



Monash COVID-19 Vaccination Program

Employee Forum | 2 March 2021



114,041,117

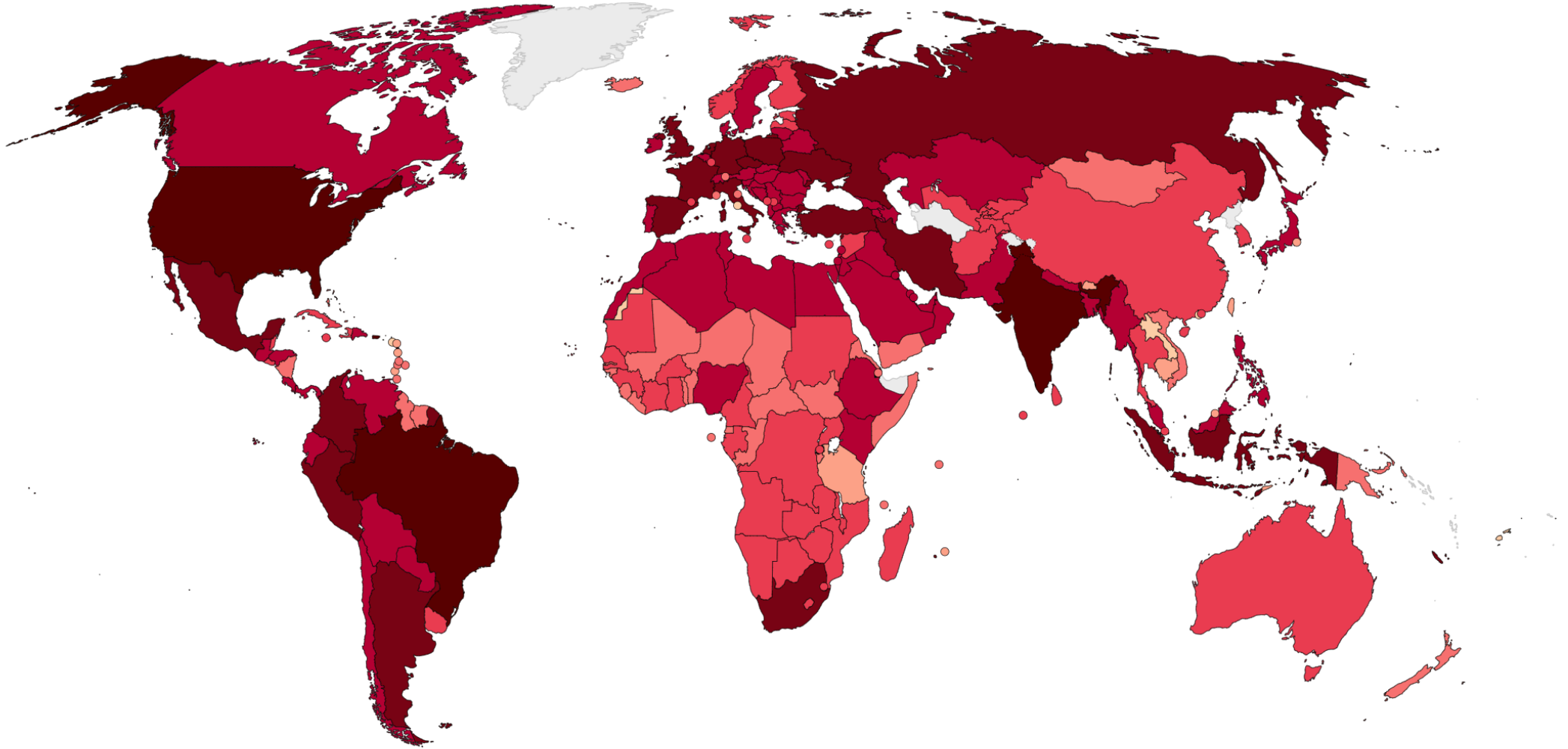
Confirmed cases worldwide

2,529,898

Deaths worldwide

Jurisdictions with cases confirmed as of 1 March 2021, 12:23 GMT+11

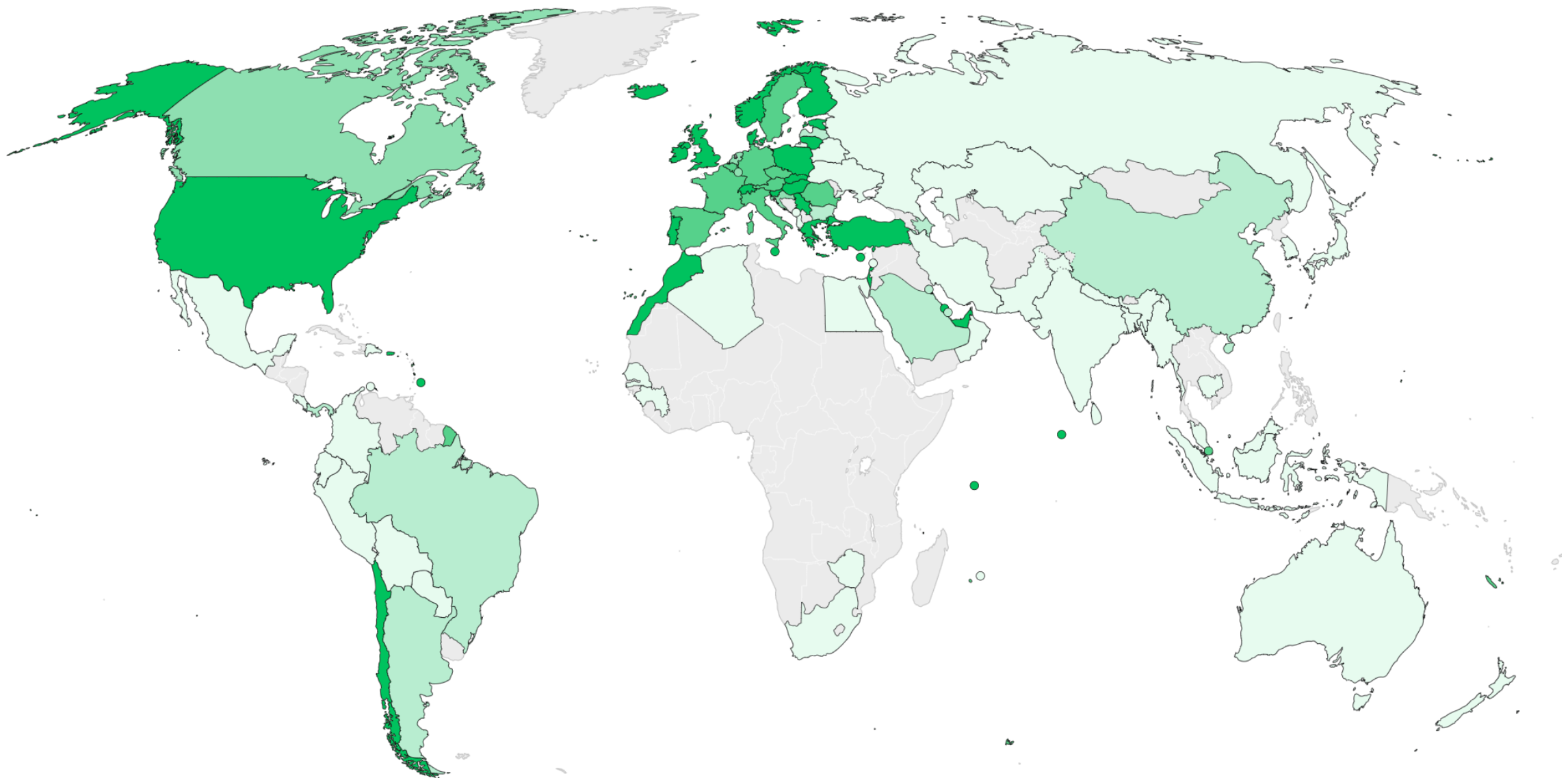
1-99 100-999 1,000-9,999 10,000-99,999 100,000-999,999 1,000,000-9,999,999 10 million or more



World Map of Vaccinations

More than 241 million doses have been administered in 103 countries

no data 2 4 6 8 per 100 people



Australia's COVID-19 vaccination schedule

Vaccination roll-out by group and estimated population covered.

Phase 1A

1.4 million doses

- Quarantine and border workers
- frontline health care workers
- aged care and disability care staff and residents.

