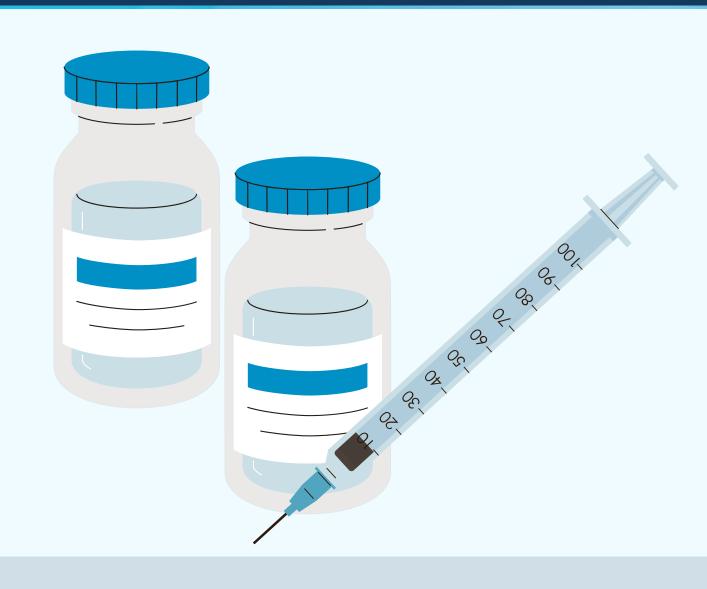


# IMSURE ACTIVE SURVEILLANCE PROGRAMME:

ADVERSE EVENT FOLLOWING IMMUNIZATION (AEFI) POST COVID-19 VACCINATION AMONG TWO-DOSE VACCINE RECIPIENTS IN MALAYSIA

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# INTRODUCTION

- The COVID-19 vaccination provides different levels of protection against SAR-CoV-2 infection to vaccine recipients.
- Post-Vaccination COVID-19 Immunity and Disease Surveillance in Malaysia (IMSURE) is a surveillance programme initiated in conjunction with the COVID-19 National Immunization Program for monitoring immunity and the occurrence of COVID-19 post vaccination.
- This study aims to analyse the adverse event following immunization (AEFI) among two-dose vaccine recipients in Malaysia.

# METHODOLOGY

- This is a sentinel surveillance study that applied a prospective cohort design to monitor and follow-up selected vaccine recipients (18 years and above) at nine (9) vaccination administration centres (PPV) nationwide.
- AEFI was recorded using questionnaire from National Pharmaceutical Regulatory Agency (NPRA) as Self-administered Questionnaire (SAQ) at two time-points; 1) Second dose appointment; 2) 14 days after the complete dose of Comirnaty, CoronaVac and Vaxzevria.
- Descriptive analysis was done to describe AEFI by different types of vaccines and logistic regression was conducted to identify the factor associated with AEFI.

