# Quadrivalent Human Papillomavirus Vaccine (HPV4): Post-licensure Safety Update, Vaccine Adverse Event Reporting System (VAERS), United States

**Advisory Committee on Immunization Practices, 10-22-08** 

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# Overview

- VAERS background
- HPV4 data in VAERS
  - Methods
  - Adverse Events (AEs) following HPV4, general data
  - Selected serious conditions of clinical interest
    - Syncope
    - Venous Thromboembolism (VTE)
    - Guillain-Barre Syndrome (GBS)
    - Transverse Myelitis (TM)
    - Deaths
- Summary

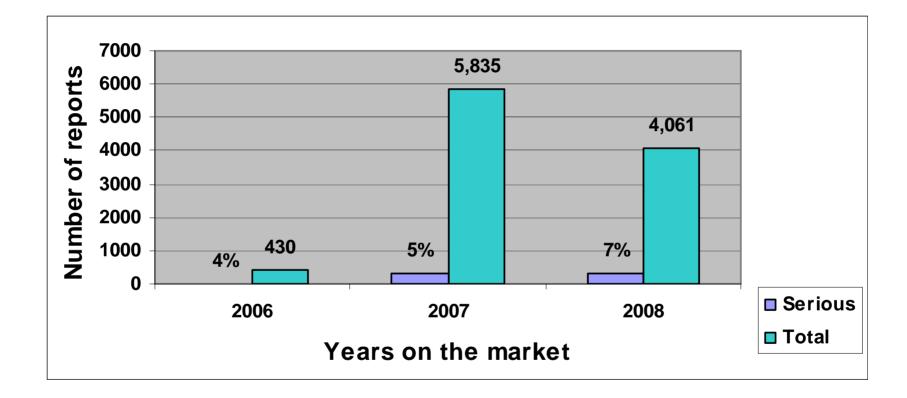
# VAERS

- National post-licensure passive surveillance system for vaccine adverse events operated by CDC and FDA
- Advantages
  - Covers US population
  - Permits monitoring for known AEs
  - Detects signals for previously unrecognized /rare AEs
  - Generates hypothesis
- Limitations
  - Risk of underreporting
  - Stimulated reporting due to media attention and other factors
  - Incomplete data
  - Lack of availability of denominator data

## VAERS Reports Following HPV4 Vaccine Methods

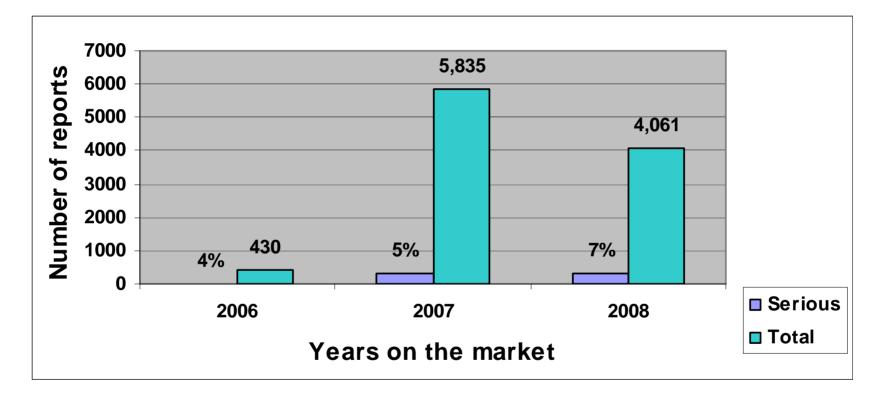
- All primary US reports received between 06-30-06 and 8-31-08
  - Reviewed on 10-03-08
- Medical Dictionary for Regulatory Activities (MedDRA)
  - More than one code may be assigned to a single event and one VAERS report may include more than one symptom
- Brighton case definitions for AEs
- "Confirmed" case means that a report met the case definition, but was not necessarily causally associated with the vaccination
- Serious AEs are defined by Code of Federal Regulations as hospitalization, death, permanent disability, life threatening illness, or certain other medical important conditions

