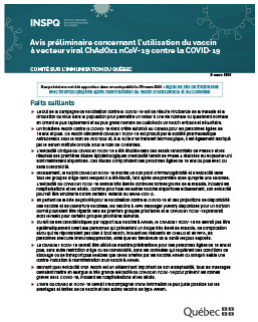
Preliminary opinion of the Comité sur l'immunisation du Québec concerning the use of the viral vector vaccine ChAdOx1 nCoV-19 against COVID-19



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Further details are provided in the advisory Use of the AstraZeneca vaccine against COVID-19 in the context of the signal of thrombosis with thrombocytopenia following vaccination .

Highlights

- The aim of the vaccination campaign against COVID-19 is to reduce the incidence of the disease and the circulation of the virus in the population to allow a return to a normal or almost normal life by offering as quickly and as many of Quebecers an effective and safe vaccine.
- A third vaccine against COVID-19 has just been authorized in Canada for people aged 18 and over. This vaccine called ChAdOx1 nCoV-19 is produced by the pharmaceutical company AstraZeneca under the name AZD1222 and, following a technology transfer, it is also manufactured by the Serum Institute of India under the name Covishield.
- The clinical efficacy of ChAdOx1 nCoV-19 has been studied in randomized Phase 3 trials and the results of the first Phase 4 epidemiological field efficacy studies performed in the UK are now available. These studies included people aged 18 years or older with or without comorbidity.
- Overall, the ChAdOx1 nCoV-19 vaccine shows a good immunogenicity and efficacy profile in all age groups in which it has been studied, both after a first dose and after a second. The efficacy of ChAdOx1 nCoV-19 appears to be very high against severe forms of the disease, including hospitalizations and deaths. As with all other vaccines currently available, its effectiveness could be reduced against certain variants of SARS-CoV-2.
- Starting from the priority list for vaccination against COVID-19 and the projections of vaccine availability and vaccination coverage, the messenger RNA (mRNA) vaccines available for a given timeframe could be allocated to the first priority groups and the ChAdOx1 nCoV-19 would then take over for some subsequent priority groups.
- Because of its characteristics compared to mRNA vaccines, ChAdOx1 nCoV-19 should not be routinely offered to people who are at very high risk of disease, complication and/or who would not respond well to any vaccine, including residents of CHSLDs and RPAs, people with immunosuppression, as well as the most exposed healthcare workers.
- ChAdOx1 nCoV-19 should be used preferentially for persons aged 18 years and older, without further age or comorbidity restrictions, in settings that require more flexible storage or transport conditions than those offered by mRNA vaccines or when there is a contraindication to the administration of an mRNA vaccine.
- Knowing that the effectiveness of a vaccine is an important determinant of its acceptability, all messages should highlight the very high effectiveness of ChAdOx1 nCoV-19 in preventing severe forms of COVID-19, including hospitalizations and deaths. .
- The offer of ChAdOx1 nCoV-19 should be accompanied by the most accurate information possible on the advantages and limits of this vaccine and other mRNA vaccines.

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