Febrile Seizures Following Multiple Vaccines: A Vaccine Safety Datalink (VSD) Study

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Febrile Seizure

 The American Academy of Pediatrics defines febrile seizures as, "seizures that occur in febrile children between the ages of 6 and 60 months who do not have an intracranial infection, metabolic disturbance, or history of afebrile seizures."

Vaccines Previously Associated with an Increased Risk of Febrile Seizure

| Vaccine | Post-vaccination risk interval, days |
|--|--------------------------------------|
| Diphtheria-Tetanus-whole cell Pertussis (DTP) | 0 – 3 |
| Measles-Mumps-Rubella (MMR) | 6 – 11 |
| Measles-Mumps-Rubella-Varicella (MMRV) | 7 – 10 |
| Inactivated Influenza (TIV) 2010-2011 season formulation | 0 – 1 |
| Pneumococcal conjugate vaccine-13 valent (PCV13) | 0 – 1 |

Febrile Seizures After TIV and PCV13

- Australia, 2010
 - Risk of febrile seizure in the first 24 hours after TIV
- VSD Influenza Rapid Cycle Analysis (RCA) for 2010-2011
 - Risk of febrile seizure on days 0-1 after TIV
 - Concomitant TIV and PCV13 had a higher risk of febrile seizure than either vaccine given separately
 - Risk of febrile seizure on days 0-1 after PCV13
- VSD PCV13 RCA
 - No increased risk of febrile seizure compared to PCV7

Objective

 To assess whether vaccines other than PCV13 given concomitantly with TIV affect the risk of febrile seizure following receipt of TIV.

Methods

- The Vaccine Safety Datalink (VSD) is a collaboration between
 CDC and several integrated health care organizations.
- VSD has a combined annual population of over nine million people (~ 3% of US population).

VSD Sites Contributing Data to this Study



Methods

- Case-finding
 - Medical visits with ICD-9 diagnosis code 780.3x (convulsion)
 - Occurring in the ED or inpatient settings
 - First occurrence in 42 days
- Case-confirmation
 - Medical records were abstracted to confirm the diagnosis and the time of onset in relation to vaccination
- Study period: July 1, 2006 to July 1, 2011
- Ages: 6 through 23 months

Febrile Seizure Case Definition

- Clinician diagnosis of seizure, and
- fever measured or reported, and
- excluding patients with intracranial infection, metabolic disturbance, or history of afebrile seizures.

Analysis

- Self-Controlled Risk Interval (SCRI) method
 - Conditional Poisson regression models the Incidence Rate Ratio (IRR)
 - Only uses cases that occur post-vaccination
 - o Risk interval: days 0-1
 - Comparison interval: days 14 20



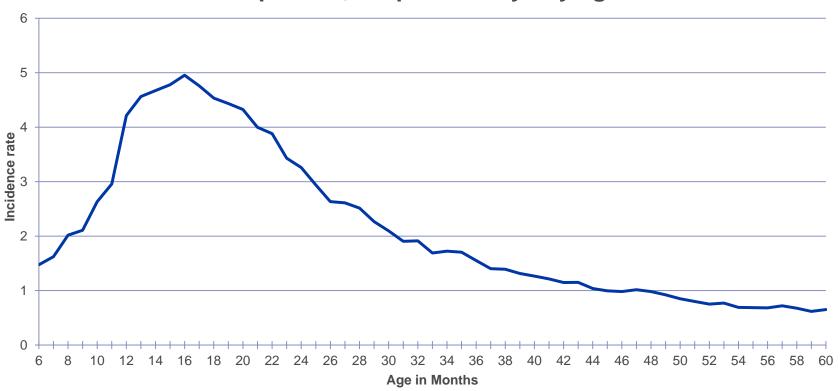
Attributable Risk Estimate

Estimated as: (IRR – 1) * background incidence rate in the
 VSD population per person day * 2 person days

RESULTS: ADMINISTRATIVE DATA

VSD Population Febrile Seizure Background Rate

Incidence rate per 100,000 person days by age in months



Based on ICD-9 coded data

Number of unique vaccine combinations received by children in the VSD, 2000-2011

| Age group | Unique combinations |
|-----------|---------------------|
| (months) | (n) |
| 6 – 11 | 1,582 |
| 12 – 23 | 2,707 |

