

New Hampshire Coronavirus Disease 2019 Weekly Partner Call

July 8, 2021

Ben Chan Elizabeth Talbot Beth Daly Lindsay Pierce

Thursday noon-time partner call will focus on science, medical, and vaccine updates with time for Q&A

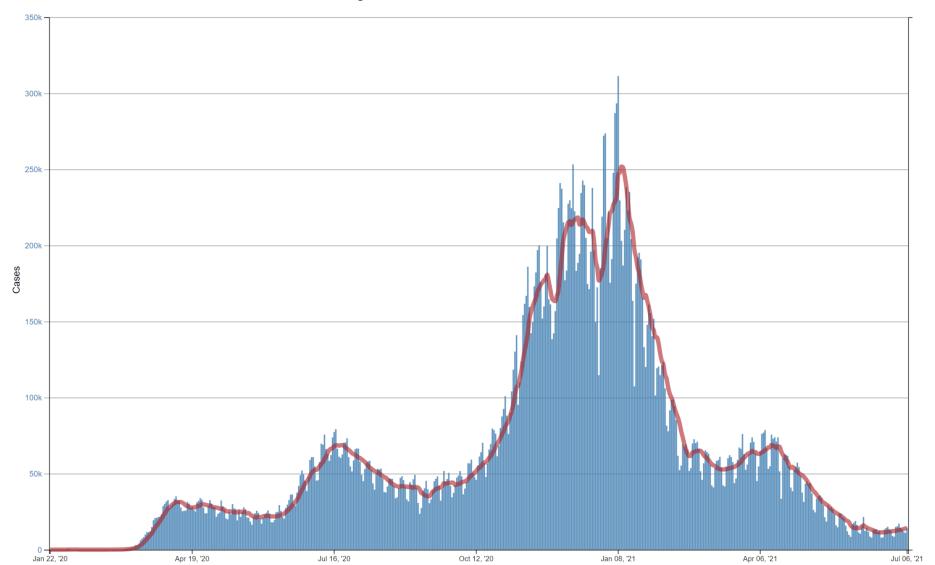


Agenda

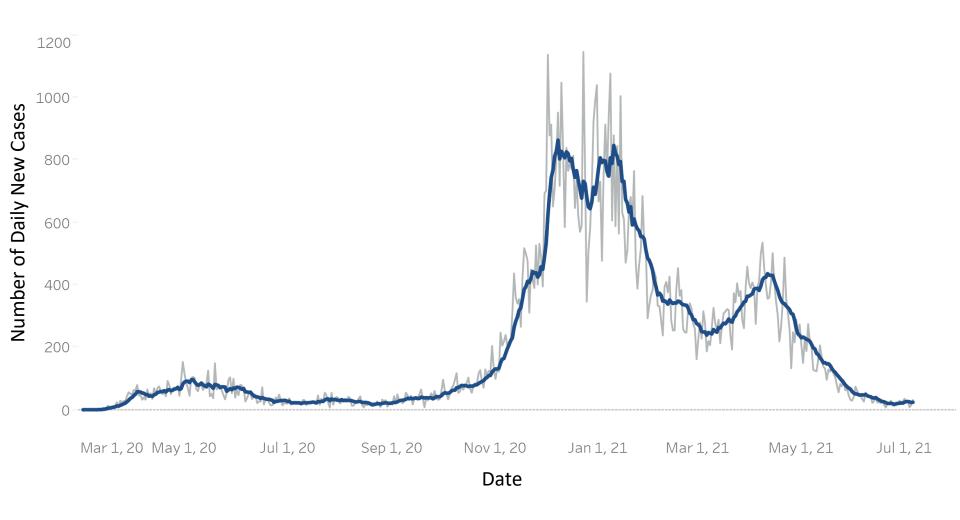
- Epidemiology update
- MMWR Publication: Use of mRNA COVID-19 vaccines after reports of myocarditis among vaccine recipients (update from the ACIP)
- <u>NEJM Publication</u>: Prevention and attenuation of COVID-19 with Pfizer-BioNTech and Moderna Vaccines
- Questions & Answers (Q&A)



