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COVID-19 DISSENTERS

Reporting of AstraZeneca studies may have caused vaccine reservations

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Abbasi asks whether the negativity towards the AstraZeneca vaccine in the European Union is a political hangover from Brexit. It hink the initial reservations were related to the way the results were presented.

Both Pfizer² and Moderna³ had clinical trials based on a single protocol resulting in a single publication with good efficacy in all ages. But the initial AstraZeneca publication was based on multiple protocols and, by mistake, a subgroup of patients had been given a reduced first dose and showed greater efficacy.⁴ The researchers initially attributed the higher efficacy to the reduced dose⁴ but later suggested it was due to the increased interval between doses.⁵

Neither of these studies provided direct evidence about the efficacy in older people. This is why some European nations initially decided to use this vaccine only in people under 65; the United States did not authorise the AstraZeneca vaccine at all. Only the more recent effectiveness studies⁶ and the release of the American trial data⁷ have provided definitive evidence of efficacy in older people.

The concerns about blood clots involved a non-EU nation (Norway) and resulted in some countries suspending the distribution of the AstraZeneca vaccine for a few days. My impression is that there was a need to respond to concerns raised in the media across Europe. Signals coming from postmarketing surveillance should not be ignored as low frequency adverse events cannot be identified in phase III trials.

The subsequent report from the European Medicines Agency (EMA) concluded that, despite no overall increase in risk of thromboembolic events, the AstraZeneca vaccine could be associated with two rare types. The number of these cases subsequently increased to 59,9 and a common pathogenesis ("spontaneous" heparin-induced thrombocytopenia) has been proposed.

The EMA investigation is ongoing: two members of the public are part of the panel. ¹¹ Comparing putative side effects with their natural occurrence is difficult. If risk factors were identified, they could be used as selective contraindications to this vaccine.

Competing interests: No competing interests

Full response at: https://www.bmj.com/content/372/bmj.n731/rr-2.

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