AusVaxSafety
An NCIRS led collaboration

Vaccine safety in Australia
AusVaxSafety summary report 2022

National Immunisation Program
A joint Australian, State and Territory Government Initiative

Australian Government
Department of Health and Aged Care

Contents

We acknowledge that the National Centre for Immunisation Research and Surveillance (NCIRS) is on the land of the traditional owners the Aboriginal and Torres Strait Islander peoples, the First Australians, and recognise their culture, history, diversity and their deep connection to the land. Together, through research and partnership, we aim to move to a place of equity for all. NCIRS also acknowledges and pays respect to other Aboriginal and Torres Strait Islander nations from which our research, staff and community are drawn.

Overview

The vaccination schedule in Australia

- In Australia, vaccines against serious diseases are funded by the federal government under the National Immunisation Program (NIP) for children, adolescents, pregnant people and older people.
- The National Immunisation Program provides vaccines at specific ages/ time points called schedule points.
- Additional vaccines are also provided to people at increased risk of certain serious diseases.
- In addition to the National Immunisation Program and as part of Australia's continued pandemic response, COVID-19 vaccines continued to be given throughout 2022.

AusVaxSafety findings in 2022

- Since its establishment in 2014, the AusVaxSafety program actively monitors vaccine safety throughout Australia at selected vaccination sites. In 2022, there were 670 immunisation clinics participating in the AusVaxSafety program.
- Between January and December 2022, the AusVaxSafety system has received more than 1.6 million vaccine safety survey responses.
- The majority of adverse events after vaccination are mild, including local injection site reactions and some systemic symptoms and go away within a few days.
- The results confirm that the short term safety of vaccines in the National Immunisation Program and COVID-19 vaccines used in Australia is consistent with results in similar active safety surveillance systems, like V-safe used in the US.

What's new in the 2022 report?

- National Immunisation Program (NIP) and COVID-19 vaccines now reported in one consolidated report.
- A new, more robust, vaccine safety survey for NIP vaccines to align with the COVID-19 vaccine safety survey was implemented in April 2022. This allows the capture of richer and more consistent data from participants, which in turn enhances comparison across different vaccines.

The AusVaxSafety program

Since 2014, **AusVaxSafety** has actively monitored the safety of all vaccines used at each schedule point of the National Immunisation Program and all COVID-19 vaccines used in Australia.

To do this, AusVaxSafety surveillance tools distribute a short vaccine safety survey via SMS or email to individuals—or where appropriate their parent or carer—who received their vaccine at a participating AusVaxSafety site or vaccination hub across Australia.

The surveys are designed by vaccine experts and give participants the opportunity to report any adverse events they may have experienced after receiving their vaccination, and if they sought medical attention for any reason*.

De-identified data from completed surveys are analysed and monitored by epidemiologists and vaccine experts who investigate anything unusual or unexpected to ensure that vaccines are performing as safely and effectively as expected in real-world conditions.

In 2022, 670 immunisation provider sites participated in the AusVaxSafety program (Figure 1). The sites included general practices, pharmacies, hospitals, schools, community clinics, Aboriginal Medical Services and state and territory vaccination hubs.

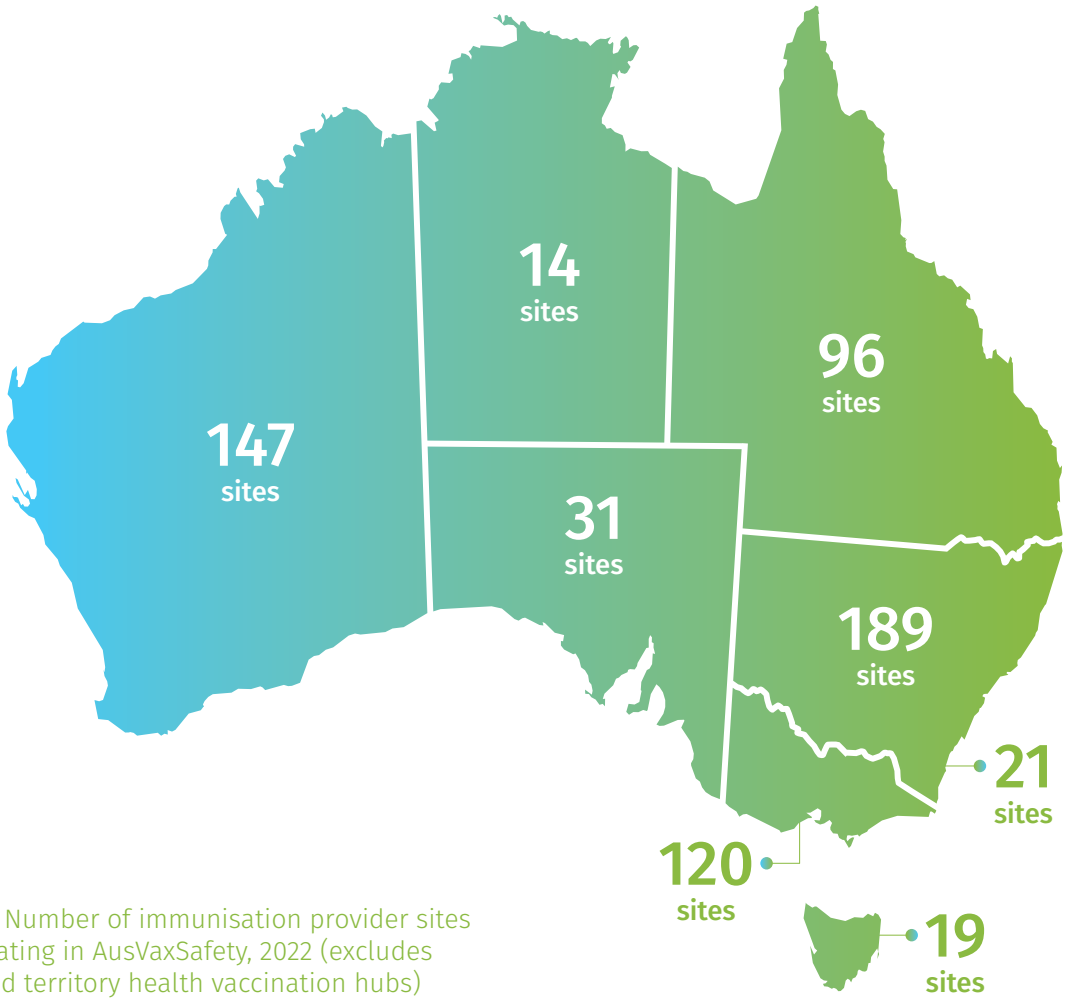


Figure 1 Number of immunisation provider sites participating in AusVaxSafety, 2022 (excludes state and territory health vaccination hubs)

*As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

How AusVaxSafety works

*As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Limitations

- The information reported by survey respondents was not clinically verified.
- People experiencing an adverse event may be more motivated to respond, inflating the apparent frequency. Conversely, those with severe adverse events may be less able to respond.
- AusVaxSafety captures only events from within a few days of vaccination.
- Respondents from linguistically diverse communities may have been under-represented, as the survey was only available in English.
- Representativeness of the respondents may have been limited by the need for internet access to complete the survey.