Phase 1B

14.8 million doses

- Indigenous people aged 55 and over
- non-Indigenous people aged 70 and over
- all other health care workers
- younger adults with underlying medical conditions or disabilities
- critical and high risk defence, police, fire, emergency services and meat processing workers.

Phase 2A

15.8 million doses

- Indigenous people aged between 18 and 54
- non-Indigenous people aged 50 and over
- other critical and high risk workers.

Phase 2B

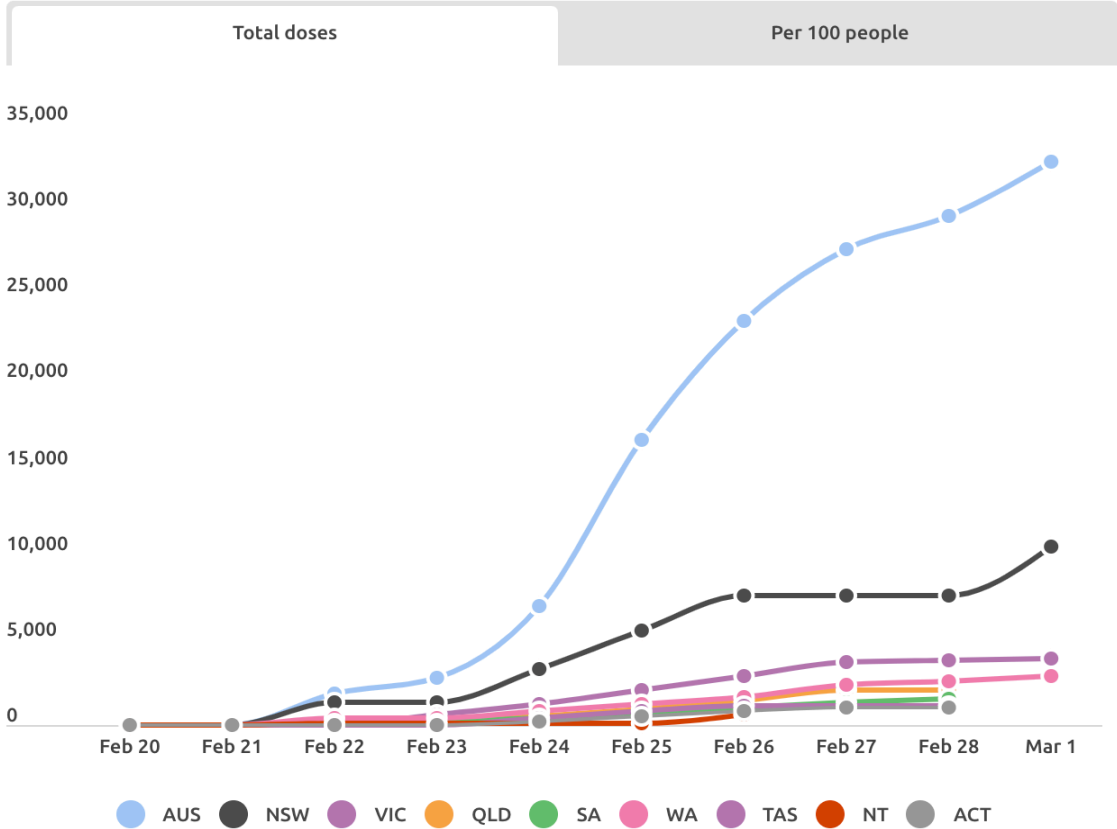
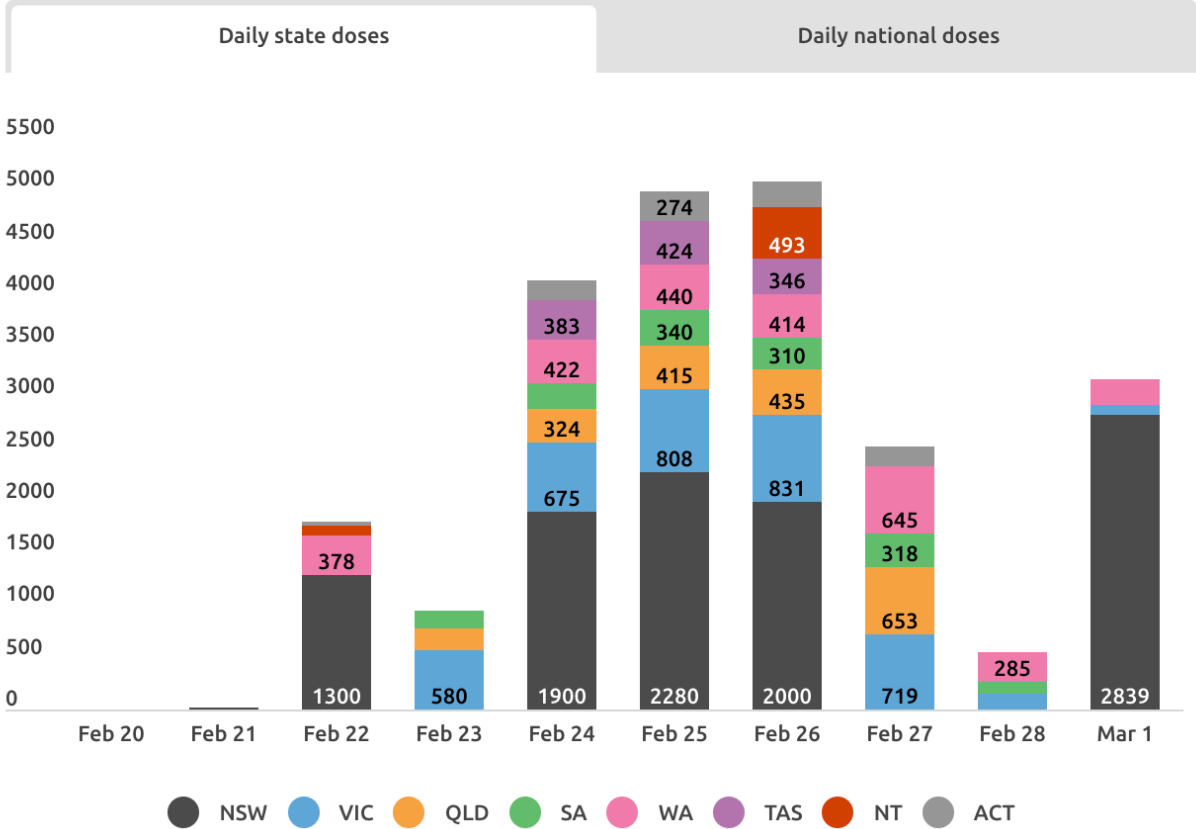
16 million doses

