

Clinical Immunization Safety Assessment (CISA) Network: Activities Related to Human Papillomavirus Vaccine (HPV4)

Barbara A. Slade, M.D.
Team Lead, CISA
Immunization Safety Office
Centers for Disease Control and Prevention



SAFER • HEALTHIER • PEOPLE™



Background: CISA

- **Network of six academic centers with vaccine safety subject matter experts**
 - Boston Medical Center, Columbia University Medical Center, Johns Hopkins University, Northern California Kaiser Permanente, Stanford University Medical Center, Vanderbilt University Medical Center
- **Established in 2001 to:**
 - Investigate the pathophysiologic mechanisms and biologic basis of adverse events following immunization (AEFIs) and
 - Provide selected clinical consultations
- **Established collaborations with other clinical specialists (e.g., neurologists, allergists, geneticists, metabolic/mitochondrial experts)**



CISA Activities Related to HPV4

- **Clinical consultation on rare, serious adverse events following HPV4**
- **Transverse myelitis (TM) review**
 - ◆ Led by Johns Hopkins
 - ◆ Licensure through August 2008
- **Guillain Barré Syndrome (GBS) review**
 - ◆ Led by Boston Medical Center
 - ◆ Licensure through August 2008



Methods

- Cases identified through review of VAERS database for reports of TM and GBS
- Reports received between 6-01-06 and 8-31-08
- Medical records on cases reviewed by CISA investigators and clinical expert neurologists
- Proposed Brighton case definition used for confirmation of GBS cases*
 - ◆ Level 1 represents highest level of certainty
- Theoretical window of biological plausibility for immune-mediated neurologic events is 4 – 42 days after vaccination

*http://www.brightoncollaboration.org/internet/en/index/definition___guidelines.html



Background: Transverse Myelitis(TM):

- TM is a rare neurological disorder caused by inflammation across both sides of one or more adjacent levels, or segments, of the spinal cord that can cause axonal demyelination.
- 75 cases reported in the literature (1964 to 2008) following vaccinations (temporal association only).
- Conservative estimates of TM incidence per year vary from 1 to 5 per million population.*
- The peak ages for a TM diagnosis appear to be between 10 to 19 years and after 40 years of age.†