U.S. National Daily Incidence of COVID-19

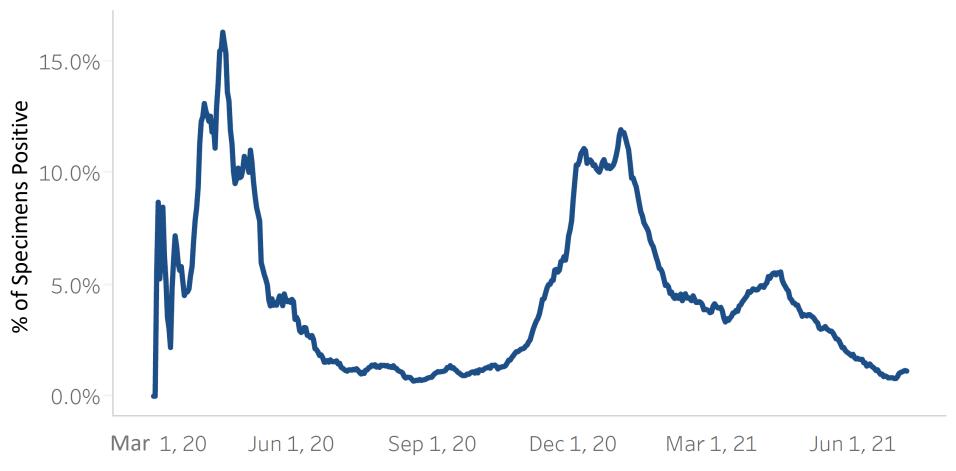


Number of New COVID-19 Cases per Day in NH





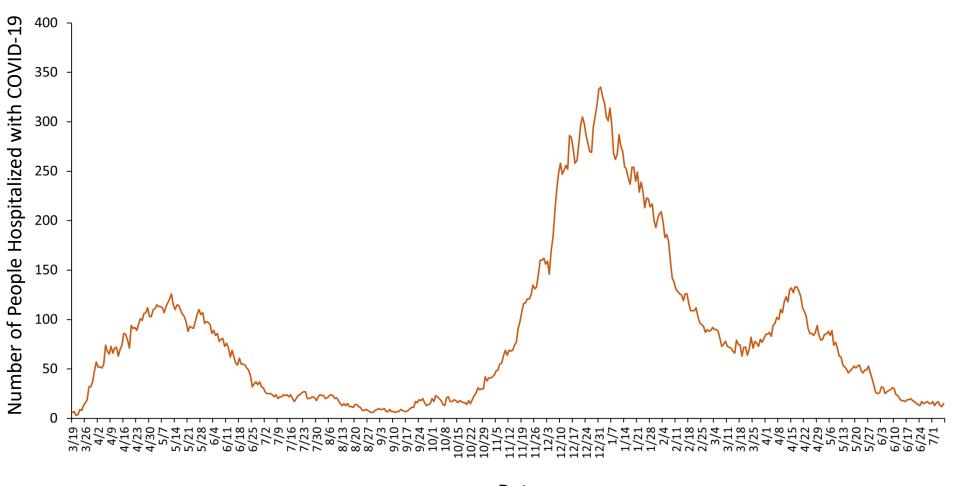
% of Tests (Antigen and PCR) Positive for COVID-19 (7-Day Average)