- Balance of population aged 16 and over
- follow-up of any adults missed in previous phases.

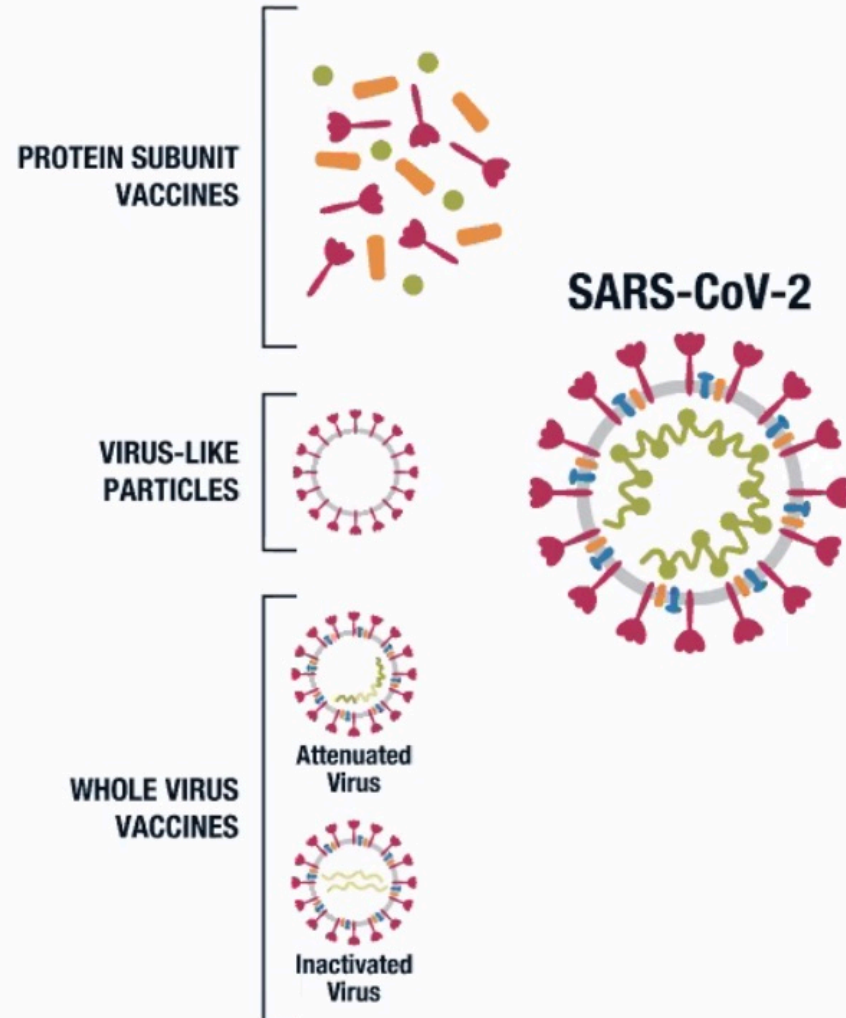
Phase 3

13.6 million doses

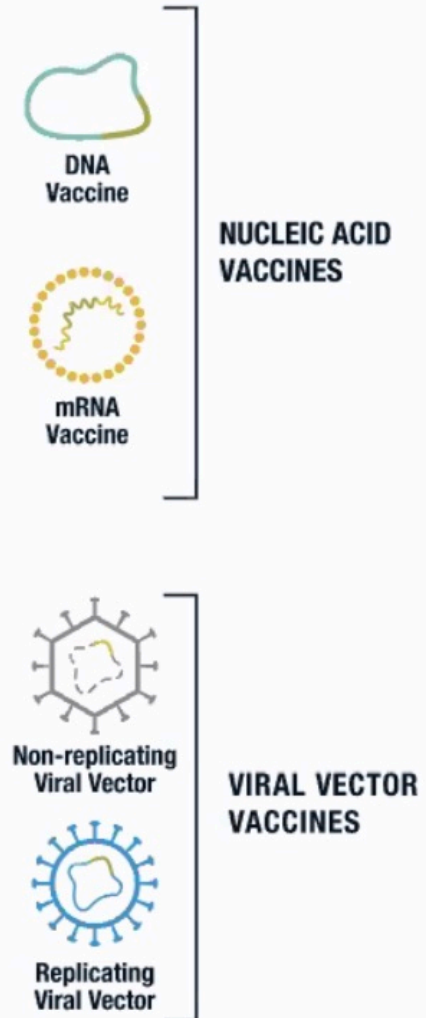
- Children under 16 (if recommended, Pfizer vaccine only).