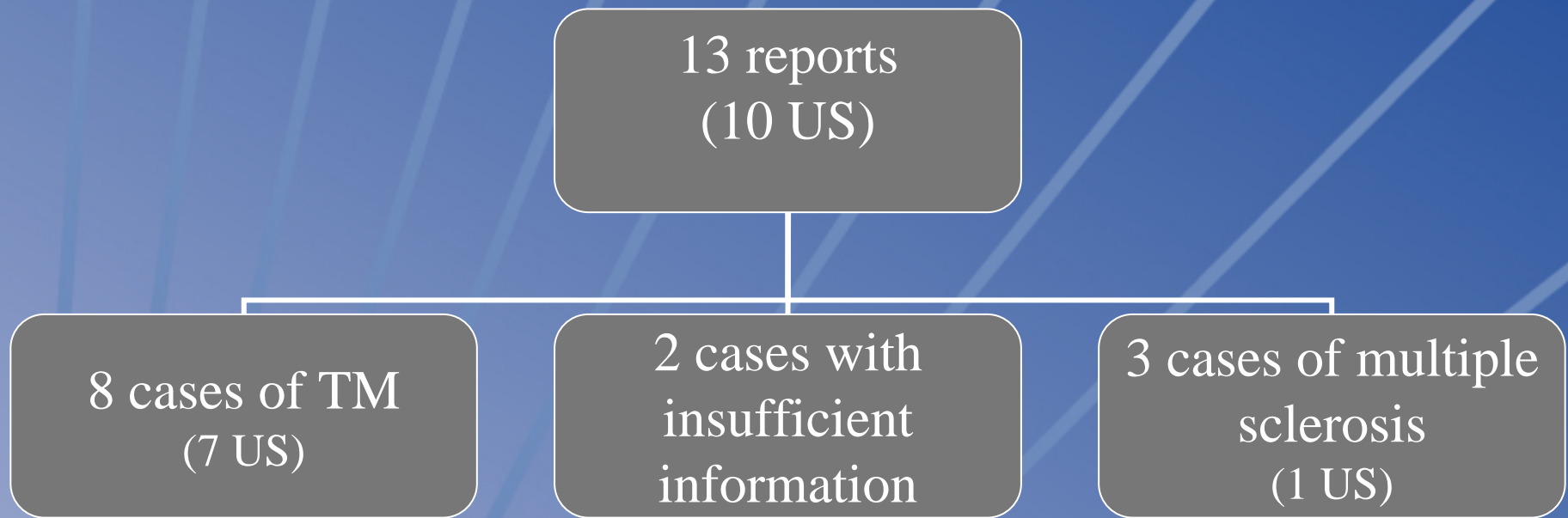
* Jeffery et.al., Arch Neurol, 1993

† Berman, Neurology, 1981

SAFER • HEALTHIER • PEOPLE™



Clinical Review of TM Cases Reported to VAERS after HPV4 Immunization

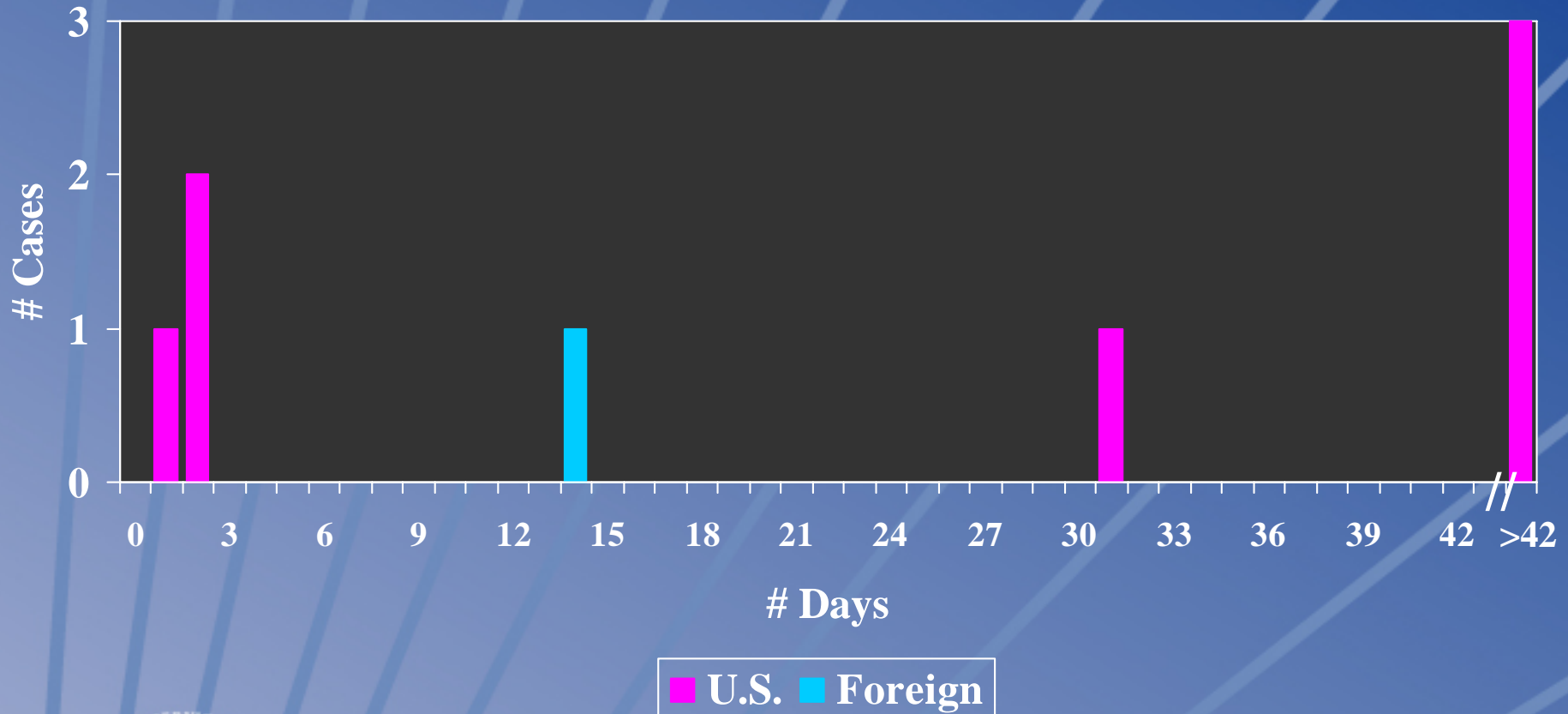


