Wolf, Sheldon

From:	Lee, Judy E.
Sent:	Wednesday, March 8, 2023 8:57 PM
То:	Wolf, Sheldon; Lahr, Pat; NDLA, Intern 02 - Pouliot, Lindsey
Subject:	FW: Requested COVID-19 Vaccine and Vaccine Safety Information
Attachments:	Vaccine Safety Monitoring Systems in the U.Spdf; Xx, VSD COVID Mortality study.pdf

FYI – Please load in the testimony for the vaccine bill on which Molly Howell testified.

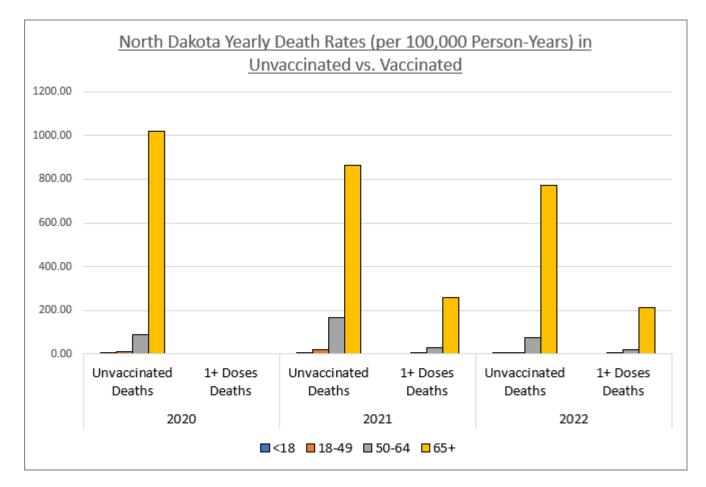
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From: Howell, Molly A. <mahowell@nd.gov>
Sent: Wednesday, March 8, 2023 3:36 PM
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Cc: Howell, Molly A. <mahowell@nd.gov>
Subject: Requested COVID-19 Vaccine and Vaccine Safety Information

Senate Human Services Committee,

Thank you for hearing my testimony today and your thoughtful questions about vaccines.

Benefits of COVID-19 vaccine include prevention of serious illness, hospitalization and death and short term protection against infection. In United States in <u>November of 2022</u>, people ages 5 and older with a bivalent booster had 12.7 times lower risk of dying from COVID-19 compared to unvaccinated people and 2.4 times lower risk of dying from COVID-19 than people vaccinated without a bivalent booster. North Dakota data shows that the COVID-19 death rate is higher amongst those who are not vaccinated vs. those who have had at least one dose (see below).



Yearly ND COVID-19 Death Rate (per 100,000 Person-Years) by Age Group and <u>Vaccination Status</u>								
	2020		2021		2022			
Age Group	Unvaccinated	Ever	Unvaccinated	Ever	Unvaccinated	Ever		
Group		vaccinated		vaccinated		vaccinated		
<18	0.5	0.0	0.6	0.0	2.9	0.0		
18-49	9.6	0.0	21.0	3.5	8.0	6.5		
50-64	87.0	0.0	164.3	27.7	73.8	19.0		
65+	1,018.1	0.0	865.1	257.4	772.9	212.4		

Below is information about COVID-19 vaccine and safety that was requested at the hearing.

Serious adverse events following COVID-19 vaccine are rare. The Centers for Disease Control and Prevention (CDC) describes adverse events associated with COVID-19 vaccines on their website at <u>Selected Adverse Events Reported after COVID-19 Vaccination | CDC</u>. The CDC website includes rates of events per one million doses administered. Myocarditis (inflammation of the heart muscle) is the most common serious adverse event after mRNA vaccination. Reporting rates of myocarditis vary by dose number, age, and gender. The highest reporting rate is amongst males ages 16-17 after the second dose at 105.9 cases per one million doses administered. CDC has recommended increasing the spacing between mRNA doses to prevent myocarditis. COVID-19 infection also causes myocarditis.

There was a lot of discussion about the Vaccine Adverse Events Reporting System (VAERS) this morning. VAERS was useful in initially identifying many of the rare events described above. These

events were then studied using other vaccine safety surveillance systems to determine causation, as VAERS cannot determine if a vaccine caused an event. As an example, if 10 million people received a sugar pill (placebo) and they were watched for two months, there would be 4,025 heart attacks, 1,700 blood clots, 3,975 strokes, 9,500 cancers, and 14,000 deaths (Dr. Paul Carson, NDSU). These conditions and deaths occurred prior to vaccination and will continue to occur after vaccination. In order to determine if they are caused by vaccination, there needs to be a comparison of the rate of the event between people who are vaccinated vs. those who are not.

Attached is a factsheet outlining many of the vaccine safety surveillance systems in the United States. The Vaccine Safety Datalink (VSD) is a network of thirteen managed care sites across the U.S. with a combined patient population of more than 24 million people. The VSD is used to determine if possible side effects identified using VAERS are actually related to vaccination, and it can identify safety signals using nearly real-time monitoring. Each week, VSD evaluates particular health-related outcomes that may be associated with vaccination and compares it to the expected number of outcomes in a comparison group (unvaccinated). Attached is a study from the VSD comparing non-COVID deaths amongst vaccinated and unvaccinated patients in the VSD. No increased risk of non-COVID-19 mortality was found among recipients of three COVID-19 vaccines used in the U.S.

Please let me know if you need any additional information regarding vaccines.

Thanks.

Molly Howell, MPH

Immunization Director Assistant Section Director, Disease Control and Forensic Pathology



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