AusVaxSafety monitors adverse events in the first 3 days following NIP vaccines and in the first 7 days following COVID-19 vaccines. This report reflects data from people who received a vaccine at a participating clinic and completed the AusVaxSafety vaccine safety survey sent 3 days after vaccination. It does not include data from every person who received a vaccine.

The Therapeutic Goods Administration (TGA) also monitors adverse events that are reported in other ways through the spontaneous reporting system. This means the TGA can detect safety issues, particularly rare and later onset adverse events, that may not be identified in the AusVaxSafety program.

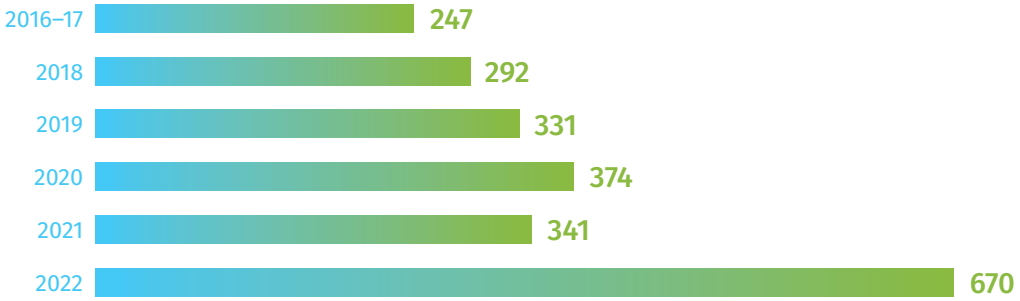
This information is published in the COVID-19 vaccine safety reports on the TGA website. The two systems complement each other and provide a comprehensive vaccine safety surveillance system in Australia.

Since 2021 and previous years...

As COVID-19 vaccinations shifted from state/territory health vaccination hubs to general practice, AusVaxSafety increased the number of sentinel general practice surveillance sites to ensure ongoing representation of the general population receiving COVID-19 vaccines.

The number of participating sites has remained high across Australia, **ensuring a high number of participants for surveillance.**

PARTICIPATING SITES



Participation has remained high with more than 1.6 million safety surveys completed in 2022, so we can be **confident that safety issues included in our surveys would have been identified**

The types and frequency of adverse events has remained **as expected from clinical trials**

Most adverse events after vaccination are mild and **go away within a few days**

No safety issues have been detected for any vaccines monitored under AusVaxSafety, which confirm the short term safety of **vaccines in the National Immunisation Program and COVID-19 vaccines used in Australia**

2 month* schedule point

1 JANUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of individuals who received a vaccine at the **2 month schedule point** and whose parent or carer completed an AusVaxSafety survey on their child's behalf sent in the days following vaccination.

Vaccines given at 2 months in 2022

	Protects against
INFANRIX HEXA	Diphtheria, tetanus, whooping cough, hepatitis B, *Haemophilus influenzae* type b, polio
ROTARIX	Rotavirus
PREVENAR 13	Pneumococcal disease

*** Can be given from six weeks of age**

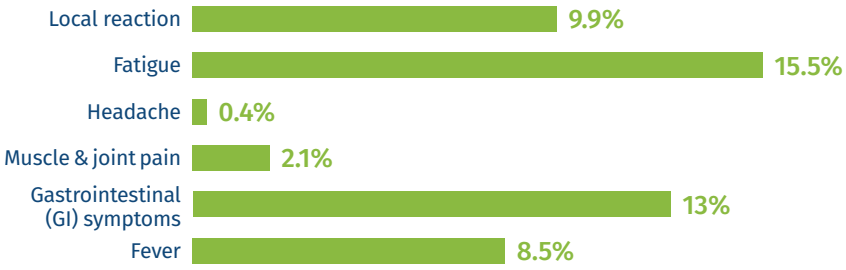
Safety surveys completed

5,064

Reported at least one adverse event

23.1%

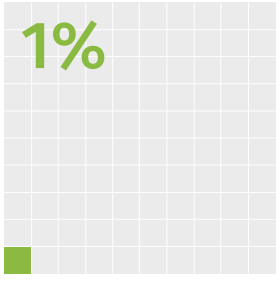
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

1%

Reported disruption to routine activities

Respondent demographics

50% female

50% male

5.5% identified as Aboriginal and/or Torres Strait Islander

1 month youngest respondent

2 months oldest respondent

4 month schedule point

1 JANUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of individuals who received a vaccine at the **4 month schedule point** and whose parent or carer completed an AusVaxSafety survey on their child's behalf sent in the days following vaccination.

Vaccines given at 4 months in 2022

	Protects against
INFANRIX HEXA	Diphtheria, tetanus, whooping cough, hepatitis B, *Haemophilus influenzae* type b, polio
ROTARIX	Rotavirus
PREVENAR 13	Pneumococcal disease

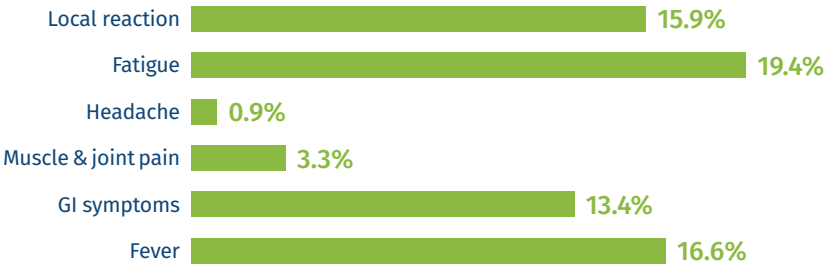
Safety surveys completed

4,609

Reported at least one adverse event

30.5%

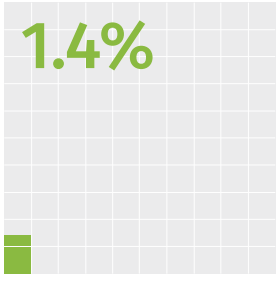
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

1%

Reported missing work, study or routine duties

Respondent demographics

49% female

51% male

4.9% identified as Aboriginal and/or Torres Strait Islander

3 months youngest respondent

5 months oldest respondent

6 month schedule point

1 JANUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of individuals who received a vaccine at the **6 month schedule point** and whose parent or carer completed an AusVaxSafety survey on their child's behalf sent in the days following vaccination.