Vaccine doses given at ages 6-23 months

| Vaccine | Total Doses | Doses Given Alone | Percent Given Alone |
|---------------|-------------|-------------------|---------------------|
| НерВ | 221,179 | 43,282 | 20% |
| RV5 | 285,456 | 1,528 | 1% |
| DTaP | 1,079,684 | 98,004 | 9% |
| DTaP-IPV-HepB | 583,994 | 14,545 | 2% |
| DTaP-IPV-Hib | 73,070 | 2,080 | 3% |
| Hib | 1,152,710 | 25,826 | 2% |
| Hib-HepB | 145,784 | 2,416 | 2% |
| PCV7 | 1,496,120 | 65,862 | 4% |
| PCV13 | 218,732 | 7,152 | 3% |
| IPV | 308,067 | 16,633 | 5% |
| TIV | 955,720 | 484,454 | 51% |
| MIV | 108,526 | 48,482 | 45% |
| MMR | 725,392 | 15,935 | 2% |
| VAR | 700,650 | 18,038 | 3% |
| MMRV | 168,616 | 4,431 | 3% |
| НерА | 650,139 | 140,040 | 22% |

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TIV doses by flu season

| 51.0 | Total TIV | TIV doses | | TIV with |
|------------|-----------|-----------|-----------|-----------|
| Flu Season | doses | alone | TIV alone | MIV* only |
| 2006-07 | 123,034 | 65,392 | 53% | - |
| 2007-08 | 125,716 | 64,533 | 51% | - |
| 2008-09 | 132,300 | 66,996 | 51% | - |
| 2009-10 | 145,249 | 54,011 | 37% | 53% |
| 2010-11 | 155,544 | 71,372 | 46% | - |

^{*}MIV= Influenza A(H1N1)pdm2009 monovalent inactivated vaccine

SCRI analysis of TIV by flu season using non-chartconfirmed data

| | TIV alone | TIV with other vaccines |
|------------|------------------|-------------------------|
| Flu Season | IRR (95% CI) | IRR (95% CI) |
| 2006-07 | 0.21 (0.03-1.55) | 4.90 (2.18-11.03) |
| 2007-08 | 0.22 (0.03-1.65) | 0.95 (0.27-3.42) |
| 2008-09 | 0.88 (0.25-3.10) | 4.14 (1.85-9.23) |
| 2009-10 | 0.35 (0.08-1.50) | 1.93 (0.92-4.02) |
| 2010-11 | 2.19 (0.72-6.69) | 3.83 (2.12-6.93) |

RESULTS: CHART-CONFIRMED DATA

Case-finding

Vaccination visits (ages 6-23 months, 2006-07 through 2010-11 flu seasons)

1,915,108



Medical visits with convulsion ICD-9 code during the post-vaccination intervals

Total: 596

Risk (days 0-1): 183 Comparison (days 14-20): 413



Charts Requested (random sample)

468



Charts Available

428

Febrile Seizure Chart Confirmation

| Exclusion reason | Number excluded | Running Total (n=428) |
|-------------------------------|-----------------|--------------------------|
| Case definition related | | |
| Not a new seizure event | 18 | 410 |
| "Possible seizure" | 14 | 396 |
| Non-febrile seizure | 21 | 375 |
| Fever status not documented | 27 | 348 |
| Exposure related | | |
| Vaccinated after seizure | 2 | 346 |
| Seizure not in SCRI intervals | 11 | 335 |
| Overlapping risk windows | 2 | 333 |

Chart-confirmed febrile seizures, n=333

Patient Characteristics

| | Risk (n=103) % | Comparison (n=230) % | P |
|--------------------|----------------------|----------------------------|-----|
| Age group (months) | | | .06 |
| 6-11 | 25 | 17 | |
| 12-23 | 75 | 83 | |
| Sex | | | .21 |
| Male | 51 | 58 | |
| Race | | | NS |
| AI/AN | 4 | 2 | |
| Asian | 15 | 17 | |
| Black | 17 | 11 | |
| White | 39 | 37 | |
| Other | 32 | 29 | |
| Unknown | 10 | 17 | |
| Ethnicity | | | .60 |
| Hispanic | 34 | 36 | |