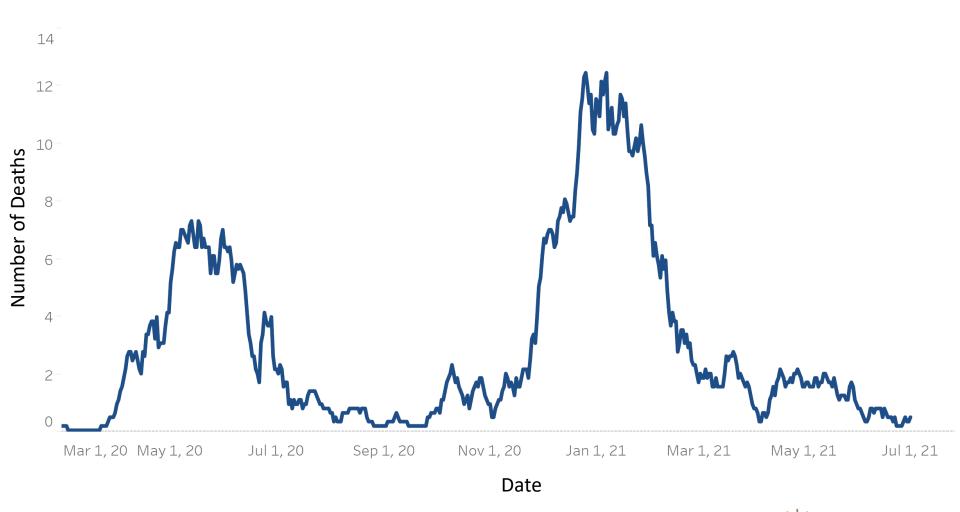
Date Laboratory Test Completed



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



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





Level of Community Transmission

Statewide Level of Transmission

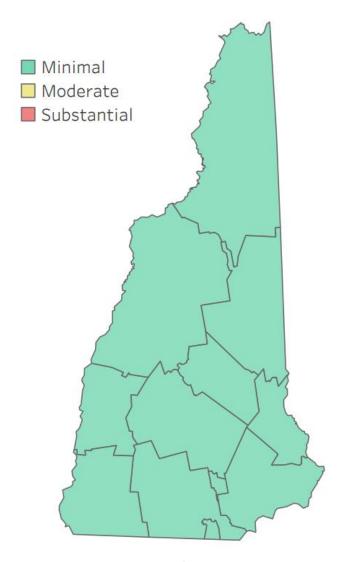
Minimal

New Cases per 100k over 14 days

23.5

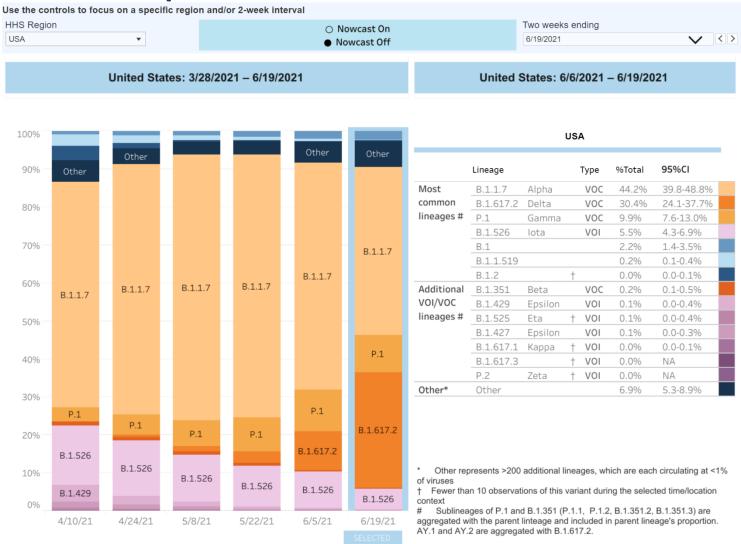
7-Day Total Test Positivity Rate

1.1%





Variant Proportions in the U.S.



Collection date, two weeks ending



Variant Proportions in the U.S.

Use the controls to focus on a specific region and/or 2-week interval

HHS Region

USA

▼

Nowcast On

Nowcast Off

6/19/2021

▼

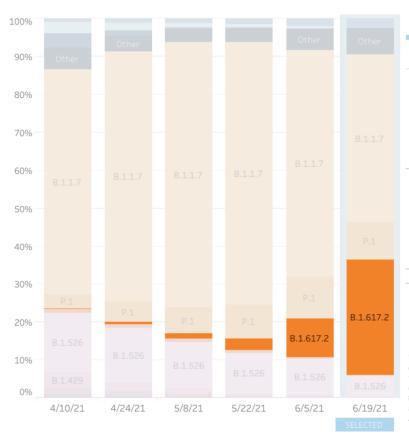
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Nowcast Off