Vaccines given at 6 months in 2022

	Protects against
INFANRIX HEXA	Diphtheria, tetanus, whooping cough, hepatitis B, *Haemophilus influenzae* type b, polio

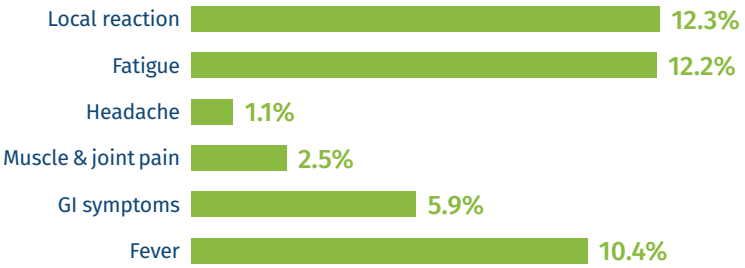
Safety surveys completed

4,263

Reported at least one adverse event

21.9%

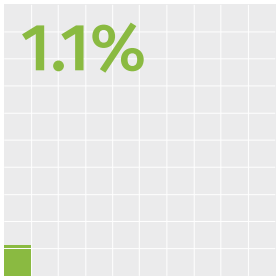
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

2%

Reported missing work, study or routine duties

Respondent demographics

49% female

51% male

4.5% identified as Aboriginal and/or Torres Strait Islander

5 months youngest respondent

8 months oldest respondent

12 month schedule point

1 JANUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of individuals who received a vaccine at the **12 month schedule point** and whose parent or carer completed an AusVaxSafety survey on their child's behalf sent in the days following vaccination.

Vaccines given at 12 months in 2022

	Protects against
M-M-R II OR PRIORIX	Measles, mumps, rubella
NIMENRIX	Meningococcal disease (types A, C, W and Y)
PREVENAR 13	Pneumococcal disease

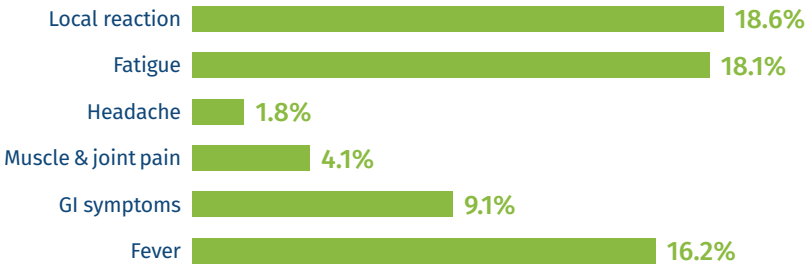
Safety surveys completed

4,385

Reported at least one adverse event

29.2%

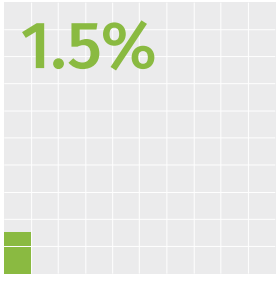
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

5%

Reported missing work, study or routine duties

Respondent demographics

49% female

51% male

5.2% identified as Aboriginal and/or Torres Strait Islander

11 months youngest respondent

14 months oldest respondent

18 month schedule point

1 JANUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of individuals who received a vaccine at the **18 month schedule point** and whose parent or carer completed an AusVaxSafety survey on their child's behalf sent in the days following vaccination.

Vaccines given at 18 months in 2022

	Protects against
PRIORIX-TETRA OR PROQUAD	Measles, mumps, rubella, chickenpox
INFANRIX OR TRIPACEL	Diphtheria, tetanus, whooping cough
ACT-HIB	*Haemophilus influenzae* type b

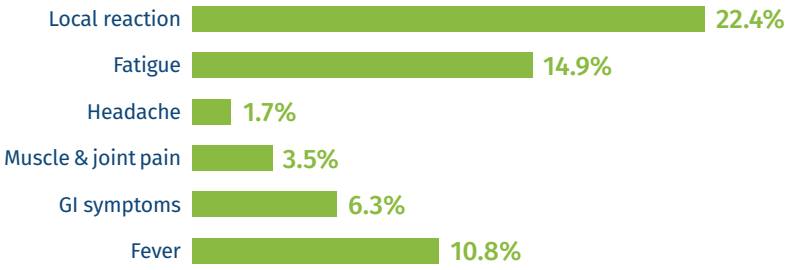
Safety surveys completed

4,213

Reported at least one adverse event

29.1%

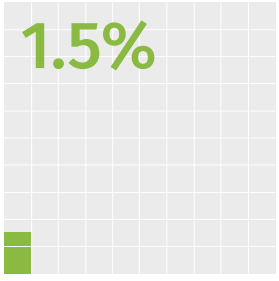
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

3%

Reported missing work, study or routine duties

Respondent demographics

49% female

51% male

4.7% identified as Aboriginal and/or Torres Strait Islander

17 months youngest respondent

20 months oldest respondent

4 year schedule point

1 JANUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of individuals who received a vaccine at the **4 year schedule point** and whose parent or carer completed an AusVaxSafety survey on their child's behalf sent in the days following vaccination.

