

VLA-401: JE-VC post-marketing adverse event surveillance among U.S. military personnel

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401 Safety Surveillance Study

Active Surveillance for Adverse Events after Immunization with IXIARO among U.S. Military Service Personnel

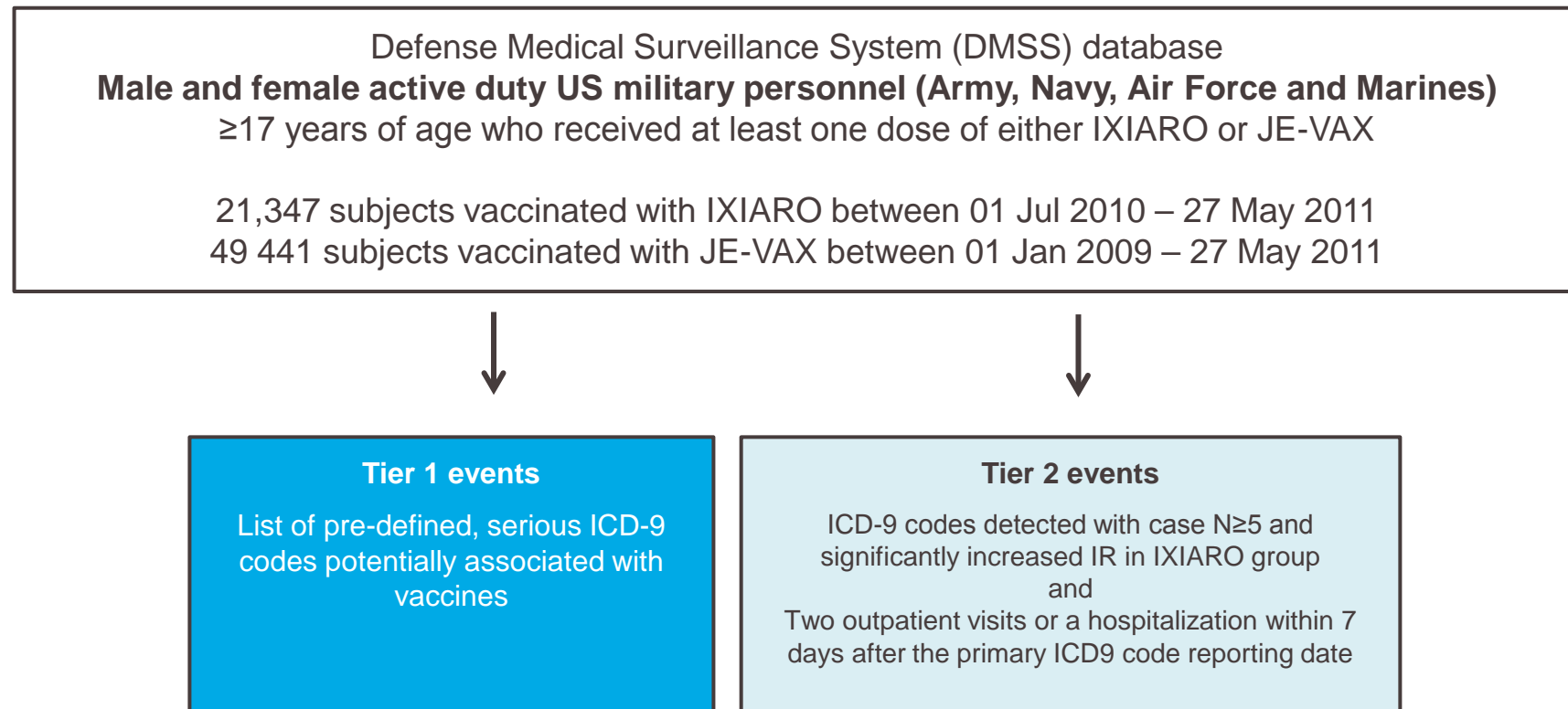
Primary Objective:

- + To detect, verify and characterize rare, potentially serious adverse events (SAEs) such as neurological or hypersensitivity reactions among 20,000 IXIARO vaccinated military personnel.

Secondary Objectives:

- + To identify unexpected or unanticipated adverse events that are possibly associated with IXIARO vaccination by performing data mining for events with significantly higher incidence after IXIARO vaccination than in an IXIARO non-exposed comparison group of JE-VAX vaccinees. Among these, to identify medically significant events (i.e. two outpatient visits or one inpatient visit within 7 days after vaccination).