United States: 3/28/2021 - 6/19/2021

United States: 6/6/2021 - 6/19/2021

USA



Collection da	to two	Mooks	andina

	Lineage			Tupo	%Total	95%CI
	Lineage			Туре	7010tai	9370CI
Most	B.1.1.7	Alpha		VOC	44.2%	39.8-48.8%
common	B.1.617.2	Delta		VOC	30.4%	24.1-37.7%
lineages#	P.1	Gamma		VOC	9.9%	7.6-13.0%
	B.1.526	lota		VOI	5.5%	4.3-6.9%
	B.1				2.2%	1.4-3.5%
	B.1.1.519				0.2%	0.1-0.4%
	B.1.2		†		0.0%	0.0-0.1%
Additional	B.1.351	Beta		VOC	0.2%	0.1-0.5%
VOI/VOC	B.1.429	Epsilon		VOI	0.1%	0.0-0.4%
lineages#	B.1.525	Eta	†	VOI	0.1%	0.0-0.4%
	B.1.427	Epsilon		VOI	0.1%	0.0-0.3%
	B.1.617.1	Карра	†	VOI	0.0%	0.0-0.1%
	B.1.617.3		†	VOI	0.0%	NA
	P.2	Zeta	+	VOI	0.0%	NA
Other*	Other				6.9%	5.3-8.9%

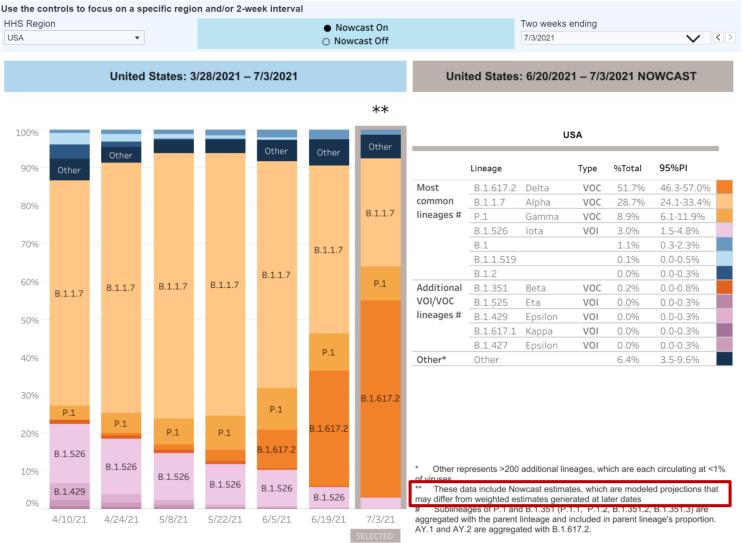
[#] Sublineages of P.1 and B.1.351 (P.1.1, P.1.2, B.1.351.2, B.1.351.3) are aggregated with the parent linteage and included in parent lineage's proportion. AY.1 and AY.2 are aggregated with B.1.617.2.



Other represents >200 additional lineages, which are each circulating at <1%

[†] Fewer than 10 observations of this variant during the selected time/location context

Variant Proportions in the U.S.



Collection date, two weeks ending



Early Release / Vol. 70

Use of mRNA COVID-19 Vaccine After Reports of Myocarditis
Among Vaccine Recipients: Update from the Advisory Committee on
Immunization Practices — United States, June 2021

- As of June 11, 2021, there have been ~296 million doses of an mRNA COVID-19 vaccine administered in the U.S.
- 1,226 reports of myocarditis/pericarditis ("myocarditis") after mRNA vaccination from 12/29/20 – 6/11/21 reported into VAERS
 - Median age: 26 years
 - 58% under the age of 30
 - 77% male
 - Median of 3 days onset after vaccination
 - 76% occurred after receipt of dose 2 of an mRNA vaccine