Vaccines given at 4 years in 2022

	Protects against
INFANRIX IPV OR QUADRACEL	Diphtheria, tetanus, whooping cough, polio

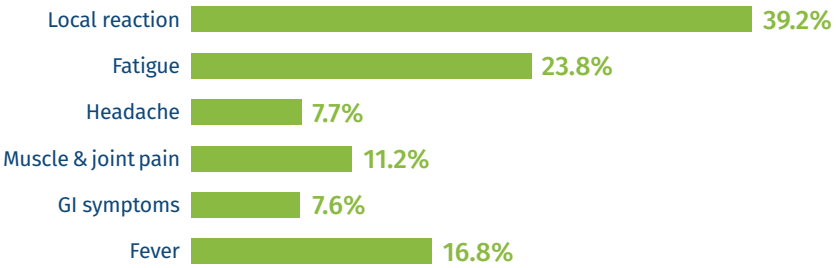
Safety surveys completed

4,598

Reported at least one adverse event

43.6%

Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

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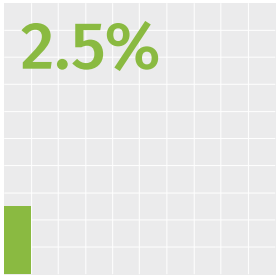
Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

8%

Reported missing work, study or routine duties

Respondent demographics

49% female

51% male

4.2% identified as Aboriginal and/or Torres Strait Islander

3 years youngest respondent

4 years oldest respondent

12–13 year schedule point

22 FEBRUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of individuals who received a vaccine at the **12–13 year schedule point** and whose parent or carer completed an AusVaxSafety survey on their child's behalf sent in the days following vaccination.

Vaccines given to 12–13 year olds in 2022

	Protects against
GARDASIL 9	HPV (human papillomavirus)
BOOSTRIX	Diphtheria, tetanus, whooping cough

Safety surveys completed

6,301 HPV (1st dose) and dTpa vaccines together

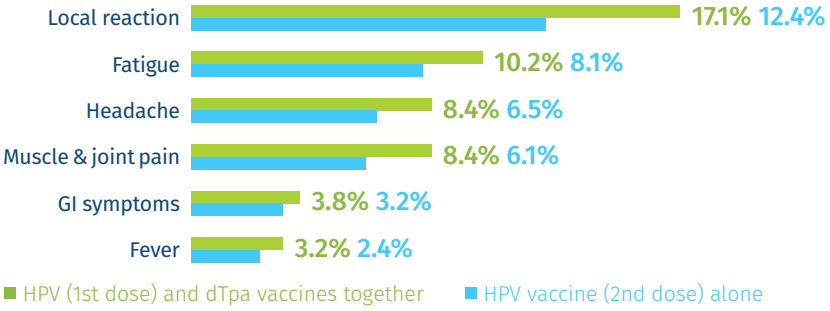
18,717 HPV vaccine (2nd dose) alone

Reported at least one adverse event

20.4% HPV (1st dose) and dTpa vaccines together

15.9% HPV vaccine (2nd dose) alone

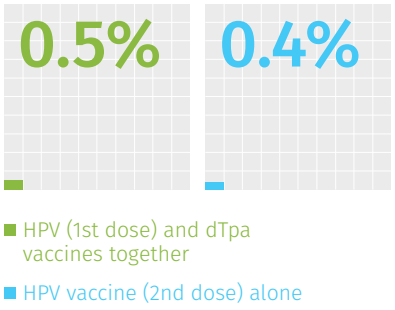
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

7% HPV (1st dose) and dTpa vaccines together

5% HPV vaccine (2nd dose) alone

Reported missing work, study or routine duties

Respondent demographics

48% female

52% male

3.7% identified as Aboriginal and/or Torres Strait Islander

11 years youngest respondent

14 years oldest respondent

14–16 year schedule point

1 JANUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of individuals who received a vaccine at the **14–16 year schedule point** and whose parent or carer completed an AusVaxSafety survey on their child's behalf sent in the days following vaccination.

Vaccines given at 14–16 year olds in 2022

	Protects against
NIMENRIX	Meningococcal disease (types A, C, W and Y)

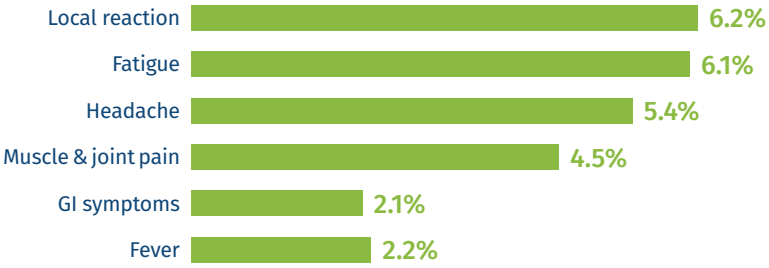
Safety surveys completed

13,516

Reported at least one adverse event

10.5%

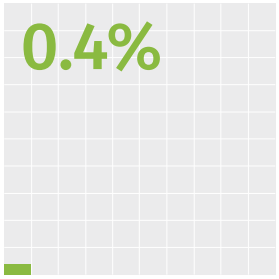
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

4%

Reported missing work, study or routine duties

Respondent demographics

49% female

51% male

3.4% identified as Aboriginal and/or Torres Strait Islander

14 years youngest respondent

19 years oldest respondent

Pregnant people schedule point

1 JANUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of pregnant individuals who received a vaccine at the **pregnant people schedule point** and completed an AusVaxSafety survey sent in the days following vaccination.

Vaccines given to pregnant people in 2022

	Protects against
AFLURIA QUAD, FLUARIX TETRA, FLUQUADRI OR VAXIGRIP TETRA	Influenza
ADACEL OR BOOSTRIX	Diphtheria, tetanus, whooping cough

Safety surveys completed

436
Seasonal influenza and dTpa vaccines together

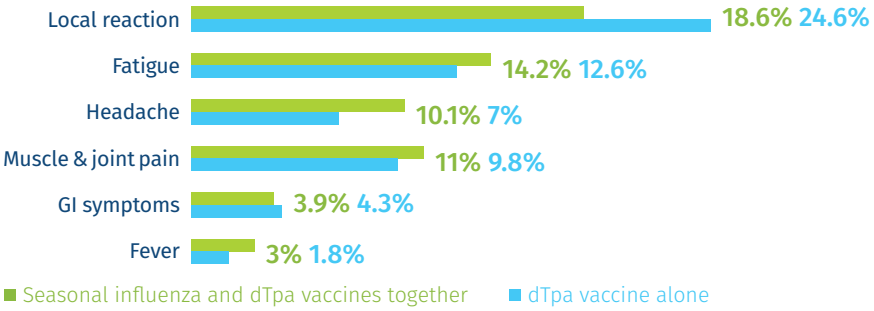
1,230
dTpa vaccine alone

Reported at least one adverse event

21.8%
Seasonal influenza and dTpa vaccines together

26.7%
dTpa vaccine alone

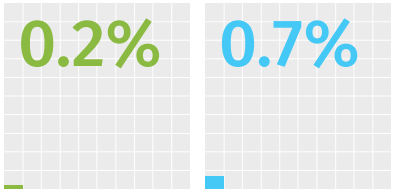
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Seasonal influenza and dTpa vaccines together

dTpa vaccine alone

Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

4% Seasonal influenza and dTpa vaccines together

3% dTpa vaccine alone

Reported missing work, study or routine duties

Respondent demographics

3.4% identified as Aboriginal and/or Torres Strait Islander

16 **years** youngest respondent

49 **years** oldest respondent

Older adults schedule point

1 JANUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of individuals who received a vaccine at the **older adult schedule point** and completed an AusVaxSafety survey sent in the days following vaccination.

