



衛生防護中心
Centre for Health Protection

**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 March 18, 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 on March 18, 2021, joined by the Chief Executive's expert advisory panel (EAP), to provide recommendations on use of COVID-19 vaccination for those with previous COVID-19 infection and discuss the existing evidence on COVID-19 vaccine effectiveness against different variants.

Post-marketing COVID-19 vaccine effectiveness studies

2. Published data of COVID-19 vaccines undergoing phase four clinical studies showed that the effectiveness of the vaccines against symptomatic COVID-19 cases in real life situation is comparable to the findings in phase three trials and they are also found to be effective against COVID-19 related hospitalisations and deaths. Rapid deployment of the vaccines should be enabled to achieve a high level of coverage as soon as practicable.



COVID-19 vaccination for persons with previous COVID-19 infection

3. Previous COVID-19 infection usually confers immunity for at least 6 to 9 months for majority of patients. There is accumulating evidence showing that those previously infected with COVID-19 would be further protected by one dose of mRNA vaccine. After receiving one dose of mRNA vaccine, these persons may experience more systemic side effects (such as fatigue, headache, chills, muscle pain, fever and joint pain) when compared to those without prior infection. People who wish to receive mRNA vaccine should wait for at least 90 days after discharge from previous infection. There is currently no data on the role of inactivated vaccines.

COVID-19 vaccination and emerging variants of concerns

4. Emerging variants are constant threats to the protection conferred by COVID-19 vaccines. There were several variants circulating globally, including the variants first emerged in the United Kingdom (B.1.1.7), in the South Africa (B.1.351) and in Brazil (P.1). The meeting discussed the existing evidence on COVID-19 vaccine effectiveness against different variants.

5. In general, studies have shown that the existing vaccines works well against the non-variant. The effectiveness data against variants differ by vaccines. The BioNTech vaccine (BNT162b2) is effective against B.1.1.7 and P.1, but is less effective against B.1.351. There is currently limited efficacy data of CoronaVac vaccine against variants. The company is currently implementing a large scale study in Brazil and more efficacy data against variants will be available. The vaccine developed by AstraZeneca, in collaboration with the University of Oxford (AZD1222) is effective against B.1.1.7 but is ineffective against the B.1.351 variant.

6. Achieving a high COVID-19 vaccination coverage as soon as possible and continuing robust non-pharmaceutical interventions to minimise the chance of viral transmission would be a priority goal in controlling the epidemic and preventing the emergence of variants.

Non-pharmaceutical interventions (NPIs) under the COVID-19 vaccination programme

7. Currently, there is some preliminary evidence on the effects of vaccination on preventing transmission and challenges posed by the emergence of COVID-19 variants.

8. The World Health Organization and European Centre for Disease Prevention and Control consider that proof of vaccination should not cause international travellers to be exempted from complying with other travel risk reduction measures.

9. Hong Kong has a very stringent testing and quarantine requirement for inbound travellers. From December 2020 till mid-March 2021, over 400 imported cases were reported in Hong Kong and about 4% were detected beyond 14 days of quarantine. Among these imported cases, variant strains were detected in over 90 cases, of which more than 60% were asymptomatic at the time of specimen collection. It is essential to maintain the current testing and quarantine measures.

10. The combination of NPIs with COVID-19 vaccination will allow for maximum protection against the virus. There is a need to continue public health strategies on NPIs, including social distancing, good hand hygiene and wearing a mask in public, to reduce the risk of transmission.

11. NPIs should continue to be followed by vaccinated individuals, as well as those who have not yet been vaccinated. Any changes to NPIs should be carefully monitored, but can be reviewed with increasing vaccination coverage.

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