Medical Record Review of 8 TM Case Reports

- **Level of lesion**
 - ◆ Cervical: 4
 - ◆ Thoracic: 4
- **Range of ages (years): 11 to 26**
- **Sex: all females**
- **Vaccines involved: HPV4 vaccine only**
- **Review for confounding conditions**
 - ◆ Infectious symptoms = 2
 - ◆ Other diseases = 0
 - ◆ History of allergy = 1
- **Number of dose preceding symptom onset**
 - ◆ 1 dose = 2
 - ◆ 2 doses = 6



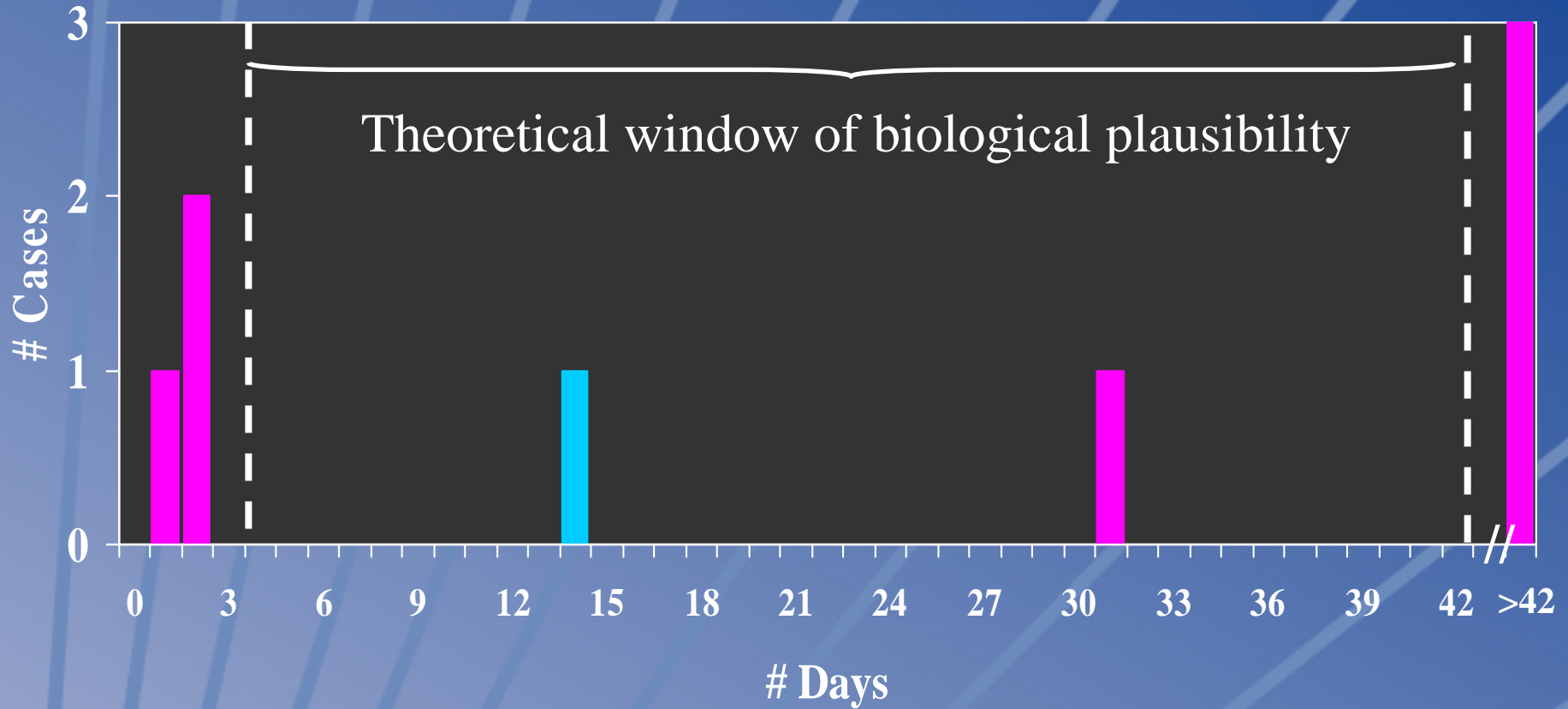
Number of Days: HPV4 Immunization to First Symptoms of TM