401 Safety Surveillance Study - Analysis population





401 Safety Surveillance – All subjects in the Tier 1 Analysis

Description of Study Population, DMSS Database

	JE-VAX		IXIARO	
	N	%	N	%
Total subjects	49,441	100	21,347	100
Total doses	101,957		36,358	
Age				
Mean age	26.8 years		24.9 years	
≤24	24,118	49%	13,039	61%
25-34	17,549	35%	6,433	30%
≥35	7,774	16%	1,875	9%
Sex				
Female	3,741	8%	1,524	7%
Male	45,700	92%	19,823	93%

Tier 1 events

401 Safety Surveillance Study - Analysis population



21,347 subjects vaccinated with IXIARO
49 441 subjects vaccinated with JE-VAX



Active electronic surveillance for ICD-9 CM coded AEs within 42 days after each vaccination



Tier 1 events

182 subjects with predefined Tier 1 ICD9-codes detected
4 subjects excluded as non-eligible
5 subjects could not clearly be assigned to either IXIARO or JE-VAX

45 subjects assignable to IXIARO and
128 subjects assignable to JE-VAX
included in the IRR analysis of Tier 1 events



Detailed study of Electronic Health Records including verification of diagnosis, temporal association with vaccination, medical history, concomitant medications and outcome of events and transfer of information into individual Case Report Forms (CFRs)



Tier 1 events – IXIARO Eligible Population

2 subjects could be assigned to IXIARO upon CRF review
1 subject considered non-eligible, as notes on CRF confirmed that Tier 1 event already occurred 4 months before documented visit

46 subjects assignable to IXIARO included in the Eligible Population for assessment of causal relationship with IXIARO by an independent Data safety monitoring board (DSMB)

401 Safety Surveillance Study – Tier 1 AE incidence rates & ratios

DMSS Database

	JE-VAX			IXIARO				
Tier 1 AE	Case N	Person Year	IR per 1000 py	Case N	Person Year	IR per 1000 py	IRR	P-value
Ataxia	1	9206	0.11	0	3634	0	0	1
Bell's Palsy	3	9193	0.33	0	3632	0	0	1
Bronchospasm	2	9191	0.22	0	3628	0	0	1
Cerebrovascular accident	0	9210	0	0	3637	0	.	1
CNS Inflammation / Encephalitis	1	9205	0.11	0	3636	0	0	1
Encephalopathy	1	9208	0.11	0	3635	0	0	1
Guillain-Barré-Syndrome	0	9209	0	0	3637	0	.	1
Multiple sclerosis	0	9207	0	0	3636	0	.	1
Myelitis	1	9205	0.11	0	3636	0	0	1
Neuropathy	4	9195	0.44	0	3633	0	0	1
TIA	1	9204	0.11	0	3635	0	0	1
ADEM	0	9211	0	0	3637	0	.	1

401 Safety Surveillance Study – Tier 1 AE incidence rates & ratios

DMSS Database

Tier 1 AE	JE-VAX			IXIARO			IRR	P-value
	Case N	Person Year	IR per 1000 py	Case N	Person Year	IR per 1000 py		
Convulsion	9	9185	0.98	6	3627	1.65	1.69	0.27
Delayed hypersensitivity / Serum sickness ^a	5	9205	0.54	3 ^a	3635	0.83	1.52	0.58
Anaphylactic shock	7	9188	0.76	2	3629	0.55	0.72	0.75
Angioedema ^a	6	9183	0.65	2 ^a	3629	0.55	0.84	0.96
Neuritis	84	8845	9.5	29	3525	8.23	0.87	0.84
Meningitis	1	9198	0.11	2	3634	0.55	5.06	0.23
<i>Ptosis</i> ^c	2	9200	0.22	1 ^c	3632	0.28	1.27	0.83

^a Single additional subject assigned to IXIARO group after CRF review as documented JE-VAX vaccination was outside of the time window of 42 days after diagnosis of Tier One code.

^c considered non-eligible, as notes on the (CRF) revealed that the Tier One event had already occurred 4 months before the documented visit date, hence an exclusion criterion was met.



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Electronic Health Records - Convulsion

Subject	Description	Time post vaccination	Concurrent vaccines	Causality specified	If applicable: Further dose IXIARO given after recorded event
10005	Code 780.39, Other convulsions	Onset three weeks prior to and 5 weeks after first IXIARO vaccination	Rabies Vaccine	No	Second and third IXIARO dose given
10009	Code 780.39, Other convulsions	Onset 5 days after first IXIARO vaccination	Influenza Vaccine	No	Second IXIARO dose given
10010	Code 780.39, Other convulsions	Onset 1 month after first IXIARO vaccination	Typhoid Vaccine	No	Second IXIARO dose given
10012	Code 780.39, Other convulsions	Onset 21 days after IXIARO vaccination	-	No	-
10050	Code 780.39, Other convulsions	Onset 4 days after second IXIARO vaccination	Smallpox and anthrax vaccinations	No	-
10011	Code 345.9 Epilepsy, unspecified	Onset approx. 5.5 weeks after second IXIARO vaccination	-	No	-