Vaccines given to older adults in 2022

	Protects against
PREVENAR 13	Pneumococcal disease
ZOSTAVAX	Shingles

Safety surveys completed

10,239 Pneumococcal vaccine

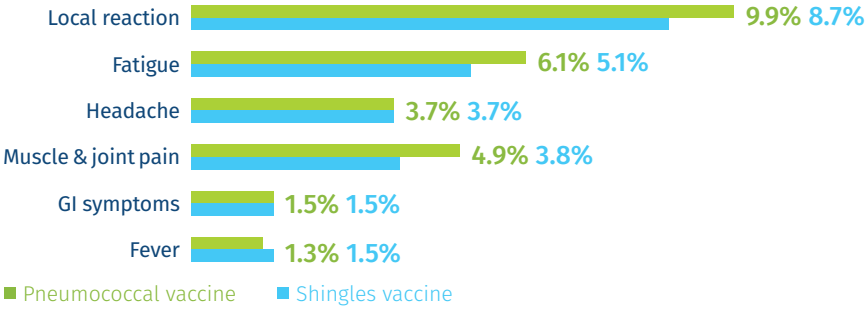
3,632 Shingles vaccine

Reported at least one adverse event

12.9% Pneumococcal vaccine

11.9% Shingles vaccine

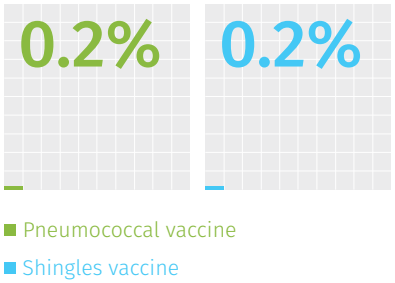
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

1% Pneumococcal vaccine

1% Shingles vaccine

Reported missing work, study or routine duties

Respondent demographics

55% female

45% male

2.5% identified as Aboriginal and/or Torres Strait Islander

50 years youngest respondent

100 years oldest respondent

Seasonal influenza schedule point

18 APRIL 2022 – 5 SEPTEMBER 2022

Data on this page show the responses of individuals (or their parent/carer) who received a **seasonal influenza vaccine** and completed an AusVaxSafety survey sent in the days following vaccination.

Influenza vaccines given in 2022

	Protects against
AFLURIA QUAD, FLUAD QUAD, FLUARIX TETRA, FLUQUADRI, INFLUVAC TETRA, VAXIGRIP TETRA	Influenza

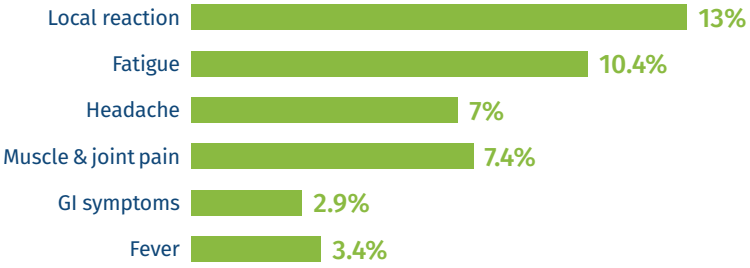
Safety surveys completed

164,554

Reported at least one adverse event

18.3%

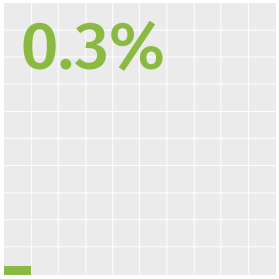
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

3%

Reported missing work, study or routine duties

Respondent demographics

59% female

41% male

2.3% identified as Aboriginal and/or Torres Strait Islander

<1 year youngest respondent

105 years oldest respondent

Comirnaty (Pfizer) COVID-19 vaccine original adult formulation

1 JANUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of all individuals aged **12 years and older** who received the adult 30 microgram original formulation of the Pfizer COVID-19 vaccine and completed an AusVaxSafety survey sent on day 3 after vaccination.

Safety surveys completed

1,093,101

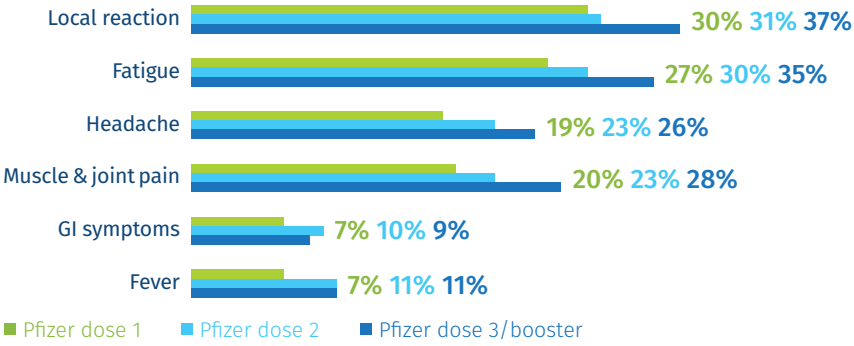
Reported at least one adverse event

38% Pfizer dose 1

49% Pfizer dose 2

46% Pfizer dose 3/booster

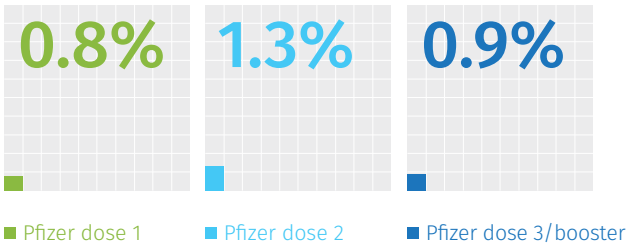
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

10% Pfizer dose 1

14% Pfizer dose 2

15% Pfizer dose 3/booster

Reported missing work, study or routine duties

The majority reported missing 1 day or less. Most participants who reported not being able to do work or routine duties had lethargy, headache and joint pain. These are common adverse events linked to the immune response following immunisation and understandably have meant some people have chosen to rest after vaccination.