Intervals > 42 days = 52, >60, 150 days



Number of Days: HPV4 Immunization to First Symptoms of TM



■ U.S. ■ Foreign

Intervals > 42 days = 52, >60, 150 days



SAFER • HEALTHIER • PEOPLE™



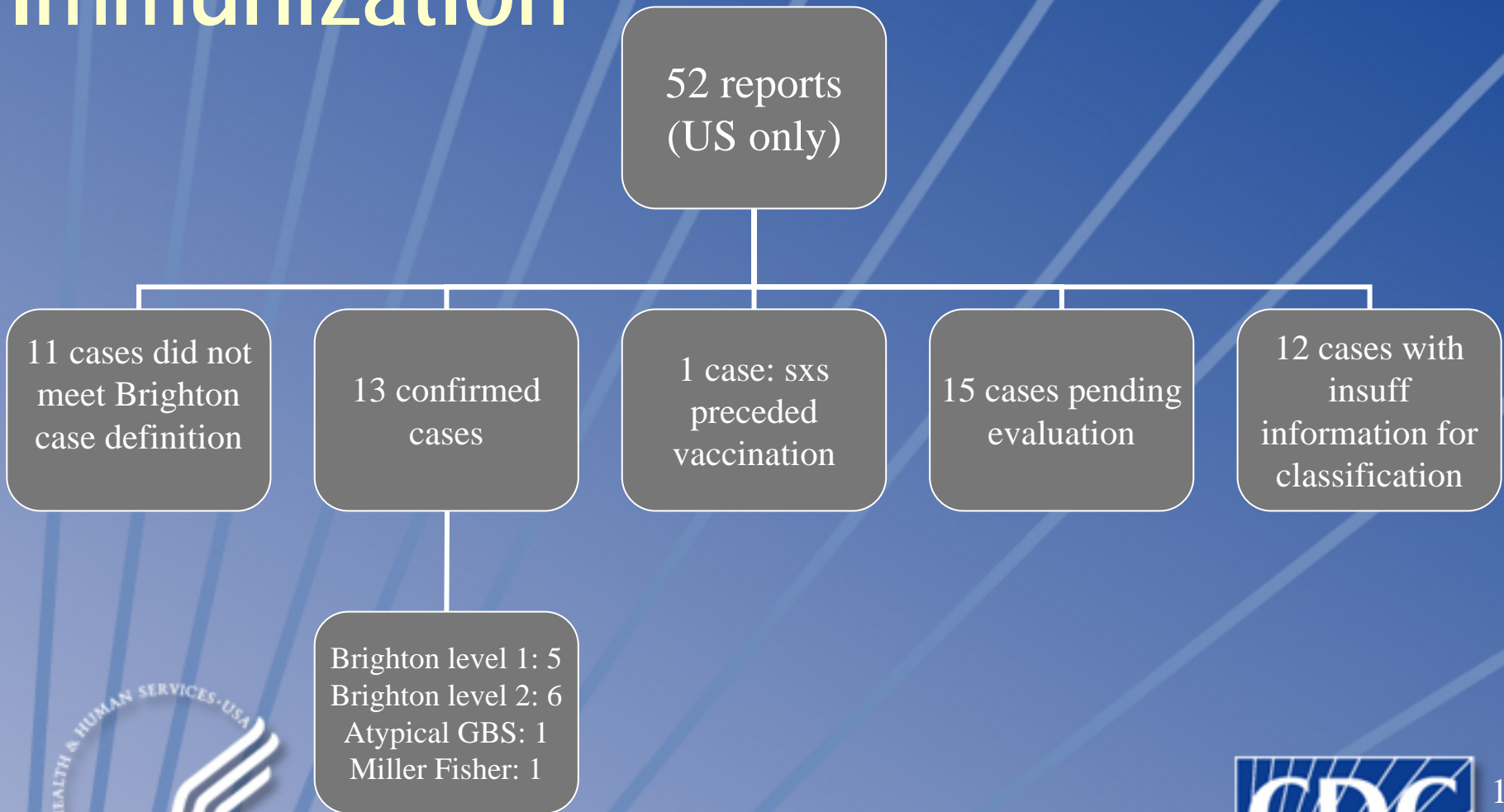
Background: Guillain-Barré Syndrome (GBS)