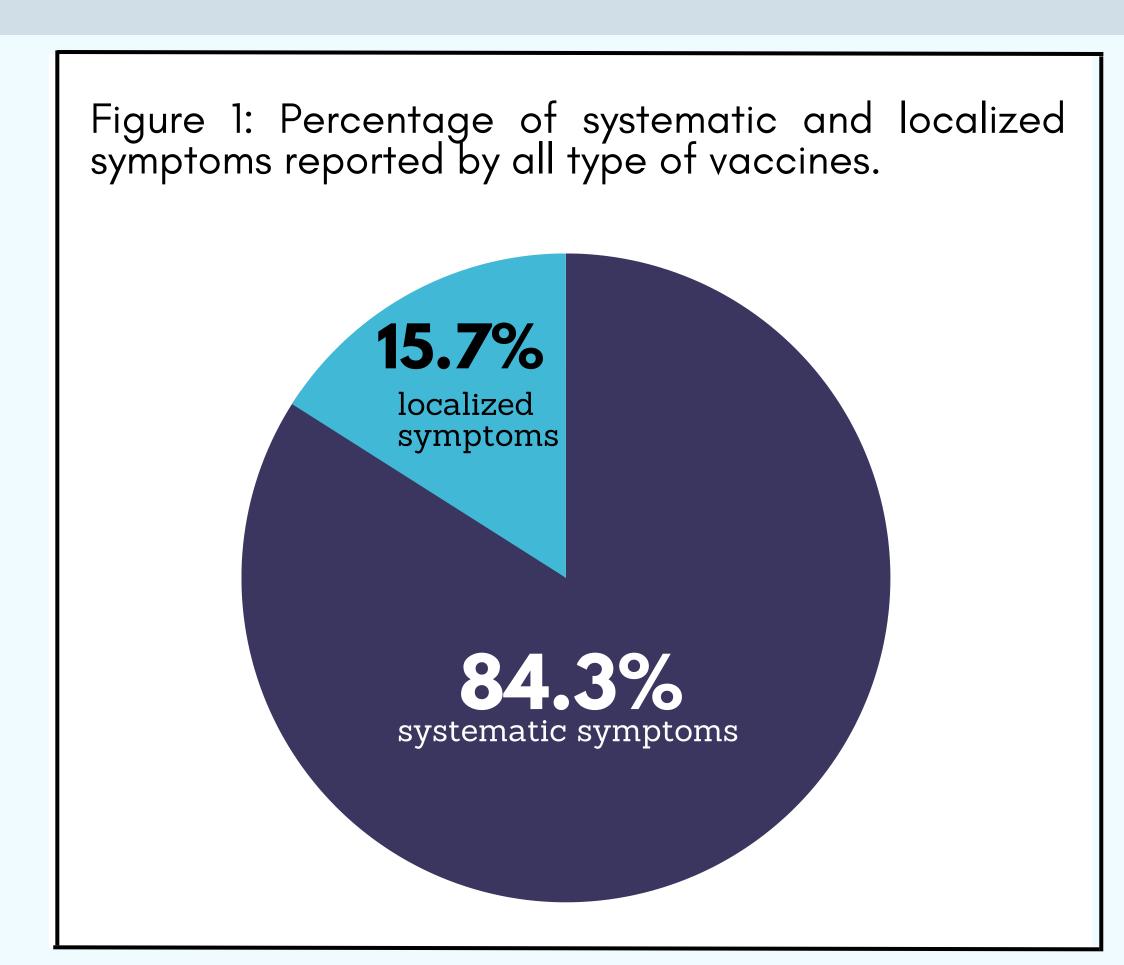
## RESULTS

Table 1: Percentage of AEFI / AESI (symptom and no symptom) by type of vaccines.

Type of vaccine	Dose	AEFI				AESI			
		Symptom		No symptom		Symptom		No symptom	
		count, n	%	count, n	%	count, n	%	count, n	%
Comirnaty	1st dose	178	31.3	390	68.7	2	0.4	566	99.6
	2nd dose	205	40.4	302	59.6	1	0.2	506	99.8
CoronaVac	1st dose	160	28.9	393	71.1	1	0.2	552	99.8
	2nd dose	133	27.3	354	72.7	4	0.8	483	99.2
Vaxzevria	1st dose	335	59.5	228	40.5	2	0.4	561	99.6
	2nd dose	142	29.2	344	70.8	0	0	486	100

Table 2: Factor associated with AEFI among two-dose vaccine recepients.

Variables	Unadjusted			Adjusted			
variables	β	95% CI	p-value	β	95% CI	p-value	
Vaccine types							
Comirnaty	3.219	2.521, 4.111	≤0.05	2.415	1.709, 3.413	<0.01	
CoronaVac	3.609	2.813, 4.630	≤0.05	1.926	1.315, 2.819	<0.01	
Vaxzevria	ref						
Sex							
Male	1.49	1.224, 1.812	≤0.05	1.425	1.158, 1.754	0.01	
Female	ref						
Ethinicity							
Melayu	0.595	0.211, 1.678	0.326	_	_		
Cina	0.333	0.146, 1.213	0.109		_	1	
		-		-	-	1	
India	0.623		0.395	-	-	_	
Bumiputera Sabah	0.865	0.181, 4.141	0.856	-	-	-	
Bumiputera Sarawak	l	0.427, 6.499	0.462	-	-	-	
Others	ref						
Citizenship							
Malaysian	0.833	0.278, 2.497	0.745	-	-	-	
Non-Malaysian	ref						
Age							
18-39	ref						
40-59	1.355	1.000, 1.837	0.050	2.415	1.709, 3.413	<0.01	
≥ 60	1.178	0.844, 1.644	0.336	1.926	1.315, 2.819	0.01	
BMI							
Underweight	1.286		0.286	1.186		0.499	
Normal	0.975	· I	0.843	1.079	· .		
Overweight	0.765	0.592, 0.988	0.040	0.811	0.617, 1.066	0.133	
Obese	ref						
Comorbidity							
Yes	1.153	0.944, 1.408	0.164	-	-	-	
No	ref						
Covid-19 History							
Yes	1.002	0.604, 1.661	0.995	-	-	-	
No	ref						



- The study analysed 1684 recipients, comprised of Comirnaty (n=568), CoronaVac (n=553) and Vaxzevria (n=563).
- Reported AEFIs for the first and second doses by types of vaccines: Comirnaty (31.3% and 40.4%); CoronaVac (28.9% and 27.3%); Vaxzevria (59.5% and 29.2%) (Table 1).
- Most reported AEFIs were systematic symptoms (84.3%) such as headache, fever and muscle pain and localized symptom (15.7%) mostly, pain at injection site. Reported AESI for all types of vaccines were very low (≤ 0.8%) (Figure 1).
- Main reported AEFIs for Comirnaty were fever, headache and pain at injection; CoronaVac were fever and headache; and Vaxzevria were fever, headache and muscle/body pain.
- Adjusted for confounders, the factors found to be significantly associated with AEFI were Comirnaty vaccine [aOR: 2.415 (95% CI: 1.709, 3.413)], male [aOR: 1.425 (95% CI: 1.158, 1.754)] and 40–59 age group [aOR: 2.415 (95% CI 1.709, 3.413)] (Table 2).

## DISCUSSION & CONCLUSION

- This findings aligned with NPRA ADR/AEFI report which stated that the majority of reports received, at 93%, were non-serious, short-term, and did not pose any potential risk to the health of the vaccine recipients and only 7% of the total AEFI reports received were categorised as serious AEFIs.
- As a conclusion, this study demonstrated that the majority of reported AEFIs were not serious, suggesting that the benefit-to-risk ratio of COVID-19 vaccines remains favourable.

#### **ACKNOWLEDGEMENT**

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