Subgroup Analysis of Persons Aged <30 Years

- CDC reviewed medical records on 484 patients with myocarditis reported from May 1^{st} June 11^{th}
- 323 met CDC's case definition for myocarditis, pericarditis, or myopericarditis
 - Median age: 19 years
 - 90% male
 - Median of 2 days onset after vaccination
 - 92% of patients experienced onset of symptoms within 7 days of vaccination
 - 96% were hospitalized, but "acute clinical courses were generally mild"
 - 95% with a known outcome were discharged by the time of review
 - No deaths
 - Treatment data is preliminary and incomplete, but "many patients have experienced resolution of symptoms with conservative treatment"



	No. per million vaccine doses administered in each age group $(yrs)^{\dagger}$						
Sex/Benefits and harms from mRNA vaccination	12-29	12–17	18-24	25–29	≥30		
Male							
Benefit							
COVID-19 cases prevented [§]	11,000	5,700	12,100	15,200	15,300		
Hospitalizations prevented	560	215	530	936	4,598		
ICU admissions prevented	138	71	127	215	1,242		
Deaths prevented	6	2	3	13	700		
Harms							
Myocarditis cases expected ¶	39–47	56-69	45–56	15–18	3–4		
Female							
Benefit							
COVID-19 cases prevented§	12,500	8,500	14,300	14,700	14,900		
Hospitalizations prevented	922	183	1,127	1,459	3,484		
ICU admissions prevented	73	38	93	87	707		
Deaths prevented	6	1	13	4	347		
Harm							
Myocarditis cases expected ¶	4–5	8–10	4–5	2	1		



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ACIP Conclusion and Recommendations

- The benefits of COVID-19 vaccination "clearly outweigh" the risks in ALL populations for which vaccination has been recommended (note: assessment did NOT include potential benefit of preventing long-COVID and MIS-C)
- COVID-19 vaccination continues to be recommended for all persons aged 12+ years
- Continue to monitor outcomes of myocarditis/pericarditis after COVID-19 vaccination
- Providers and the public should be informed about the rare occurrence of myocarditis/pericarditis after receipt of mRNA COVID-19 vaccination



Healthcare Provider Actions

- FDA Fact Sheets for Pfizer-BioNTech and Moderna vaccines have been updated (see <u>FDA website</u>) – providers should use these updated Fact Sheets
- Review CDC's updated "Clinical Considerations for Use of COVID-19
 Vaccines" (new section about people with a history of myocarditis or pericarditis, and changes to the patient counseling section)
- Continue to strongly recommend COVID-19 vaccination for all persons 12+ years of age



ORIGINAL ARTICLE

Prevention and Attenuation of Covid-19 with the BNT162b2 and mRNA-1273 Vaccines

- Prospective cohort study (HEROES-RECOVER): includes healthcare personnel, first responders, and other essential and frontline workers from 6 states
- Active symptom surveillance and weekly nasal swabs (everybody)
- Data collected from 12/14/20 4/10/21
- 3 aims of this study/analysis:
 - Estimate effectiveness of mRNA vaccines in preventing SARS-CoV-2 infection
 - Compare viral RNA loads in infected participants based on vaccination status
 - Evaluate frequency of febrile symptoms and duration of illness based on vaccination status

