



CENTERS FOR DISEASE CONTROL AND PREVENTION

## Administration of COVID-19 Vaccines and Adverse Events

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## Sputnik V (Gam-COVID-Vac)





#### Administration

- Two 0.5 ml separate doses (rAd26 and rAd5) within 21-28 days
- Intra-muscular injection into deltoid muscle (non-dominant side)
- (if not possible, inject into vastus lateralis muscle)





#### Contraindications

- Hypersensitivity to any of the vaccine components
- Severe allergic reactions in the past
- Acute infectious and noninfectious diseases
- Flares of chronic diseases
- Pregnancy and
- Breastfeeding
- Individuals 18 years of age and younger



### Contraindications (component II)

• Severe post-vaccination complications:

✓Anaphylactic shock

✓ Severe generalized allergic reactions

✓ Convulsive disorder

✓ Temperature above 40°C





#### Caution

- Autoimmune diseases (stimulation of the immune system)
- Malignant neoplasms
- Chronic liver and kidney disease
- Endocrine disorders at decompensation stage
- Serious diseases of the hematopoietic system
- Epilepsy and other CNS diseases
- Acute coronary syndrome
- Myocarditis
- Endocarditis
- Pericarditis





#### Adverse Reactions

- Usually within 3 subsequent days (local and systemic reactions)
- Injection site reactions (pain, tenderness, swelling, erythema)
- Flu-like syndrome (fever, chills, myalgia, headache, fatigue, sorethroat)
- NSAID, antihistamines
- Nausea, dyspepsia, loss of appetite, enlarged regional lymph nodes





#### **Adverse Reactions**

- Dizziness
- Nausea/ vomiting
- Dyspepsia
- Loss of appetite
- Pruritus
- Enlarged regional lymph nodes
- Elevated liver transaminase levels, serum creatinine or CPK



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## Oxford–AstraZeneca (Vaxzevria; Covishield)





#### Administration

- Two 0.5 ml doses within 28-84 days
- Intra-muscular injection into deltoid muscle (non-dominant side)

- Protection starts from approximately 3 weeks after the first dose of COVID-19 Vaccine AstraZeneca.
- Individuals may not be fully protected until 15 days after the second dose is administered.





#### Contraindication

- Hypersensitivity to the active substance or to any of the excipients.
- Individuals 18 years old and younger
- Acute phase of disease

✓ The AstraZeneca vaccine does not contain PEG but does contain a related compound called polysorbate 80.





#### Pregnancy

- Limited experience
- Results from the preliminary animal study

• JCVI advises that breastfeeding women may be offered vaccination with the Pfizer BioNTech, Moderna and AstraZeneca COVID-19 vaccines.





#### **Adverse Reactions**

MedDRA SOC	Frequency	Adverse Reactions
Blood and lymphatic system disorders	Uncommon	Lymphadenopathy
Metabolism and nutrition disorders	Uncommon	Decreased appetite
Nervous system disorders	Very common	Headache
5	Uncommon	Dizziness
		Somnolence
Gastrointestinal disorders	Very common	Nausea
	Common	Vomiting
		Diarrhoea
Skin and subcutaneous tissue disorders	Uncommon	Hyperhidrosis
		Pruritus
		Rash
Musculoskeletal and connective tissue	Very common	Myalgia
disorders		Arthralgia
General disorders and administration	Very common	Injection site tenderness
site conditions		Injection site pain
		Injection site warmin
		Injection site pruritus
		Injection site bruising <sup>a</sup>
		Fatigue
		Malaise
		Feverishness
	~	Chills
	Common	Injection site swelling
		Injection site erythema
	1	L Fever <sup>b</sup>

#### Table 1Adverse drug reactions

<sup>a</sup> Injection site bruising includes injection site haematoma (uncommon)

<sup>b</sup> Measured fever ≥38°C





### Prothrombotic Immune Thrombocytopenia

- Very rare (0.0004% 0.001%) 🖙 platelet activating antibody
- Cerebral venous thrombosis
- Portal vein thrombosis  $\Box$
- Splenic vein thrombosis
- Hepatic vein thrombosis
- Arterial thrombosis
- Deep vein thrombosis
- Pulmonary embolism

✓ *Prophylactic antiplatelet and anticoagulant is not recommended* 





#### Symptoms

- Dyspnea
- Chest pain
- Abdominal pain
- Cold extremeties
- Blurred vision and diplopia
- Paresthesia
- Aphasia
- Headache
- Petechiae