Respondent demographics

1.7% identified as Aboriginal and/or Torres Strait Islander

12 **years** youngest respondent

109 **years** oldest respondent

Comirnaty (Pfizer) COVID-19 vaccine original paediatric formulation (5–11 years)

3 JANUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of all individuals aged **5–11 years** who received received the paediatric 10 microgram original formulation of the Pfizer COVID-19 vaccine and completed an AusVaxSafety survey sent on day 3 after vaccination. People aged 5–11 who are immunocompromised were recommended a third dose for their primary vaccination course. However, there were too few responses in this group to report.

Safety surveys completed

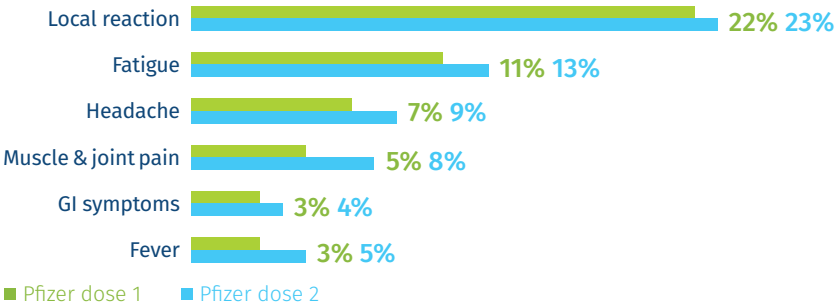
217,078

Reported at least one adverse event

25% Pfizer dose 1

25% Pfizer dose 2

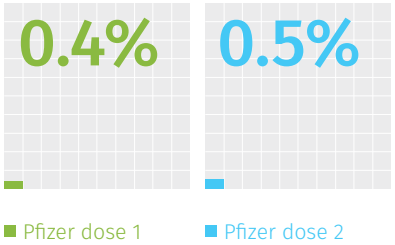
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

3% Pfizer dose 1

7% Pfizer dose 2

Reported missing work, study or routine duties

The majority reported missing 1 day or less. Most participants who reported not being able to do work or routine duties had lethargy, headache and joint pain. These are common adverse events linked to the immune response following immunisation and understandably have meant some people have chosen to rest after vaccination.

Respondent demographics

2.5% identified as Aboriginal and/or Torres Strait Islander

5 **years** youngest respondent

11 **years** oldest respondent

Comirnaty (Pfizer) COVID-19 vaccine original adult formulation – Aboriginal and/or Torres Strait Islander participants

1 JANUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of Aboriginal and/or Torres Strait Islander people aged **12 years and older** who received the adult 30 microgram original formulation of the Pfizer COVID-19 vaccine and completed an AusVaxSafety survey sent on day 3 after vaccination.

Safety surveys completed

18,255

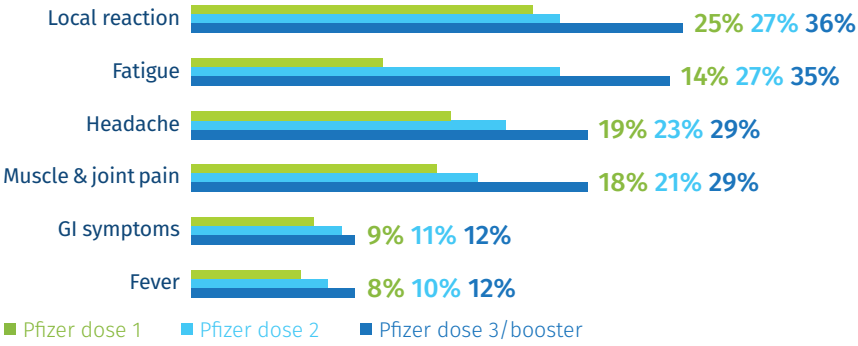
Reported at least one adverse event

33% Pfizer dose 1

35% Pfizer dose 2

44% Pfizer dose 3/booster

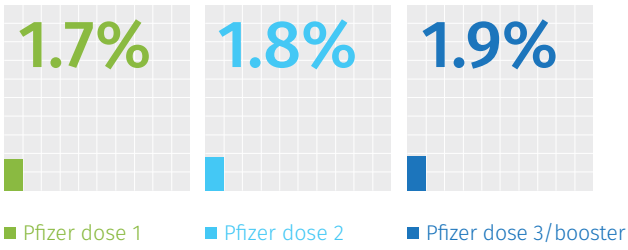
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

10% Pfizer dose 1

15% Pfizer dose 2

17% Pfizer dose 3/booster

Reported missing work, study or routine duties

The majority reported missing 1 day or less. Most participants who reported not being able to do work or routine duties had lethargy, headache and joint pain. These are common adverse events linked to the immune response following immunisation and understandably have meant some people have chosen to rest after vaccination.

Respondent demographics

12 **years** youngest respondent

102 **years** oldest respondent

Comirnaty (Pfizer) COVID-19 vaccine original paediatric formulation (5–11 years) – Aboriginal and/or Torres Strait Islander participants

3 JANUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of Aboriginal and/or Torres Strait Islander people aged **5–11 years** received the paediatric 10 microgram original formulation of the Pfizer COVID-19 vaccine and completed an AusVaxSafety survey sent on day 3 after vaccination. People aged 5–11 who are immunocompromised were recommended a third dose for their primary vaccination course. However, there were too few responses in this group to report.

Safety surveys completed

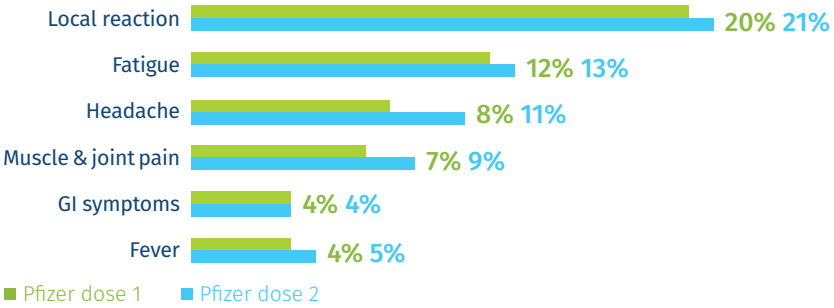
5,461

Reported at least one adverse event

23% Pfizer dose 1

25% Pfizer dose 2

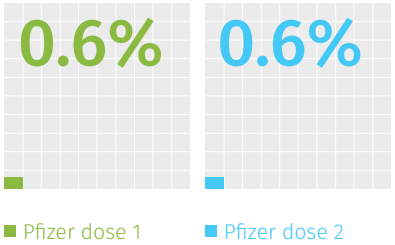
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

4% Pfizer dose 1

9% Pfizer dose 2

Reported missing work, study or routine duties

The majority reported missing 1 day or less. Most participants who reported not being able to do work or routine duties had lethargy, headache and joint pain. These are common adverse events linked to the immune response following immunisation and understandably have meant some people have chosen to rest after vaccination.

