

FAQ AZ

I am 64 years old and have a (family) history of thrombosis, and I have had an embolism. Should I be worried if I get an AstraZeneca vaccine?

An AstraZeneca vaccine does not increase or decrease the risk of a classic thrombosis occurring at the age of 64. There is no link between a 'classic thrombosis' and the rare form found after vaccination. Each year, there are 1 to 4 cases of classic thrombosis in every 1,000 people,, irrespective of covid-19 vaccination. That risk increases with age, but is still independent of covid-19 vaccination with any of the vaccines.

The current debate in Europe centres on the very rare blood clotting disorders seen after administration of the AstraZeneca vaccine, especially in people under 55 and in women. These are very rare thromboses in unusual places AND in combination with a reduced platelet count. In the United Kingdom, 18 million AstraZeneca vaccines have been administered and 30 cases have been identified (situation at the end of March): so far, it is extremely rare. Estimates currently run between 1 per 200,000 and 1 per 1,000,000 vaccinated persons (Belg Soc on Thrombosis and Hemostasis).

If we look at the numbers recently examined by the European Medicines Agency (April 2021), there were 86 cases among the 25 million AstraZeneca vaccines administered. The median age is about 45, so 50% of the cases are in people under the age of 45. After a more thorough analysis, the European Medicines Agency decided on Wednesday 7 April 2021 that the AstraZeneca vaccine is safe, and that the benefits outweigh the possible rare risks.

So the reason we are now using the three available vaccines on people over 55 years old is not because the elderly count for less than the young, but because:

- the risk of those rare blood clotting disorders is especially evident in people under 55;
- the disease risks of covid-19 (hospitalisations, complications, deaths) start to increase significantly from the age of 50;
- the AstraZeneca vaccine is particularly effective in the over-55s.

In those rare cases, there are no pre-disposing risk factors, such as the pill, deep vein thrombosis (DVT), obesity, familial thrombosis or factor V Leiden (hereditary blood clotting disease). Therefore, the Superior Health Council and the Belgian and International Society for Thrombosis and Haemostasis conclude that even if you have a history of thrombosis or possible other risk factors, there is no reason not to get the AstraZeneca vaccine.

In short:

We must distinguish between two types of thrombosis here:

1. classic thrombosis: This can occur with or without vaccination, in approximately 1 to 4 per 1,000 people per year.

2. the rare cases of thrombosis in combination with a reduced platelet count: These have an immunological origin and can occur after:

- an infection;
- intake of medicines;
- vaccination.

Your immune system then attacks your own platelets. So that is a completely different mechanism. Even in those rare cases, there are no risk factors such as smoking, use of the pill, history of thrombosis,

family thrombosis, embolism, etc. Therefore, these factors are no reason not to be vaccinated against covid-19, and this includes taking the AstraZeneca vaccine.

I am 56 years old, feel healthy and have no chronic diseases. What is my chance of developing a rare thrombosis?

That chance is extremely small, compared to other risks and to the possible complications that can arise after contracting covid-19. Covid-19 is associated with a high risk of thrombosis and pulmonary embolism: 10 to 60% of people hospitalised with covid-19 experience a thrombosis with coagulation disorders, due to covid-19.

Based on UK data, a person aged between 50 and 59 has a 4 in 1,000,000 chance of developing the rare thrombosis, compared to a nearly 1,000 in 1,000,000 chance of being admitted to an intensive care unit after being infected by covid-19. There you have a 1 in 3 chance of dying.

Why can the AstraZeneca vaccine now be administered to people over 55 years old , while this was not permitted a month ago?

A month ago, we lacked data on the efficacy of the AstraZeneca vaccine in people over 55 years old. That is why, in line with a number of other countries in Europe, we recommended the vaccine for people under the age of 56. Since then, ample information has become available about the very high efficacy of the AstraZeneca vaccine, observed in hundreds of thousands of people over 55 years of age in Scotland. For many countries in Europe, this was enough to allow the vaccine to be used within this age group for the past few weeks.

Can a person who has already been vaccinated once with the AstraZeneca vaccine receive a second dose with a different vaccine?

I have already had the first dose and I am in doubt about the second dose. Is there an alternative?

We are currently reviewing the data in the UK on an almost daily basis. There, administration of the second dose of the AstraZeneca vaccine began in March. More than 1,000,000 second doses of the vaccine have now (12/04/2021) been administered, including almost 300,000 in persons under the age of 55. No problems have been identified. In 2 weeks' time, millions of vaccines will have been administered, and we will then have enough information to make a decision on:

- whether to administer that second dose of the AstraZeneca vaccine;
 - It is highly likely that this will be the recommendation, based on the data from the UK and on the immunological mechanism of the occurrence of these rare thromboses.
- whether to wait longer until we know more;
- whether to switch to another vaccine;
 - That information may not yet be available.
 - Germany has now started to do this, based on prior existing scientific evidence that this works.
 - The UK has an ongoing study on such vaccine interchangeability, but only in elderly people.
- not to give a second dose, and possibly to administer a booster in the autumn with an appropriate vaccine against variants of the coronavirus;
- whether, as now, we shall, on our own initiative, agree to administer a second dose of the AstraZeneca vaccine, even though that is not the recommendation.

