

CBER Plans for Monitoring COVID-19 Vaccine Safety and Effectiveness

Steve Anderson, PhD, MPP
Director, Office of Biostatistics & Epidemiology, CBER

ACIP Meeting October 30, 2020

FDA Vaccine Surveillance Programs: Post-Licensure

1. Passive Surveillance of Vaccines

- a) Vaccine Adverse Event Reporting System (VAERS)
 - Management shared by CDC and FDA

2. Active Surveillance Monitoring Program

- a) FDA BEST
- b) FDA-CMS partnership

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VAERS



Vaccine Adverse Event Reporting System

Co-managed by CDC and FDA





VAERS Vaccine Adverse Event Reporting System www.vaers.hhs.gov

About VAERS

Report an Adverse Event

VAERS Data

Resources

Submit Follow-Up Information

Have you had a reaction following a vaccination?

- 1. Contact your healthcare provider.
- Report an Adverse Event using the VAERS online form or the new downloadable PDF. New!

Important: If you are experiencing a medical emergency, seek immediate assistance from a healthcare provider or call 9-1-1. CDC and FDA do not provide individual medical treatment, advice, or diagnosis. If you need individual medical or health care advice, consult a qualified healthcare provider.

¿Ha tenido una reacción después de recibir una vacuna?

- 1. Contacte a su proveedor de salud.
- Reporte una reacción adversa utilizando el formulario de VAERS en línea o la nueva versión PDF descargable. Nuevo!



What is VAERS?



REPORT AN ADVERSE EVENT

Review reporting requirements and submit reports.



SEARCH VAERS DATA

Download VAERS Data and search the CDC WONDER database.



REVIEW RESOURCES

Find materials, publications, learning tools, and other resources.



SUBMIT FOLLOW-UP INFORMATION

Upload additional information related to VAERS reports.

1. VAERS – FDA CBER Efforts



- CDC presentation covered VAERS so will provide summary of FDA efforts
- FDA and CDC have weekly and bi-weekly coordination meetings on VAERS and Pharmacovigilance activities between CBER OBE and OBE Division of Epidemiology (DE) and CDC Immunization Safety Office
- CBER DE Physicians will be reviewing the serious adverse event reports from VAERS for COVID-19 vaccines – review of individual reports, death reports, conduct aggregate analyses, case-series, etc.
- FDA will utilize statistical data-mining methods to detect disproportional reporting of specific vaccine-adverse event combinations to identify AEs that are more frequently reported

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FDA Vaccine-Legislative Authorization Active Surveillance

Legislation, mandates and Current Surveillance

FDA Amendments Act of 2007:

Directed FDA to develop an active risk identification and analysis system –
 such as Sentinel, and later BEST, and others and covers >100 million persons

Prescription Drug User Fee Act VI (2017)

- Discussion between FDA and Industry on Priority Areas Renewed every 5 yrs
- Provides resources/funding for Sentinel, BEST, real-world evidence, etc.

COVID-19 Vaccine Monitoring Data Considerations



- Rapid data access for near real time surveillance
- Large databases of tens of millions of patients for evaluating vaccine rare serious adverse events
- Data representing integrated care spectrum outpatient, physician, inpatient, etc.
- High quality data to assess and confirm potential adverse events or safety concerns for COVID-19 vaccines
- Data with significant clinical detail or medical chart access

2a. FDA Biologics Effectiveness and Safety (BEST) System

- Several partners Acumen, IBM Watson, IQVIA, OHDSI,
 HealthCore, Humana, Optum, Healthagen, MedStar,
 OneFlorida, and Academic organizations
- Represents variety of healthcare settings inpatient, emergency department, outpatient, etc.
- Emphasis on inclusion of Electronic Health Record (EHR) data, some claims data and linked Claims-EHR data

BEST Initiative Expansion



CLAIMS Data Sources

Data Sources	Type	Patients (millions)
MarketScan	Claims	254
Blue Health Intelligence	Claims	33.6
Optum	Claims	70
HealthCore	Claims	56
Healthagen	Claims	26
OneFlorida Clinical Research Consortium (Medicaid)	Claims	6.7

BEST Initiative Expansion

EHR Data Sources



Data Sources	Туре	Patients (millions)
MedStar Health	EHR	6
IBM Explorys	EHR	90
Regenstrief Institute	Claims and EHR	20.2
Columbia University	EHR	6.6
University of Colorado	EHR	17
University of California San Francisco	EHR	3.2
PEDSnet Clinical Research Consortium	EHR	6.2
Optum EHR	EHR	105
OneFlorida Clinical Research Consortium	EHR	5.6
OneFlorida Clinical Research Consortium	Linked EHR-Claims	1.5
MarketScan Explorys Claims-EHR (CED)	Linked EHR-Claims	5.5
Optum	Linked EHR-Claims	50





A modern surveillance system that is able to perform a diversity of queries and studies.