CONVENTIONAL APPROACHES








NOVEL APPROACHES

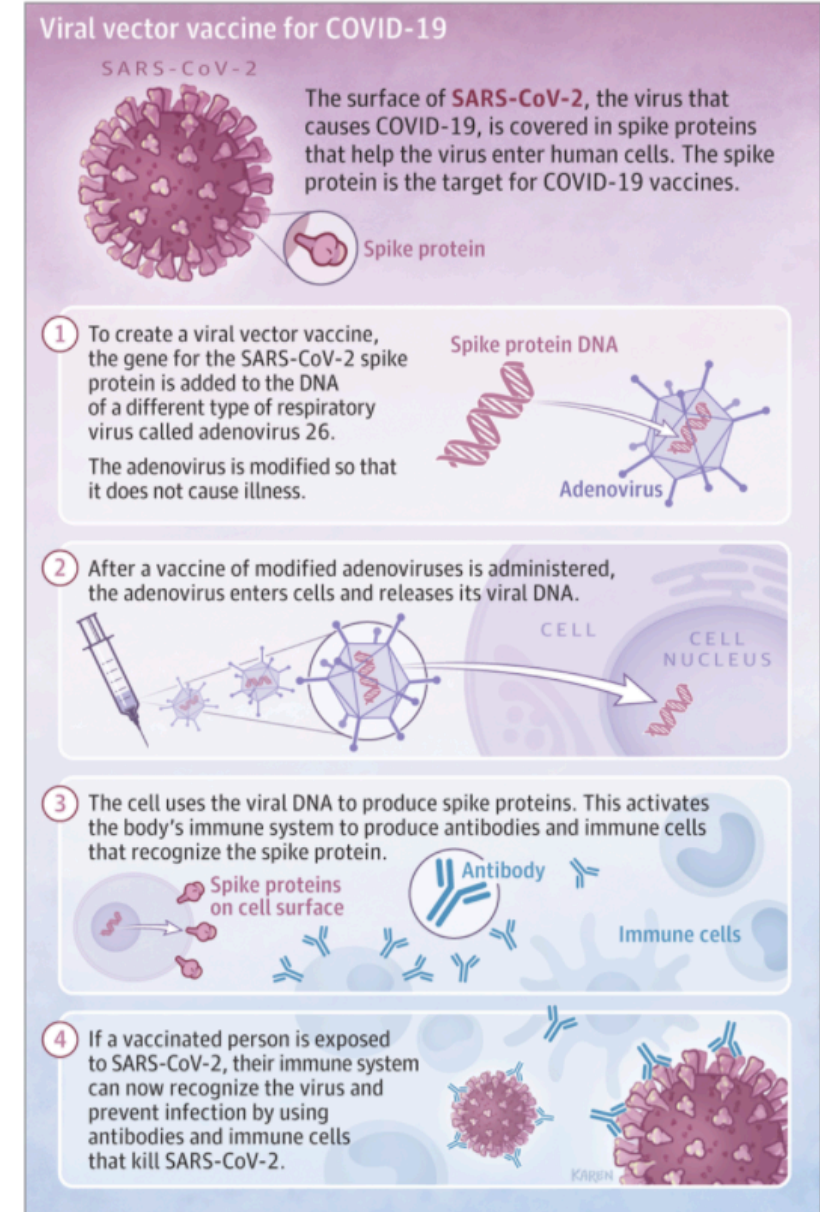


AstraZeneca / University of Oxford

- Viral Vector Vaccine
- Can be easily administered in healthcare systems
 - Stored at fridge temp (2-8 degrees C)
 - Stable for transport up to 6 months
 - Minimal side effects

ADVANTAGES AND DISADVANTAGES OF VIRAL VECTOR-BASED VACCINES

-  Well-established technology
-  Strong immune response
-  Immune response involves B cells and T cells
-  Previous exposure to the vector could reduce effectiveness
-  Relatively complex to manufacture



AstraZeneca

- AstraZeneca
 - TGA registered in people aged ≥ 18 years and is given in a two-dose schedule.
 - Dose: Full dose (0.5ml)
- Interval: 4-12 weeks permitted but 12 weeks preferred
 - Higher antibody levels with longer interval between doses
 - Advantages – broader coverage more quickly, possibly better efficacy
 - May decrease transmission after a single dose
 - Single dose provided 76% protection at 90 days
 - Second dose at 12 weeks increased protection to 82.4%
 - Effectiveness appears to be related to interval between doses
 - Important new findings of up to 67% decrease in transmission

AstraZeneca

- Strains
 - Effective against UK strain
 - ? over Sth Africa strain
- Elderly
 - Not adequately accounted for in early studies
 - Safe, fewer side effects
 - Further data expected with US trial on efficacy (late March)

AZ – adverse events

	18–55 years		56–69 years		≥70 years	
	Dose 1	Dose 2	Dose 1	Dose 2	Dose 1	Dose 2
Injection site pain	61%	49%	43%	34%	20%	10%
Injection site tenderness	76%	61%	67%	59%	49%	47%
Fatigue	76%	55%	50%	41%	41%	33%
Headache	65%	31%	50%	34%	41%	20%
Muscle pain	53%	35%	37%	24%	18%	18%
Fever	24%	0%	0%	0%	0%	0%