Fortunately, we still have until 5 May, before we start the possible administration of the second doses of the AstraZeneca vaccine. Progressive understanding will therefore provide an answer to the above question, including for people under 56 years of age.

A young woman who has already received one dose of the AstraZeneca vaccine is now pregnant. Can she receive a second dose of the AstraZeneca vaccine?

One option is to postpone the second dose until after the birth. By then, we will have more clarity. This woman may receive a second dose on her own initiative (scenario 5, as described above). Depending on what we know in early May, we will be able to formulate an opinion on the second dose of the AstraZeneca vaccine, including its administration to people under the age of 56.

I take blood thinners every day. Can I have the AstraZeneca vaccine?

If you take blood thinners or have a low platelet count, you can get any covid-19 vaccine. What matters is that you continue your treatment and certainly keep taking your blood thinners.

Does it help to take blood thinners before receiving the AstraZeneca vaccine?

No. We absolutely do not recommend this. You don't have to do anything special to get any vaccine. This is not only the position of the Superior Health Council in our country, but also of the International Society of Thrombosis and Haemostasis (ISTH), the absolute world experts in this field.

I am really not keen on having the AstraZeneca vaccine that I will be getting next week. What if I decide not to go? Do I have a chance of receiving another vaccine later on?

Yes, you always have that chance. But you will lose your priority. If you don't go now, you will not be offered a new appointment until after the risk groups have been vaccinated. This means you will have to wait at least six to eight weeks before your next invitation. And then you have no guarantee that you will receive a different vaccine. It is possible, but not certain. What is certain is that you run a longer risk of becoming infected.

I will, normally speaking, get my first shot of the AstraZeneca vaccine at the beginning of May and the second one at the beginning of August. Can I go on holiday in July?

Depending on what is possible in Europe at the time, you may also travel with just one shot, as long as you respect all the other measures. Many countries will, however, still have relatively low vaccination coverage. As a result, you may not be able or allowed to do very much when you are abroad. Nor is going on holiday a valid reason for requesting another vaccine.

Is there any additional risk with the AstraZeneca vaccine for pregnant women? They are, in any case, at greater risk of thrombosis.

Up to now, we have always said no, and we stand by that. But since Thursday 8 April 2021, the problem no longer applies: it was then decided that pregnant women are still eligible for all vaccines except AstraZeneca, given the age limit of 56 years. If you are pregnant, you will therefore be given the Pfizer, Moderna or Johnson&Johnson vaccine.

My husband (57) has had low platelet counts for years. Is it wise for him to be vaccinated with the AstraZeneca vaccine?

The same applies here as to people taking blood thinners. Platelet deficiency has no influence on the efficacy of the vaccine, nor on its possible side effects. So the vaccine does not increase the risk.

Are your medical records taken into account when the vaccines are administered?

No. It is not necessary, because no condition increases the risk of side effects. Neither with the AstraZeneca vaccine, nor with the other vaccines. Only if you have a severe allergy will you not be allowed to receive the vaccine.

There is no specific vaccine recommended for people receiving cancer treatment. These are all inactivated vaccines with high efficacy against severe covid-19 and against hospitalisation due to covid-19 that starts 3 weeks after the first shot.

The only things that are taken into account are:

- any serious allergic reactions to vaccinations in the past;
- known allergic reactions to certain ingredients of the covid-19 vaccines.

In the vaccination centres you will be asked whether you take blood thinners. This only has to do with how long you have to press on the puncture site to avoid bleeding after the vaccination.

I received a letter to be vaccinated with the AstraZeneca vaccine on Monday. I am 20 years old. Now what?

Currently, the vaccination centre will suggest another vaccine, basically Pfizer or Moderna. It is also possible that your appointment will be moved to another time in the coming weeks. Vaccination with the AstraZeneca vaccine in young people is not in itself forbidden. If, based on the information about the pros and cons, you still want the vaccine, the vaccination can go ahead.

I regularly go to East Africa. I have read that the AstraZeneca vaccine does not work against the South African corona variant. I am 63 years old and it will soon be my turn. Can I ask to be given another vaccine?

No, that is not possible. In fact, lab data show that every vaccine currently being developed is less effective against the South African strain of the coronavirus. There is only one vaccine developer that has already thoroughly studied the effect against the South African variant in its phase 3, and that is Johnson&Johnson. We know that the vaccine gives 50% protection against the mild form of covid-19 and 80% against the severe form and hospitalisation. Since all vaccines use the same principle, namely to produce antibodies against the so-called spike protein, we can assume that the other vaccines may also work better in reality than in laboratory conditions.