Respondent demographics

5 **years** youngest respondent

11 **years** oldest respondent

Vaxzevria (AstraZeneca) COVID-19 vaccine – all participants

1 JANUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of all individuals who received the **AstraZeneca** COVID-19 vaccine and completed an AusVaxSafety survey sent on day 3 after vaccination.

Safety surveys completed

3,110

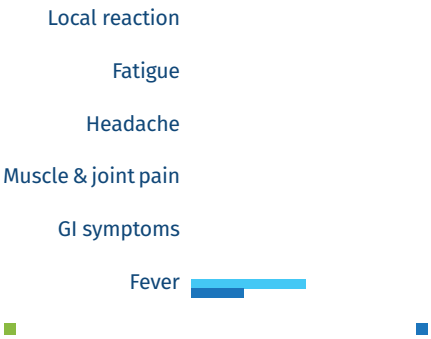
Reported at least one adverse event

55% AstraZeneca dose 1

38% AstraZeneca dose 2

24% AstraZeneca dose 3/booster

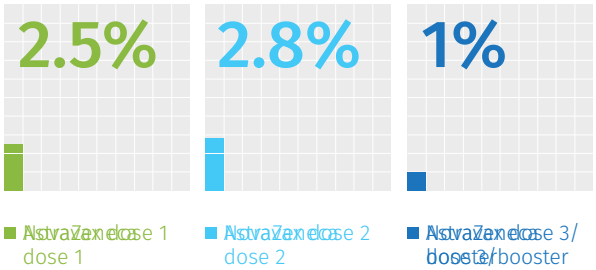
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

28% AstraZeneca dose 1

15% AstraZeneca dose 2

8% AstraZeneca dose 3/booster

Reported missing work, study or routine duties

The majority reported missing 1 day or less. Most participants who reported not being able to do work or routine duties had lethargy, headache and joint pain. These are common adverse events linked to the immune response following immunisation and understandably have meant some people have chosen to rest after vaccination.

Respondent demographics

1.6% identified as Aboriginal and/or Torres Strait Islander

18 **years** youngest respondent

98 **years** oldest respondent

Spikevax (Moderna) original COVID-19 vaccine – all participants

1 JANUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of all individuals aged **12 years and older** who received the 100 microgram original formulation of the **Moderna** COVID-19 vaccine and completed an AusVaxSafety survey sent on day 3 after vaccination. In 2022, fewer than 100 responses were received from individuals aged 6–11 years (50 microgram original formulation) and 6 months – 5 years (25 microgram original formulation) following Moderna COVID-19 vaccination, respectively. Due to the low number of responses, these were not included in the analysis.

Safety surveys completed

161,090

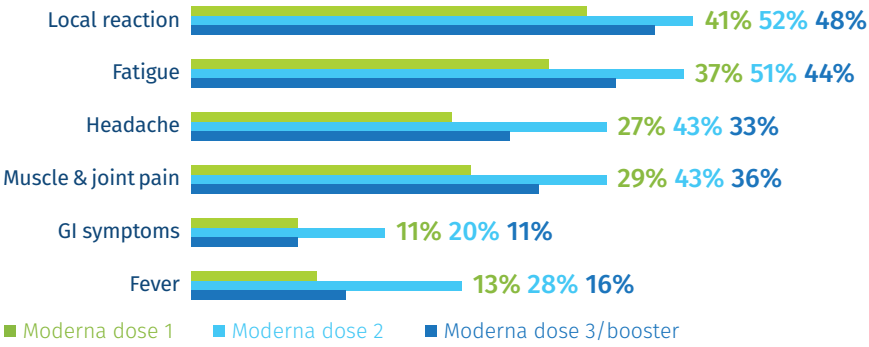
Reported at least one adverse event

50% Moderna dose 1

60% Moderna dose 2

56% Moderna dose 3/booster

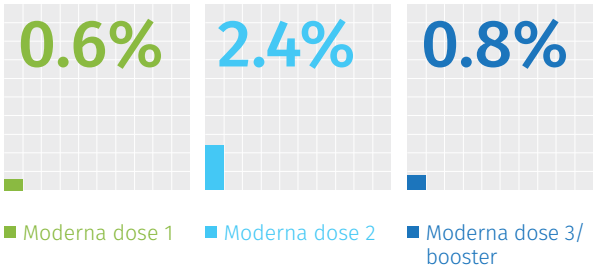
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

15% Moderna dose 1

29% Moderna dose 2

21% Moderna dose 3/booster

Reported missing work, study or routine duties

The majority reported missing 1 day or less. Most participants who reported not being able to do work or routine duties had lethargy, headache and joint pain. These are common adverse events linked to the immune response following immunisation and understandably have meant some people have chosen to rest after vaccination.

Respondent demographics

1% identified as Aboriginal and/or Torres Strait Islander

12 **years** youngest respondent

103 **years** oldest respondent

Spikevax (Moderna) original COVID-19 vaccine – Aboriginal and/or Torres Strait Islander participants

1 JANUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of Aboriginal and/or Torres Strait Islander people who received the 100 microgram original formulation of the **Moderna** COVID-19 vaccine and completed an AusVaxSafety survey sent on day 3 after vaccination. In 2022, fewer than 200 responses were received from Aboriginal and/or Torres Strait Islander participants following Moderna dose 1 and dose 2. Due to the small number of responses, these were not included in the analysis.