Patient Medical History

| | Risk (n=103) % | Comparison (n=230) % | P |
|--|----------------------|----------------------------|---------|
| First seizure ever | 52 | 49 | .80 |
| Family history | 18 | 14 | .40 |
| Hx of premature birth | 11 | 8 | .40 |
| Hx of NICU admission | 11 | 7 | .34 |
| Hx of developmental delay | 15 | 13 | .88 |
| Antipyretic previous 7 days | 52 | 38 | .01 |
| Antibiotic previous 7 days | 8 | 6 | .57 |
| Potential non-vaccine cause of fever present | 37 | 77 | < .0001 |
| Admitted for the seizure | 13 | 10 | .88 |

Patient Vaccine Exposures

| rationic taconic Exposures | | | | | | |
|----------------------------|-----------|-----------------|--------------------------------|--|--|--|
| Vaccine | Risk % | Comparison % | SCRI bivariate IRR (95% CI) | | | |
| PCV7 | 51 | 30 | 2.7 (1.9 - 3.8) | | | |
| Hib | 46 | 25 | 2.9 (1.9 - 4.2) | | | |
| TIV | 43 | 37 | 1.8 (1.3 - 2.6) | | | |
| HepA | 43 | 45 | 1.5 (1.0 - 2.1) | | | |
| DTaP | 39 | 27 | 2.2 (1.5 - 3.3) | | | |
| MMR | 24 | 22 | 1.8 (1.1 - 2.8) | | | |
| Var | 24 | 22 | 1.7 (1.1 - 2.8) | | | |
| DTaP-IPV-HepB | 21 | 8 | 4.1 (2.2 - 7.5) | | | |
| PCV13 | 17 | 10 | 2.6 (1.4 - 4.8) | | | |
| RV5 | 13 | 5 | 3.8 (1.7 - 8.3) | | | |
| MMRV | 12 | 8 | 2.2 (1.1 - 4.6) | | | |
| DTaP-IPV-Hib | 5 | 5 | 1.5 (0.5 - 4.1) | | | |
| HepB | 4 | 3 | 2.0 (0.6 - 6.8) | | | |
| MIV | 3 | 8 | 0.6 (0.2 - 1.9) | | | |
| IPV | 1 | 0.5 | 3.5 (0.2 - 55) | | | |
| PPV23 | 1 | 0 | Undefined | | | |

Vaccine Exposure Combinations

- Among the 333 cases, there were 129 unique vaccine combinations received.
- Among these combinations, only 21 were received by ≥ four patients.

Regression Modeling

- First examined two time periods separately:
 - 2006-07 through 2009-10 flu seasons
 - 2010-11 flu season
- Then all study time pooled together
- Multivariate model building
 - To identify vaccines associated with an increased risk of febrile seizure while accounting for confounding and effect modification between vaccines
 - Start with all vaccines in the model
 - Manual backward elimination process
 - With TIV as the main effect of interest

Regression Modeling continued

- Vaccines retained in the final multivariate model:
 - TIV, PCV, DTaP-containing
- Then also examined separate models for each strata defined by the mutually exclusive combinations of these three vaccines

2006-07 – 2009-10 Flu Seasons SCRI Models for Strata defined by Combinations of Three Vaccines: TIV, PCV, DTaP-containing

| Stratum | Vaccine(s) Received | | Received | n | IRR (95% CI) |
|---------|---------------------|-----|---------------------|----|-----------------|
| 1 | TIV | - | - | 52 | 0.4 (0.1 – 0.9) |
| 2 | - | PCV | - | 36 | 2.0 (1.0 – 3.9) |
| 3 | - | - | DTaP- containing | 32 | 1.4 (0.6 – 3.0) |
| 4 | - | PCV | DTaP- containing | 55 | 2.2 (1.3 – 3.7) |
| 5 | TIV | - | DTaP- containing | 16 | 3.5 (1.3 – 9.3) |
| 6 | TIV | PCV | - | 6 | 3.5 (0.7 – 17) |
| 7 | TIV | PCV | DTaP- containing | 23 | 6.6 (2.8 – 15) |