- GBS is an immune-mediated acute demyelinating polyneuropathy affecting the peripheral nervous system.
- The estimated annual incidence rate of GBS is 1 case per 100,000 population
- To date, with rare exceptions, associations between vaccines and GBS have been based only upon temporal associations with limited epidemiologic evidence.
- Evidence for a causal association with immunization is strongest for the swine influenza vaccine (1976-77). Studies of subsequent influenza vaccines have found small or no increased risk of GBS.*

*Institute of Medicine. Influenza Vaccines and Neurological Complications, 2004.



Clinical Review of GBS Cases Reported to VAERS after HPV4 Immunization

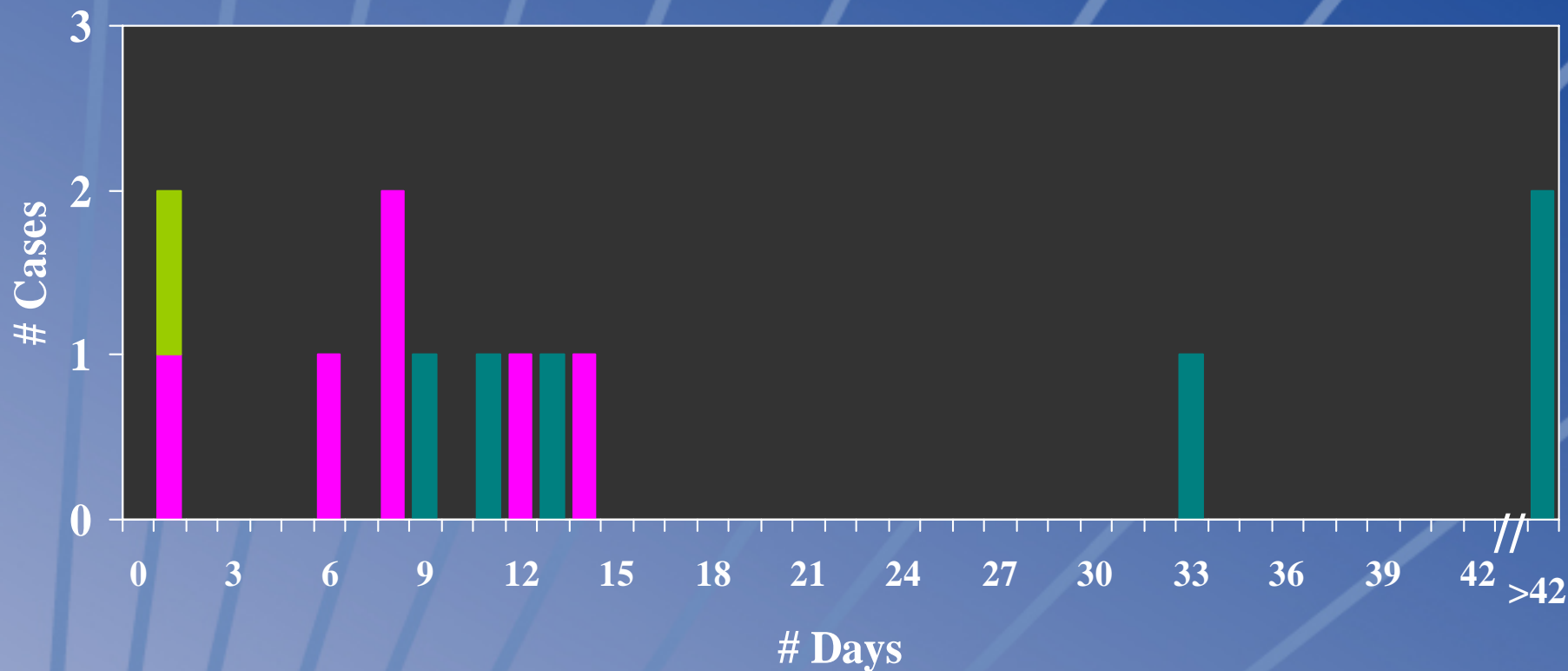


Medical Record Review of 13 GBS Cases after HPV4

- **Vaccines involved:**
 - ◆ HPV4 vaccine only: 6
 - ◆ HPV4 vaccine + Menactra[®] (MCV4): 6
 - ◆ HPV4 + other vaccines: 1
- **Demographic characteristics**
 - ◆ 12 cases: 13 – 20 years of age, female
 - ◆ 1 case: 56 y.o. male
- **Number of doses preceding onset of symptoms:**
 - ◆ 1 dose: 9
 - ◆ 2 doses: 3
 - ◆ 3 doses: 0
 - ◆ Unknown: 1