Safety surveys completed

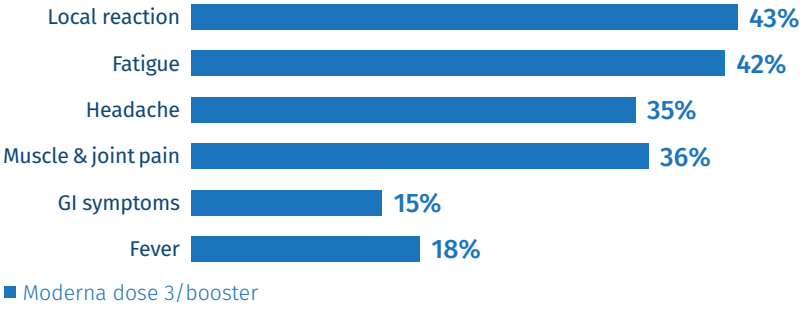
1,403

Reported at least one adverse event

52%

Moderna dose 3/booster

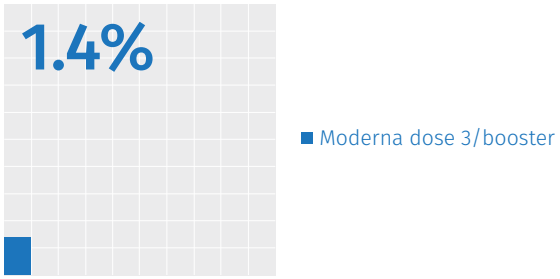
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

21% Moderna dose 3/booster

Reported missing work, study or routine duties

The majority reported missing 1 day or less. Most participants who reported not being able to do work or routine duties had lethargy, headache and joint pain. These are common adverse events linked to the immune response following immunisation and understandably have meant some people have chosen to rest after vaccination.

Respondent demographics

12 years youngest respondent

93 years oldest respondent

Spikevax (Moderna) bivalent original/BA.1 COVID-19 booster vaccine – all participants

10 OCTOBER 2022 – 31 DECEMBER 2022

Data on this page show the responses of all individuals who received the **Moderna bivalent original/BA.1** COVID-19 booster vaccine and completed an AusVaxSafety survey sent on day 3 after vaccination.

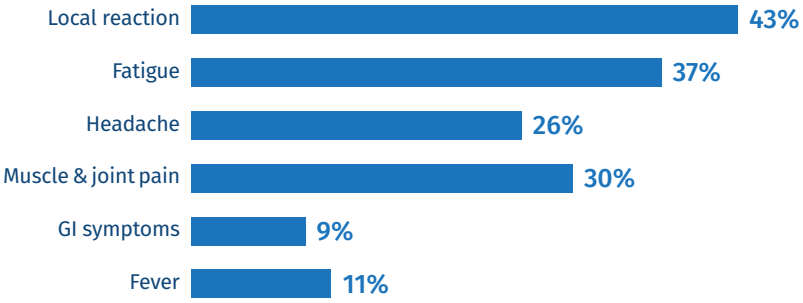
Safety surveys completed

3,229

Reported at least one adverse event

49%

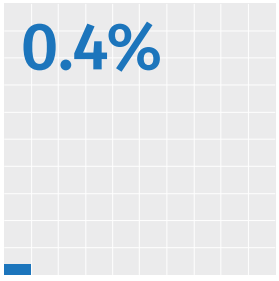
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

14%

Reported missing work, study or routine duties

The majority reported missing 1 day or less. Most participants who reported not being able to do work or routine duties had lethargy, headache and joint pain. These are common adverse events linked to the immune response following immunisation and understandably have meant some people have chosen to rest after vaccination.

Respondent demographics

0.9% identified as Aboriginal and/or Torres Strait Islander

18 **years** youngest respondent

97 **years** oldest respondent

Nuvaxovid (Novavax) COVID-19 vaccine – all participants

14 FEBRUARY 2022 – 31 DECEMBER 2022

Data on this page show the responses of all individuals who received the **Novavax** COVID-19 vaccine and completed an AusVaxSafety survey sent on day 3 after vaccination.

Safety surveys completed

8,454

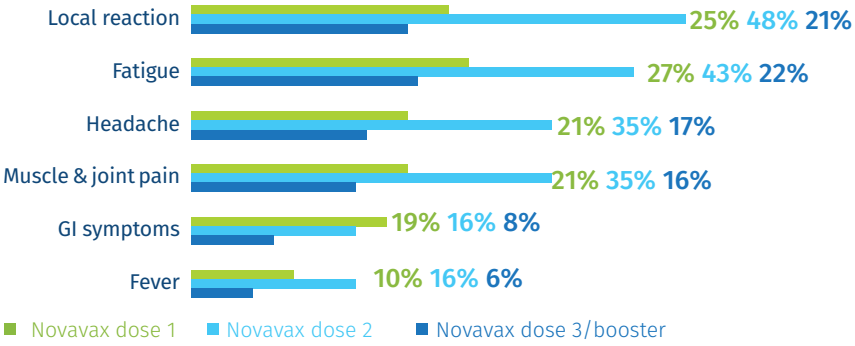
Reported at least one adverse event

37% Novavax dose 1

57% Novavax dose 2

31% Novavax dose 3/booster

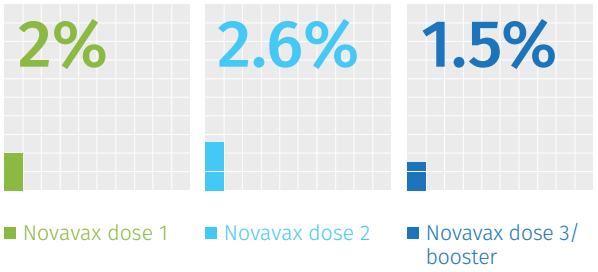
Commonly reported adverse events



These symptoms are known to occur after vaccination. They are generally mild and short-lived.

As with any adverse event reports, not all symptoms reported may be caused by the vaccine; they may be coincidental and due to other causes.

Medical attendance



Those who presented to GPs and emergency departments had similar adverse events to those who didn't. AusVaxSafety does not specifically ask participants the reason why they accessed medical care in the days following vaccination. Therefore, medical attendance reported may or may not be related to any adverse events reported.

Impact on routine activities

13% Novavax dose 1

25% Novavax dose 2

10% Novavax dose 3/booster

Reported missing work, study or routine duties

The majority reported missing 1 day or less. Most participants who reported not being able to do work or routine duties had lethargy, headache and joint pain. These are common adverse events linked to the immune response following immunisation and understandably have meant some people have chosen to rest after vaccination.

Respondent demographics

1.8% identified as Aboriginal and/or Torres Strait Islander

18 **years** youngest respondent

98 years oldest respondent

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