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Electronic Health Records – Delayed hypersensitivity / Serum sickness

Subject	Description	Time post vaccination	Concurrent vaccines	Causality specified	If applicable: Further dose IXIARO given after recorded event
10004	Code 999.5, Other serum reaction	Onset on day of IXIARO vaccination	-	No	-
10016	Code 999.5, Other serum reaction	Onset 1 week after first IXIARO vaccination	Anthrax given concomitantly	Yes	Second IXIARO dose given
10019	Code 999.5, Other serum reaction	Onset 1 month after first IXIARO vaccination	Anthrax given concomitantly	No	Second IXIARO vaccination given 2 days after event
10012	Code 999.5, Other serum reaction	Onset on day of first IXIARO vaccination	-	No	Second IXIARO dose given



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Electronic Health Records - Anaphylactic shock

Subject	Description	Time post vaccination	Concurrent vaccines	Causality specified	If applicable: Further dose IXIARO given after recorded event
10008	Code 999.4, Anaphylactic shock due to serum	Onset 21 days after second IXIARO vaccination	Anthrax given concomitantly	No	-
10013	Code 999.5, Other anaphylactic shock	Event onset 2 months after 1st and 3 days before 2nd IXIARO vaccination	-	No	-

Patient presented in an emergency department 2 months after 1st IXIARO vaccination with dermatitis, in particular full body rash, itchy, and shortness of breath.

Patient denied taking new foods, soaps or detergents

Patient was prescribed prednisone, benadryl (diphenhydramine) and zantac (ranitidine). Diagnosis of anaphylaxis was made.



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Electronic Health Records – Angioedema

Subject	Description	Time post vaccination	Concurrent vaccines	Causality specified	If applicable: Further dose IXIARO given after recorded event
10031	Code 995.1, Angioneurotic edema, not elsewhere classified	Onset 15 days after 2nd IXIARO vaccination	Rabies vaccination given concomitantly	No	-
10044	Code 995.1, Angioneurotic edema, not elsewhere classified	Onset 25 days after first IXIARO vaccination	-	Yes (Bee sting)	Second IXIARO dose given
10001	Code 995.1, Angioneurotic edema, not elsewhere classified	Onset 2 weeks after first IXIARO vaccination	-	No	Second IXIARO vaccination given



401 Safety Surveillance Study – Eligible Tier 1 Population

At least one AE which was assessed ‘possibly related’ by DSMB
by ICD-9 CM Code

ICD-9 CM Code	Medical Term / Diagnosis	Total (N=46) No. (%)*
723.4	Brachial neuritis or radiculitis NOS	4 (8.7)
780.39	Other convulsions	2 (4.3)
999.5	Other serum reaction not elsewhere classified	3 (6.5)
999.4	Anaphylactic reaction to serum	1 (2.2)
995.1	Angioneurotic edema, not elsewhere classified	2 (4.3)
Total number of subjects with AEs assessed as related		12 (26.1)
Total number of such AEs		17

Subjects are counted only once per ICD-9 CM Code
* Percentages are based on N

Tier 2 events

401 Safety Surveillance Study –Tier 2 event counts via DMSS



All ICD-9 Codes with Case N≥5 and significant Incidence Rates Ratio

ICD-9	Description	JE-VAX			IXIARO			Crude IRR (Ixiaro vs Je-Vax)			P-value
		Case N	Person Year	IR per 1000 py	Case N	Person Year	IR per 1000 py	IRR	Lower 95% CI	Upper 95% CI	
0229	Anthrax unspecified	9	9210	0.98	38	3632	10.46	10.71	5.18	22.14	<.0001
470*	Deviated nasal septum	21	9209	2.28	15	3635	4.13	1.81	0.93	3.51	0.0358
Total		30			53						

Conclusions



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Conclusions

- + In a population of 21,347 US military personnel receiving 36,358 doses of IXIARO, screening for pre-defined events (i.e. AEs with evidence or suspicion of an association with JE vaccines or excipients and adjuvants) revealed no statistically significant increased Incidence Rates (IR), compared to a reference population of subjects vaccinated with JE-VAX (N= 49 441).
- + Data mining for non-predefined events with statistically significant higher IR in the IXIARO population compared to the JE-VAX population revealed no events with causal relationship for vaccination with IXIARO.
- + No safety signals have been identified during the review of the 401 study data.
- + Overall, this review of data on more than 20,000 military personnel vaccinated with IXIARO strengthened IXIARO's good safety profile known from clinical development as well as from post-marketing experience since 2009.
- + The benefit-risk evaluation for IXIARO remains positive and unchanged compared to that at time of authorisation.

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