Local and systemic adverse events more common in younger people

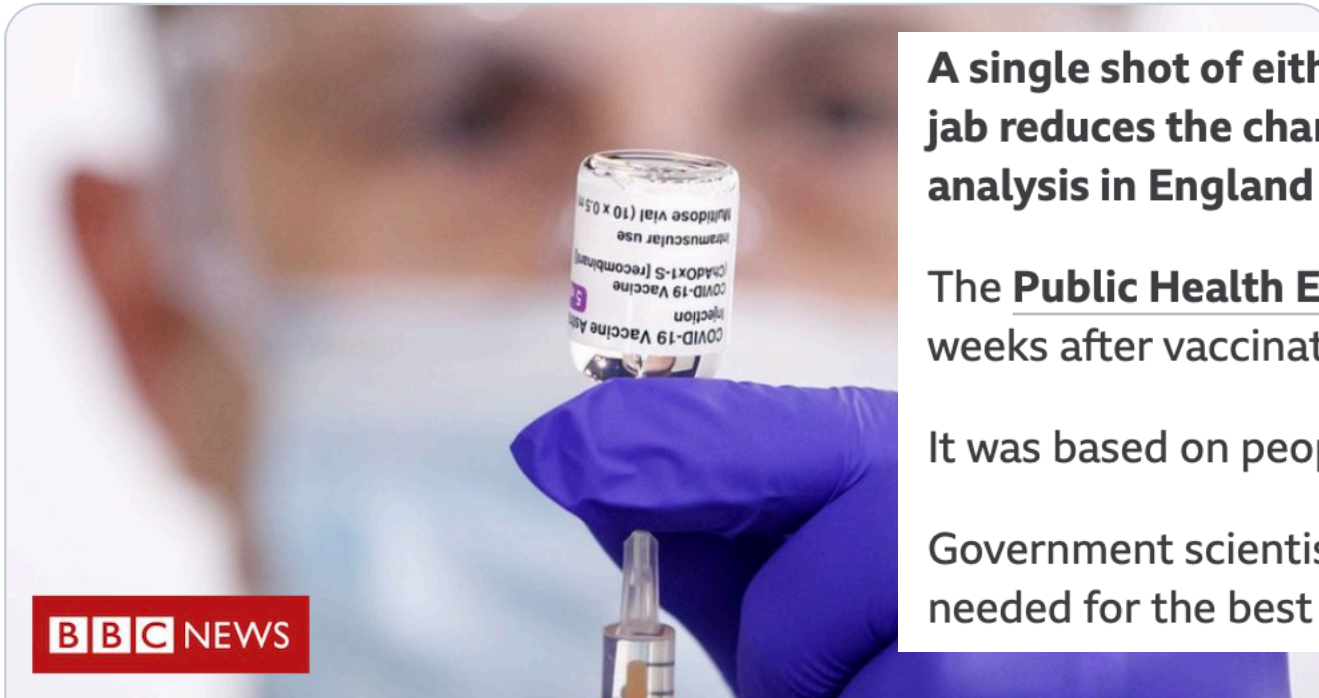
Less common with second dose

Both Vaccines Effective

- Both vaccines available protect against severe disease
 - Differences in efficacy may be due to trial parameters and populations
 - Important data coming out of England, Scotland and Israel suggesting both vaccines reduce transmission.
- These vaccines won't eliminate the disease totally
 - Social distancing, hand sanitising and masks will continue to be important
- The final factor that determines how good a vaccine is:
 - Whether people actually get vaccinated.
 - less demanding, cold chain requirements - the AstraZeneca jab is easier to ship around.
 - also has a lower rate of immediate adverse effects than Pfizer.
 - those over 65 have fewer headaches, episodes of diarrhoea, sore arms and painful muscles with AstraZeneca, than younger people.



Single shot of either Oxford-AstraZeneca or Pfizer-BioNTech Covid vaccine reduces chance of needing hospital treatment by more than 80%, analysis in England shows



A single shot of either the Oxford-AstraZeneca or the Pfizer-BioNTech Covid jab reduces the chance of needing hospital treatment by more than 80%, an analysis in England shows.

The Public Health England data showed the effect kicked in three to four weeks after vaccination.

It was based on people aged over 80 who were the first to receive the jab.

Government scientists hailed the result, but stressed that two doses were needed for the best protection.

Covid vaccines cut risk of serious illness by 80%

Latest study on UK rollout suggests jabs significantly reduce risk of being admitted to hospital.

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