Number of Days: HPV4 Immunization to First Symptoms of GBS



■ HPV4 alone ■ HPV4 + MCV4 ■ HPV4 + HepA

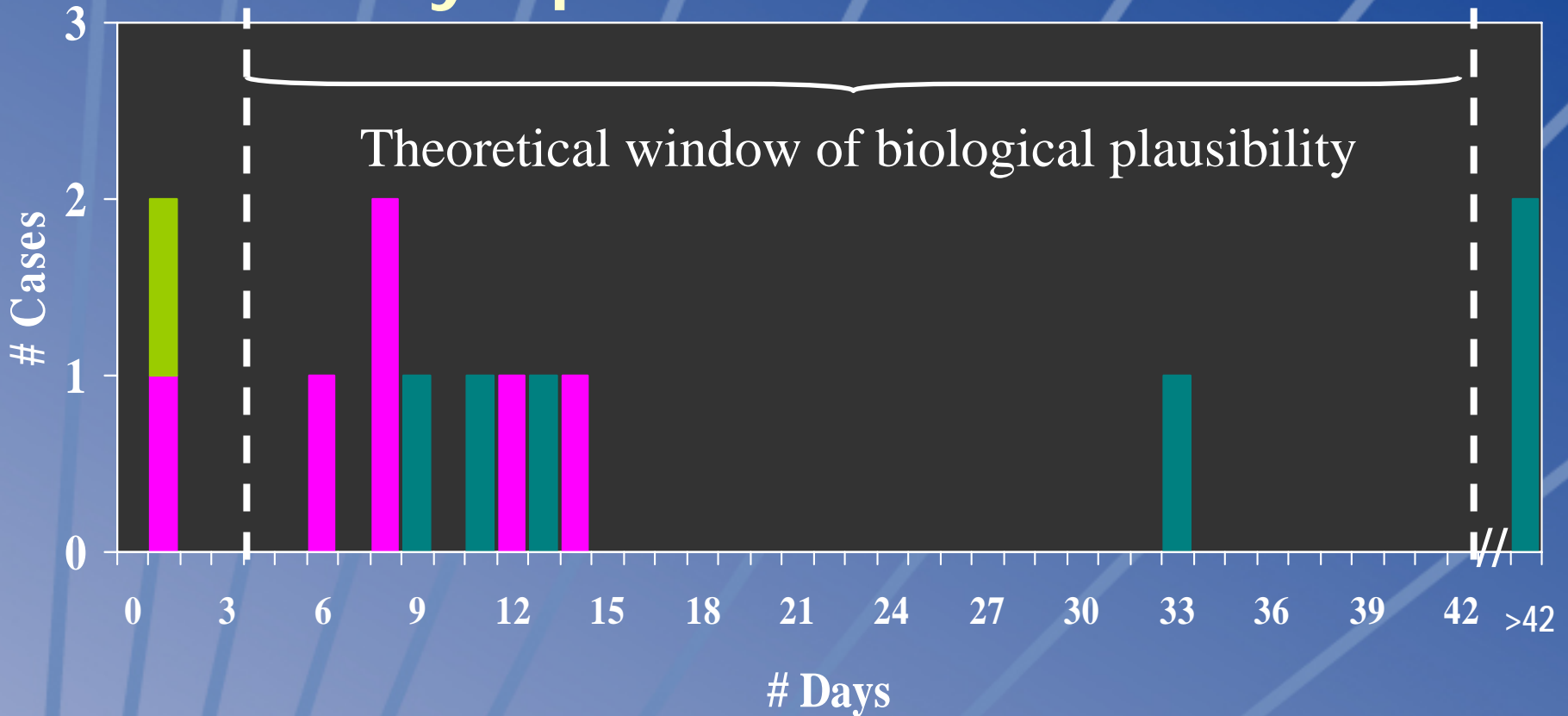
Intervals > 42 days = 86 and 144 days



SAFER • HEALTHIER • PEOPLE™



Number of Days: HPV4 Immunization to First Symptoms of GBS



■ HPV4 only ■ HPV4 + MCV4 ■ HPV4 + HepA

Intervals > 42 days = 86, 144 days



Limitations of Studies

- Usual limitations of VAERS data
- Analysis based on medical record review only; available records may be incomplete
- No denominator data for doses given, so cannot calculate post-immunization rates of TM or GBS



Summary

- 2 cases (1 US) of TM after HPV4 within 4 to 42 days, both received HPV4 vaccination alone
- 9 cases of confirmed GBS within 4 to 42 days after HPV4, 4 also received MCV4
- Reports show temporal association only
 - ◆ Evidence insufficient to support causal relationship
- Most reports of GBS submitted to VAERS not confirmed
 - ◆ 50% with adequate medical records met case definition criteria
- CDC and FDA continue to carefully analyze all reports of GBS and TM submitted to VAERS



Ongoing CISA Studies

- **Transverse Myelitis**
 - ◆ **Comparison of Idiopathic Acute Transverse Myelitis With and Without Receipt of a Vaccine***
 - ◆ **Risk Factors for Acute Transverse Myelitis: A Self-Controlled Case Series Approach**
- **Guillain Barré Syndrome**
 - ◆ **Genetics of GBS: Investigation of Vaccine-Associated and Non-Vaccine-Associated GBS**
 - ◆ **Post-MCV4 GBS Case Series**
 - ◆ **Does Re-Vaccination of Patients with a History of GBS Result in a Relapse?**



Presented at 24th International Conference for
Pharmacoepidemiology and Therapeutic Risk Management, 2008

SAFER • HEALTHIER • PEOPLE™



Acknowledgements

- CDC and FDA VAERS teams
- Johns Hopkins CISA site
 - ◆ Yandong Qiang, CISA fellow
 - ◆ Neal Halsey, CISA PI
 - ◆ Rosanna Stetse
 - ◆ Douglas Kerr, consulting neurologist
- CDC and FDA VAERS teams
 - ◆ Colin Marchant, CISA PI
 - ◆ Brian McGeeney, consulting neurologist
 - ◆ Virginia Frontiero
- Brighton GBS Working Group