## AEs Following HPV4 VAERS, June 30, 2006 – August 31, 2008



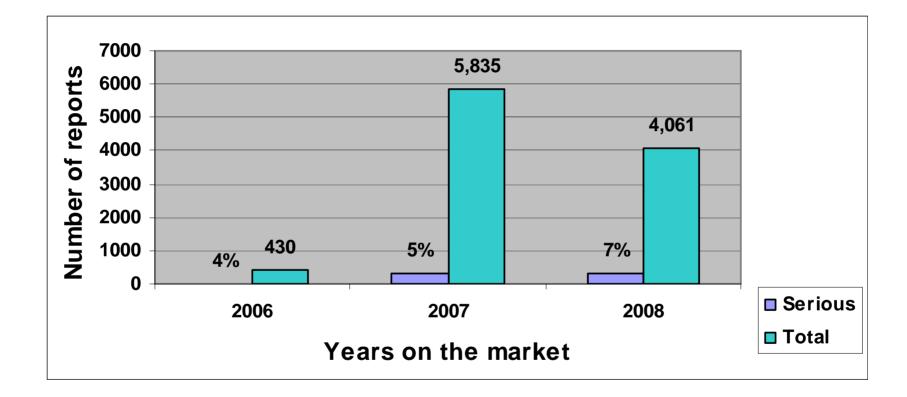
There were 10, 326 total VAERS reports following HPV4.

## AEs Following HPV4 VAERS, June 30, 2006 – August 31, 2008



As of August 31, 20,383,145 doses of HPV4 have been distributed in the U.S. (Biologics Surveillance Data, unpublished, CDC)

## AEs Following HPV4 VAERS, June 30, 2006 – August 31, 2008



HPV4 reports per 100,000 doses distributed All reports: 50.7 Serious reports: 3.0

### AEs Following HPV4 by Age Group VAERS, June 30, 2006 – August 31, 2008

Age group	Reports	Percent
(Years)	(N)	(%)
< 9	49	0.5%
9-10	143	1.4%
11-18	5,202	50.4%
19-26	2,535	24.5%
> 26	233	2.2%
Unk	2,164	21%
Total	10,326	100%

### Most Frequent AEs Following HPV4 VAERS, June 30, 2006 – August 31, 2008

MedDra Coding Term	All AEs Following HPV4 (total N=10,326)	
	Ν	% of total
Syncope	1,564	15
Dizziness	1,469	14
Nausea	959	9
Injection site pain	818	8
Headache	731	7
Pyrexia	680	7
Rash	580	6

# Serious AEs Following HPV4 Selected Conditions of Clinical Interest VAERS, June 30, 2006 – August 31, 2008

- Syncope (n=70)
- VTE (n=41)
- Deaths (n=27)
- GBS (n=52)
- TM (n=10)

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# Serious AEs Following HPV4 Selected Conditions of Clinical Interest VAERS, June 30, 2006 – August 31, 2008

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- Deaths (n=27)
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- TM (n=10)
  - Evaluated in detail by the Clinical Immunization
    Safety Assessment (CISA) Network
  - GBS included into the Vaccine Safety Datalink (VSD) study

# Serious AEs of Syncope Following HPV4\*

#### Total reports: 119

#### US reports: 70

- of the total US reports of syncope 5% are serious
- coded as "syncope" or "syncope vasovagal"
- occurred on the same day as vaccination: 38
- required hospitalization: 37
- Most commonly associated symptoms: loss of consciousness, dizziness, headache, nausea, vomiting, fall, and head injury.
- \*CDC. Syncope After Vaccination United States, January 2005–July 2007; MMWR 2008; 57(17);457-460

# Serious AEs of VTE Following HPV4

## **Total reports: 65**

#### US reports: 41

- Pending evaluation: 6
- Unable to follow-up or "no case": 17
- Confirmed cases: 18
  - Hormonal contraception current use (n=14)
    - 12 cases Oral Contraceptive Pills
    - 2 cases on Nuvaring (increase risk of clots)
      - Some have additional risk factors
  - No hormonal contraception use (n=4)
    - 1 case of pregnancy
    - 1 case obesity, smoking, truck driver
    - 1 case long bus ride preceded to the VTE onset
    - 1 case had no reported risk factors