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## Sinopharm





#### Administration

- Two 0.5 ml separate doses within 21-28 days
- Intra-muscular injection into deltoid muscle (non-dominant side)





#### Contraindication

- Hypersensitivity to the active substance or to any of the excipients.
- Individuals 18 years old and younger
- Acute phase of disease
- Pregnancy and lactation





#### **Adverse Reactions**

- Injection site reactions (pain, tenderness, swelling, redness)
- Fever
- Fatigue
- Headache
- Diarrhea

- $\,\circ\,$  Nausea and vomiting
- $\circ$  Muscle pain
- $\odot$  Arthralgia
- $\circ$  Drowsiness
- $\circ$  Dizziness



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## Bharat (COVAXIN)





#### Administration

- Two 0.5 ml separate doses within 28 days
- Intra-muscular injection into deltoid muscle (non-dominant side)





#### Contraindication

- Hypersensitivity to the active substance or to any of the excipients.
- Individuals 18 years old and younger
- Acute phase of disease
- Pregnancy and lactation





#### Adverse Reactions

- Injection site reactions (pain, tenderness, swelling, redness)
- Headache
- Fever
- Malaise
- Nausea and vomiting
- Rashes





#### Caution

- Appropriate medical treatment and supervision
- Close observation for at least 15-30 minutes
- Susceptibility to bleeding:
- Anticoagulant therapy
- Thrombocytopenia
- Hemophilia





### Susceptibility to Bleeding

- Fine needles
- Injection site compression

#### Medication:

- Antiplatelets  $\checkmark$
- NOAC  $\checkmark$
- VKA 🖙 INR 4
- Heparin/ LMWH 🖙 interval
- Thrombocytopenia (Plt at least 30000





#### **COVID-19 History**

- Vaccination after the course of illness (fever) and of cessation home quarantine is unimpeded 
  6 months
- Plasma therapy or mAb @ 3 months
- More intense adverse reactions





### Allergy History

- Drug allergy or anaphylaxis
- Seasonal allergy or anaphylaxis
- Food allergy or anaphylaxis
- Mild reaction after first injection







#### **Other Vaccines**

- Rabies/ Tetanus vaccine 🖙 14 days
- Influenza 🖙 7 days





#### Pregnancy

- Increased susceptibility to infection
- Increased adverse effects from infection (e.g. preterm labor)
- AstraZeneca <br/>  ${\ensuremath{\mathbb C}}$  limited evidence  $\checkmark$

#### Lactation

- AstraZeneca <br/>  ${\bf I}$  limited evidence  $\checkmark$
- No need for cessation of lactation





#### Immunosuppression

Decreased immunologic response to vaccine

✓ Splenectomy

- ✓ Chemotherapy
- ✓Immunosuppressive therapy
- ✓ Prednisolone (more than 20mg daily)
- ✓ ANC< 500; ALC< 200





#### Immunosuppressive Therapy

- None of the vaccines is live virus.
- Full vaccination ought to be done at least 2 weeks before immunosuppressive therapy initiation.
- Risk of disease activity should be taken into consideration.





#### Medication

- Corticosteroid pulse therapy 🖙 3-5 days after vaccination
- Vaccination IP 14 days after corticosteroid pulse therapy
- Cyclophosphamide F 7 days after vaccination
- Tofacitinib 🖙 7 days after vaccination
- Fingolimod 14-28 days after vaccination
- Rituximab 🖙 28 days after vaccination
- Vaccination 🖙 4 months after rituximab
- Chemotherapy 🖙 14 days after vaccination





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# Vitamins and Supplements





#### Vitamin C

- Insufficient data to recommend either for or against the use of vitamin D, vitamin C and zinc for the treatment of COVID-19.
- Antioxidant properties
- Ameliorating inflammation and vascular injury
- Because patients who are not critically ill with COVID-19 are less likely to experience oxidative stress or severe inflammation, the role of vitamin C in this setting is unknown.





#### Vitamin D

- Modulating innate and adaptive immune responses
- Increase the levels and activity of T regulatory cells in healthy individuals and patients with autoimmune diseases







- Increased intracellular zinc concentrations impair RNA virus replication.
- Long-term zinc supplementation @ copper deficiency:
- Anemia
- Leukopenia
- Myelopathy
- Paresthesia
- Ataxia
- Spasticity







## Thanks for Your Attention