjuvanted recombinant on nanoparticles
- 2-dose 21 days apart; stable 2-8°C; no diluent
- Preclinic and <u>phase 1/2 trials</u> in 131 participants showed IgG against spike protein exceeded natural infection; reactogenicity low and associated with adjuvant

SARS-CoV-2 recombinant nanoparticle spike protein vaccine with Matrix-M adjuvant: NVX-CoV2373

Last Week

<u>Sept</u> Phase 3 in 15k in UK 96% against original coronavirus

86% against B.1.1.7

49% against B.1.351 - modifying

Novavax UK Phase 3 Published

- RCT, double-blind study in 18-84yo in 33 UK sites
- Excluded previous COVID-19, pregnancy, immunocompromised
 - HIV on ARTs
- 400 received flu shot with dose 1

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O Comments (I)

Efficacy of the NVX-CoV2373 Covid-19Vaccine Against the B.I.I.7 Variant

Paul T. Heath, Eva P. Galiza, David Neil Baxter, Marta Boffito, Duncan Browne, Fiona Burns, David R. Chadwick, Rebecca Clark, Catherine Cosgrove, Dames Galloway, Anna L. Goodman, Amardeep Heer, Andrew Higham, Shalini Iyengar, Arham Jamal, Christopher Jeanes, Philip A. Kalra, Christina Kyriakidou, Daniel F. McAuley, Agnieszka Meyrick, Angela M. Minassian, Jane Minton, Patrick Moore, Imrozia Munsoor, Helen Nicholls, Orod Osanlou, Jonathan Packham, Carol H. Pretswell, Alberto San Francisco Ramos, Dinesh Saralaya, Ray P. Sheridan, Richard Smith, Roy L. Soiza, Pauline A. Swift, Dema C. Thomson, Jeremy Turner, Marianne Elizabeth Viljoen, Gary Albert, Iksung Cho, Filip Dubovsky, Greg Glenn, Joy Rivers, Andreana Robertson, Kathy Smith, Seth Toback

doi: https://doi.org/10.1101/2021.05.13.21256639

This article is a preprint and has not been peer-reviewed [what does this mean?]. It reports new medical research that has yet to be evaluated and so should *not* be used to guide clinical practice.

Defining the Primary Endpoint

Primary endpoint efficacy of NVX-CoV2373 against first occurrence of virologically confirmed symptomatic mild, moderate, or severe Covid-19, with onset at least 7 days after second vaccination in participants who were seronegative at baseline

Symptomatic Covid-19 was defined according to FDA criteria

Symptoms of suspected Covid-19 were monitored throughout the trial and collected using an electronic symptom diary for at least 10 days

At the onset of suspected symptoms, respiratory specimens from nose and throat collected daily over 3-day period to confirm infection and a clinical assessment was performed

Virological confirmation was performed using PCR

Novavax UK Phase 3 Results

- Sept 28 Nov 28 enrolled and randomized 15,187
 - 27.2% 65 or older
 - 44.7% with comorbidies

4.2% Ab positive

Per Protocol VE

- 10 cases in vaccinated, 96 among placebo: VE against virologically confirmed symptomatic COVID >7d after 2nd shot 89.7% (95% CI, 80.2-94.6)
 - No hospitalizations or deaths in vaccine group; 5 severe in placebo ٠
 - 96.4% (73.8-99.5) against original strain ٠
 - 86.3% (71.3-93.5) against B.1.1.7 ٠
- VE among ≥65 years was 88.9% (95% CI, 12.8 to 98.6) ٠
- VE from 14 days after dose 1 was 83.4% (95% CI, 73.6 to 89.5) ٠

٠

Safety: Local AEs

- Among subgroup 2310 participants
- NVX-CoV2373 recipients reported more solicited local AEs than placebo
 - 1st dose 57.6% vs. 17.9%
 - $_{\odot}$ 2^{nd} dose 79.6% vs. 16.4%
- Most events mild or moderate and of short duration
 - \circ $\,$ 2.3 and 1.7 days after 1st $\,$
 - \circ 2.8 and 2.2 days after 2nd
- More frequent among 18-64yo than older

Safety: Systemic

- NVX-CoV2373 recipients reported higher frequencies of solicited systemic adverse events than placebo recipients
 - After 1st: 45.7% vs. 36.3%
 - \circ After 2nd 64.0% vs. 30.0%
- Most events mild or moderate and of short duration
- Fever in 2.0% and 4.8% of NVX-CoV2373 participants after 1st and 2nd doses
- More frequent among 18-64yo than older

"One related serious adverse event was reported in an NVX-CoV2373 recipient (myocarditis), which occurred 3 days after the second dose and was considered a potentially immune-mediated condition; an independent SMC considered the event most likely a viral myocarditis. The participant recovered."

Novavax : US Timeline Update

Dec Phase 3 PREVENT-19 trial in 30k in 115 sites in US and Mexico of target populations

- Feb 22 completed enrolment
- May 3 announced including 3k 12-17 adolescents

FDA EUA dossier expected May 2021

July shipping 1.1B doses to COVAX (GAVI, WHO, Coalition for Epidemic Preparedness Innovations)

Cov-Boost Study

- UK study at 18 sites to inform UK's fall booster program
- Test 7 vaccines as booster doses for people <a>30yo who are already fully vaccinated with two doses of a different authorized vaccine
 - AztraZeneca, Pfizer, Moderna, Novavax, Valneva, Curevac, Janssen plus control formulation
- May 19 began enrolling 2886 volunteers
 - Initial safety and immunologic results by September
 - Follow up 1y
- (Unique from ComCov which mixes first and second doses AZ and Pfizer)

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