## **Reports of Death Following HPV4**

Total: 31

US reports: 27

- Unable to follow-up: 7
- Pending evaluation: 3
- Confirmed cases: 17

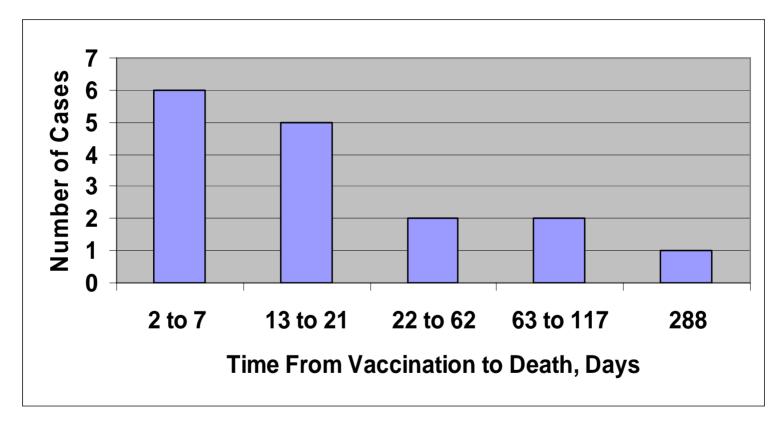
# Cases of Death Following HPV4 by Age at Vaccination and Vaccine Dose 17 Confirmed Cases

N (cases)

Ages (yrs)	
12-14	4
15-18	6
19-21	4
22-26	3
Dose number	
1	7
2	6
3	3
unknown	1

#### Cases of Death Following HPV4 by Time From Vaccination to Death

17 Confirmed cases, one case had unknown onset interval



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- Pending evaluation: 3
- Confirmed cases: 17

**Considered for the Clinical Summary: 20** 

#### **Clinical Summary, Reports of Death Following HPV4**

- Viral illnesses (n=3): acute myocarditis, meningoencephalitis, influenza B viral sepsis
- Pulmonary embolism (n=2)
- Cardiac events (n=2): arrythmia due to cardiomyopathy, probable cardiac arrythmia – patient had a history of
- Diabetic ketoacidosis (n=1)
- Idiopathic seizure disorder and history of seizures (n=1)
- Atypical GBS vs Juvenile ALS (n=1)
- Drug overdose (n=2)
- Unknown cause (n=3) and limited information for further evaluation (n=4)

# AEs Following HPV4 VAERS Data Summary

- More than 20 million doses distributed
  - 10, 326 overall HPV4 reports to VAERS
    - Serious AEs (6%)
- Syncope following vaccination could lead to serious outcomes; preventive measures are critical
- Predisposing factors in cases of VTE
  - Hormonal contraception use (n=14), co-morbidities, and life-style risks
- Deaths
  - No clustering by age groups, onset intervals, or dose number
  - No trends in clinical conditions which preceded or caused death
- VAERS is not designed to assess biological or epidemiological plausibility of AEs following vaccination

# AEs Following HPV4 VAERS/ISO Activities

- Continue monitoring and evaluation of all serious AEs following HPV4
- Evaluate VAERS reports of inadvertent vaccination during pregnancy
- Communicate to the public and partners
- Update the ACIP HPV working group on a regular basis
- Collaborate with the VSD, CISA, NCHHSTP/CDC, FDA, and others

## **References and related links**

- Reports of Adverse Events Following Gardasil ® (on the CDC Vaccine safety web site): <u>http://www.cdc.gov/vaccinesafety/vaers/gardasil.htm</u>
- VAERS information: <a href="http://vaers.hhs.gov/info.htm">http://vaers.hhs.gov/info.htm</a>
- VAERS public search tool: <u>http://wonder.cdc.gov/vaers.html</u>
- Brighton Collaboration: <u>http://www.cdc.gov/vaccinesafety/brighton/</u>
- Gardasil ® Package Insert: <u>http://www.fda.gov/cber/label/gardasilLB.pdf</u>
- CDC. General Recommendations on Immunization; MMWR 2006; 55(RR15);1-48 <u>http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5515a1.htm</u>

## Acknowledgements

#### **VAERS** Team

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#### FDA

• Andrea Sutherland, MD



