

## Scientific Committee on Emerging and Zoonotic Diseases and Scientific Committee on Vaccine Preventable Diseases

# Consensus Interim Recommendations on the Use of COVID-19 Vaccines in Hong Kong (As of 9 June 2021)

### Introduction

On 9 June 2021, the Scientific Committee on Vaccine Preventable Diseases (SCVPD) and the Scientific Committee on Emerging and Zoonotic Diseases (SCEZD) under the Centre for Health Protection of the Department of Health (DH) (JSC) convened a meeting, joined by the Chief Executive's expert advisory panel (EAP), to discuss recommendations on the interchangeability of COVID-19 vaccines, the eligible age groups for receiving the Comirnaty COVID-19 vaccine, and the use of COVID-19 vaccines in the elderly.

# Use of different types of COVID-19 vaccines for the first and second dose

2. Current evidence on the interchangeability of COVID-19 vaccines are limited. Further studies on the interchangeability of COVID-19 vaccines involving different vaccine types are underway. There are no major safety concerns reported so far for mixing viral vector vaccine with mRNA vaccine. Preliminary evidence showed that mixing viral vector vaccine with mRNA vaccine may be more reactogenic than without mixing schedule. The reactogenicity symptoms reported were short-lived.



Department of Health for disease prevention and control

- 3. Individuals are advised to complete both doses of the series with the same product when possible. In exceptional situations where the vaccine recipient is unable to complete the series with the same type of vaccine (e.g. due to anaphylaxis after the first dose, or if the vaccine is no longer available/accessible), vaccination with another COVID-19 vaccine may be considered, on a case-by-case basis.
- 4. This recommendation supersedes the previous interim recommendation on the interchangeability of COVID-19 vaccines issued on 7 January 2021 and 19 February 2021.

### Eligible age groups for receiving Comirnaty COVID-19 vaccine

- 5. The Advisory Panel on COVID-19 Vaccines has recommended to lower the age limit for receiving the Comirnaty COVID-19 vaccine to age 12. The JSC-EAP agreed that the Comirnaty COVID-19 vaccine has high efficacy against symptomatic COVID-19 disease. Vaccination will be important to protect adolescents against symptomatic COVID-19 disease and to reduce community transmission of COVID-19, as well as to increase the overall community immunity.
- 6. The JSC-EAP noted that there were overseas reports of mild myocardits/ pericarditis following vaccination with Comirnaty COVID-19 vaccine, and the probability for a possible link between the second dose and the onset of myocarditis among young adults. There is a need to continue monitoring ongoing studies on this possible link.
- 7. The JSC-EAP considered that the benefits of Comirnaty COVID-19 vaccine in reducing deaths and hospitalisations due to COVID-19 infection outweigh the risks, and recommended the use of Comirnaty COVID-19 vaccine for adolescents aged 12 15.
- 8. This recommendation supersedes the previous interim recommendation on the use of Comirnaty COVID-19 vaccine for children and adolescents issued on 7 January 2021.





## **COVID-19** vaccination for elderly

- 9. Elderly is the group with highest risks of complication and death from COVID-19 disease. COVID-19 vaccines are highly recommended for the elderly.
- 10. Inactivated vaccines, e.g. influenza vaccines, being used in elderly for a long time, have successfully prevented influenza complications and outbreaks in residential care homes for the elderly.
- 11. Any elderlies who have received influenza vaccines before can safely receive COVID-19 vaccines. For the frailest elderlies, the benefit versus risk may have to be carefully weighed.
- 12. This recommendation supersedes the previous interim recommendation on the use of Comirnaty COVID-19 vaccine for frail elderly issued on 8 February 2021.

### **June 2021**

The copyright of this paper belongs to the Centre for Health Protection, Department of Health, Hong Kong Special Administrative Region. Contents of the paper may be freely quoted for educational, training and non-commercial uses provided that acknowledgement be made to the Centre for Health Protection, Department of Health, Hong Kong Special Administrative Region. No part of this paper may be used, modified or reproduced for purposes other than those stated above without prior permission obtained from the Centre.