2b. CMS (Center for Medicare & Medicaid Services)

Federal Partners

- Ongoing FDA-CMS partnership on vaccine safety since 2002
- Data cover very large population of approximately 55 million elderly US beneficiaries <u>></u>65yrs of age
- >92% of US elderly use Medicare so database represents the elderly population and not a sample
- Represents variety of healthcare settings inpatient, outpatient, etc.
- Consists of claims data with access to medical charts





 Not all claims and EHR data systems can be used to address a vaccine safety or effectiveness regulatory question

- Each data system has its limitations
 - Populations, healthcare settings, clinical detail, necessary parameters, data lag, exposures and outcomes that are captured





"Near real-time surveillance" or rapid-cycle analyses (RCA)

- FDA plans on monitoring 10 -20 safety outcomes of interest to be determined based on:
 - Pre-market review of sponsor safety data submitted to FDA
 - In coordination with federal partners, international regulatory partners and organizations, academic experts, others
 - Literature and regulatory experience with similar vaccines, novel vaccine platforms, and using other relevant data
 - FDA plans on using <u>CMS data</u> for COVID-19 vaccine RCA near real time with efforts

FDA Safety Surveillance of COVID-19 Vaccines: <u>DRAFT</u> Working list of possible adverse event outcomes ***Subject to change***

- Guillain-Barré syndrome
- Acute disseminated encephalomyelitis
- Transverse myelitis
- Encephalitis/myelitis/encephalomyelitis/ meningoencephalitis/meningitis/ encepholapathy
- Convulsions/seizures
- Stroke
- Narcolepsy and cataplexy
- Anaphylaxis
- Acute myocardial infarction
- Myocarditis/pericarditis
- Autoimmune disease

- Deaths
- Pregnancy and birth outcomes
- Other acute demyelinating diseases
- Non-anaphylactic allergic reactions
- Thrombocytopenia
- Disseminated intravascular coagulation
- Venous thromboembolism
- Arthritis and arthralgia/joint pain
- Kawasaki disease
- Multisystem Inflammatory Syndrome in Children
- Vaccine enhanced disease

FDA Experience with Near Real Time Surveillance / RCA



FDA and CMS - RCA

 Conduct "near real-time" surveillance for annual influenza vaccine and Guillain-Barre Syndrome(GBS) since 2007

FDA Sentinel – Rapid Surveillance

 Near real-time, rapid surveillance in 2017-2018 seasonal influenza vaccine – evaluation of 6 health outcomes of interest



FDA COVID-19 vaccine safety surveillance Plans

Epidemiological analyses

- Need capability to resolve potential safety signals identified from near real-time surveillance, TreeScan signal detection efforts and other sources
- Rapid queries and small epidemiological studies
- Larger self-controlled, cohort, comprehensive protocol-based studies

3. COVID-19 Vaccine <u>Effectiveness</u> Surveillance Plans



- COVID-19 vaccine(s) there may be limited information available at licensure on level and duration of effectiveness
- Manufacturers may conduct certain COVID-19 vaccine effectiveness postlicensure studies
- FDA may conduct COVID-19 vaccine effectiveness studies
 - General effectiveness studies including subpopulations of interest
 - Duration of protection studies
 - Others
- FDA coordinating COVID-19 Vaccine Effectiveness efforts with the CDC NCIRD through monthly, bi-monthly meetings





 Extensive experience with the data and methods needed to conduct vaccine effectiveness studies

 Produced several vaccine effectiveness and relative vaccine effectiveness studies for influenza and zoster vaccines

Conducted duration of effectiveness analysis of Zostavax vaccine

4. US Government-wide Efforts COVID-19 Vaccine Monitoring



Large US Government Effort

FDA Coordinating its COVID-19 vaccine safety and effectiveness monitoring efforts with other government agencies:

- Centers for Disease Control (CDC)
- Centers for Medicare Medicaid Services (CMS)
- Veterans Administration (VA)
- National Institutes of Health
- Department of Defense
- Indian Health Services

4. US Government-wide Efforts COVID-19 Vaccine Monitoring (2)



Large US Government Effort

- Weekly meetings between FDA and CDC, regular meetings with VA and CMS
- Planned sharing of protocols, discussion safety and effectiveness outcomes of interest
- Coordinated planning and conduct of surveillance activities such as near real time surveillance/ RCA between FDA, CDC, CMS, VA, and DOD

Acknowledgments



- Richard Forshee
- Azadeh Shoaibi
- Hui-Lee Wong
- CBER Surveillance Team
- Manette Niu
- CBER OBE Colleagues
- CDC Colleagues
- CMS Colleagues
- VA Colleagues
- FDA Partners: Acumen, IBM Watson and new partners in FY2021



Thank you!

Questions?