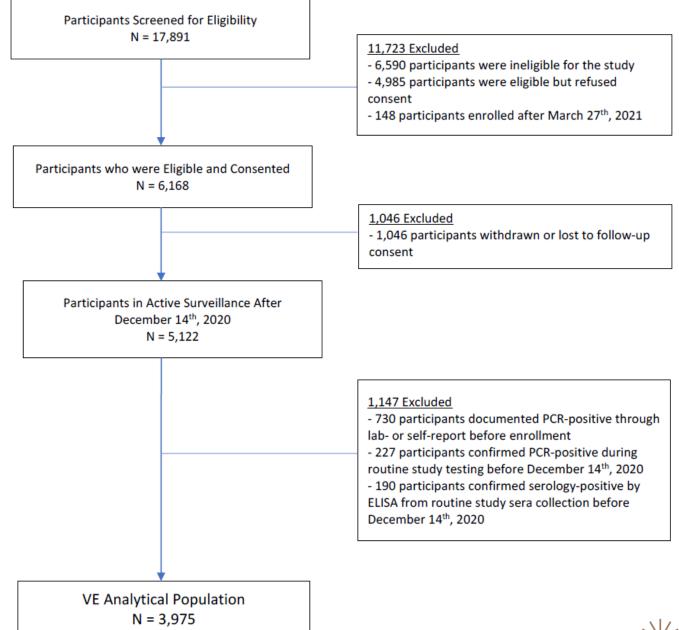


Table 2. Effectiveness of mRNA Vaccines in Preventing SARS-CoV-2 Infection with Full and Partial Vaccination.*								
	naracteristic and accination Status	Contributing Participants†	Pers	on-Days	SARS-CoV-2 Infections	Vaccine Effe	ectiveness <u>‡</u>	
						Unadjusted	Adjusted	
		no.	total no.	median (IQR)	no.	percent (95% CI)	
0	verall							
	Unvaccinated	3964	127,971	19 (8–41)	156	_	_	
	Partially vaccinated	3001	81,168	22 (21–28)	11	86 (74–93)	81 (64–90)	
	Fully vaccinated	2510	161,613	69 (53–81)	5	92 (80–97)	91 (76–97)	



Table 3. Viral RNA Load, Duration of Viral RNA Detection, Frequency of Febrile Symptoms, and Duration of Illness in Vaccinated and Unvaccinated Participants with SARS-CoV-2 Infection.*

•			
Variable	Unvaccinated	Partially or Fully Vaccinated	Difference (95% CI)
Viral RNA load			
No. assessed	155	16	_
Mean — log ₁₀ copies/ml†	3.8±1.7	2.3±1.7	40.2 (16.3–57.3)‡
Duration of viral RNA detection			
No. assessed	155	16	_
Mean — days	8.9±10.2	2.7±3.0	6.2 (4.0–8.4)
Detection of viral RNA for >1 week — no./total no. (%)	113/156 (72.4)	4/16 (25.0)	0.34 (0.15–0.81)§
Febrile symptoms — no./total no. (%)¶	94/149 (63.1)	4/16 (25.0)	0.42 (0.18–0.98)
Total days of symptoms			
No. assessed	148	16	_
Mean — days	16.7±15.7	10.3±10.3	6.4 (0.4–12.3)
Days spent sick in bed			
No. assessed	147	15	_
Mean — days	3.8±5.9	1.5±2.1	2.3 (0.8–3.7)



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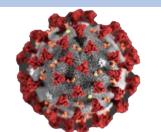
	•							
Variable	Effect of at least Partial Vaccination	Unvaccinated	Partially or Fully Vaccinated	Difference (95% CI)				
Viral RNA load								
No. assessed	40% lower	155	16	_				
Mean — log ₁₀ copies/m	Ι ϯ	3.8±1.7	2.3±1.7	40.2 (16.3–57.3)‡				
Duration of viral RNA detection								
No. assessed	6+ fewer days	155	16	_				
Mean — days		8.9±10.2	2.7±3.0	6.2 (4.0–8.4)				
Detection of viral RNA for > 2 no. (%)	1 week 66% lower risk	113/156 (72.4)	4/16 (25.0)	0.34 (0.15–0.81)§				
Febrile symptoms — no./to	tal no. 58% lower risk	94/149 (63.1)	4/16 (25.0)	0.42 (0.18–0.98)				
Total days of symptoms		_						
No. assessed	6+ fewer days	148	16	_				
Mean — days		16.7±15.7	10.3±10.3	6.4 (0.4–12.3)				
Days spent sick in bed								
No. assessed	2+ fewer days	147	15	_				
Mean — days		3.8±5.9	1.5±2.1	2.3 (0.8–3.7)				



Study Summary and Conclusions

- COVID-19 vaccines prevent both infection (including asymptomatic infection) and disease (i.e., COVID-19)
- Small number of participants with breakthrough infections after vaccination
- mRNA vaccines attenuate infection and disease
- If infected, vaccination leads to:
 - Lower viral loads
 - Shorter duration of viral shedding
 - Lower risk of febrile illness
 - Shorter duration of symptoms/illness
- This will also likely translate into lower risk of transmission





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