

Alberta COVID-19 Immunization Program Update

Change in AstraZeneca Vaccine Eligibility

Please see below for some important information about COVID-19 immunization in Alberta.

Key Messages AstraZeneca

- Across Canada, eligibility for Astra Zeneca is being paused for those **under the age of 55** while more investigation happens on Vaccine-Induced Prothrombotic Immune Thrombocytopenia (VIPIT). See full response from the National Advisory Committee on Immunization here: <https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci/rapid-response-recommended-use-astrazeneca-covid-19-vaccine-younger-adults.html>
- The vaccine remains a good choice for those who are at risk of severe outcomes from COVID-19 based on age who would otherwise have to wait several months to access a vaccine.
- Diagnostic and treatment information is available at <https://covid19-sciencetable.ca/sciencebrief/vaccine-induced-prothrombotic-immune-thrombocytopenia-vipit-following-astrazeneca-covid-19-vaccination/>
- If this condition is identified, it should be reported immediately by completing and submitting [an AEFI report form](#). If unable to complete the form, call 1-855-444-2324 (1-855-444-CDCI).

AstraZeneca Eligibility Change

Due to emerging evidence that the AstraZeneca vaccine is linked to an immune-mediated pro-thrombotic condition, the Canadian Council of Chief Medical Officers of Health and National Advisory Committee on Immunization have recommended that use of this vaccine be paused in people under the age of 55. The pause is in order to gather more information about this condition, termed Vaccine-Induced Prothrombotic Immune Thrombocytopenia (VIPIT). Note that some other countries are using the term Virus/Vaccine-Induced as COVID-19 infection also induces hypercoagulability, and a similar mechanism may be present in some of these cases.

Based on currently available evidence, this syndrome does not appear to be linked to pre-existing risk factors for clotting and it is not clear at the moment whether there are particular characteristics that put individuals at higher risk of experiencing this outcome. The currently reported frequency of this syndrome ranges from 1/25,000 doses in Norway to 1/1 million doses in the UK, with clotting events happening about 4 to 20 days after immunization. None of these events have been reported to date in Canada. There is no linkage of this syndrome to mRNA vaccines (Pfizer and Moderna).

It is important to remember that those who experience a COVID-19 infection have a very high risk of clotting events, and that a decision of a patient to take this vaccine or not, should weigh the benefits of a high level of protection from severe COVID-19 outcomes against the rare risk of this syndrome. This deliberation should take into account the fact that COVID-10 cases and exposure risk are rising in the province. The pause in offering this vaccine to those under the age of 55 is due to the fact that younger people have a lower risk of severe outcomes from COVID-19 infection, and more information is needed on the details of VIPIT to best provide informed consent, balancing benefits and risks of this particular

vaccine. There have been a variety of responses to this issue in different countries, based on risk assessment, epidemiology, and availability of other vaccine products.

Those who have already received the AstraZeneca vaccine and who may be worried about risks of blood clots should be informed that the risk is very low; however, if they experience any of the following symptoms within 4 to 20 days after immunization, they should immediately seek medical attention.

Symptoms include a severe headache that does not go away; a seizure; difficulty moving part of the body; new blurry vision that does not go away; difficulty speaking; shortness of breath; chest pain; severe abdominal pain; new severe swelling; pain; or colour change of an arm or a leg.

If a patient presents with one or more of these symptoms within 4 to 20 days after receiving an AstraZeneca vaccine, a hematology consult would be indicated. Additional information on clinical treatment can be found at <https://covid19-sciencetable.ca/sciencebrief/vaccine-induced-prothrombotic-immune-thrombocytopenia-vipit-following-astrazeneca-covid-19-vaccination/>. If the patient received AstraZeneca vaccine more than 20 days prior, they would not be considered to be at risk of this syndrome.

If this condition is identified, it should be reported immediately by completing and submitting [an AEFI report form](#). If unable to complete the form, call 1-855-444-2324 (1-855-444-CDCI). More information is available at: <https://www.albertahealthservices.ca/info/Page16187.aspx>.

Decisions on the type of second dose that will be offered to those under 55 years of age who have been vaccinated with AstraZeneca vaccine will be determined based on the latest evidence and research. We will review evidence as it emerges to determine options for completing the vaccine series with other vaccine products, if needed.