2010-2011 Flu Season SCRI Models for Strata defined by Combinations of Three Vaccines: TIV, PCV, DTaP-containing

| Stratum | Vaccine(s) Received | | Received | n | IRR (95% CI) |
|---------|---------------------|-----|---------------------|----|-----------------|
| 1 | TIV | - | - | 8 | 1.2 (0.2 – 5.8) |
| 2 | - | PCV | - | 7 | 1.4 (0.3 – 7.2) |
| 3 | - | - | DTaP- containing | 6 | 0.7 (0.1 – 6.0) |
| 4 | - | PCV | DTaP- containing | 12 | 2.5 (0.8 – 7.9) |
| 5 | TIV | - | DTaP- containing | 6 | 3.5 (0.7 - 17) |
| 6 | TIV | PCV | - | 6 | 3.5 (0.7 - 17) |
| 7 | TIV | PCV | DTaP- containing | 11 | 2.9 (0.9 – 9.6) |

All Flu Seasons SCRI Models for Strata defined by Combinations of Three Vaccines: TIV, PCV, DTaP-containing

| | | | | 2006-2009 | 2010-2011 | 2006-2011 | | |
|---------|---------------------|-----|---------------------|-----------------|-----------------|------------------|--|--|
| | | | | n=267 | n=66 | n=333 | | |
| Stratum | Vaccine(s) Received | | | IRR (95% CI) | IRR (95% CI) | IRR (95% CI) | | |
| 1 | TIV | - | - | 0.4 (0.1 - 0.9) | 1.2 (0.2 – 5.8) | 0.5 (0.2 – 1.0) | | |
| 2 | - | PCV | - | 2.0 (1.0 – 3.9) | 1.4 (0.3 – 7.2) | 1.8 (0.97 – 3.4) | | |
| 3 | - | - | DTaP- containing | 1.4 (0.6 – 3.0) | 0.7 (0.1 – 6.0) | 1 (0.5 – 2.3) | | |
| 4 | - | PCV | DTaP- containing | 2.2 (1.3 – 3.7) | 2.5 (0.8 – 7.9) | 2.3 (1.4 – 3.8) | | |
| 5 | TIV | - | DTaP- containing | 3.5 (1.3 – 9.3) | 3.5 (0.7 - 17) | 3.5 (1.5 – 8.1) | | |
| 6 | TIV | PCV | - | 3.5 (0.7 – 17) | 3.5 (0.7 - 17) | 3.5 (1.1 – 11) | | |
| 7 | TIV | PCV | DTaP- containing | 6.6 (2.8 – 15) | 2.9 (0.9 – 9.6) | 5 (2.5 – 9.9) | | |

Attributable Risk (AR) Estimates for Combinations of Three Vaccines: TIV, PCV, DTaP-containing

| | Vaco | cine(s) | Received | IRR (95% CI) | AR* at 6 months | AR* at 12 months | AR* at 15 months |
|---|------|---------|---------------------|------------------|-----------------|------------------|------------------|
| 1 | TIV | | | 0.5 (0.2 – 1.0) | n/a | n/a | n/a |
| | IIV | - | - | 0.3 (0.2 – 1.0) | II/a | II/a | II/ d |
| 2 | - | PCV | - | 1.8 (0.97 – 3.4) | n/a | n/a | n/a |
| 3 | - | - | DTaP- containing | 1 (0.5 – 2.3) | n/a | n/a | n/a |
| 4 | - | PCV | DTaP- containing | 2.3 (1.4 – 3.8) | 3 | 8 | 12 |
| 5 | TIV | - | DTaP- containing | 3.5 (1.5 – 8.1) | 6 | 15 | 24 |
| 6 | TIV | PCV | - | 3.5 (1.1 – 11) | 6 | 15 | 24 |
| 7 | TIV | PCV | DTaP- containing | 5 (2.5 – 9.9) | 10 | 24 | 38 |

^{*} per 100,000 persons vaccinated; compared to the background rate.

⁻ n/a: AR not calculated when IRR is not statistically significant.

Conclusions

- The concomitant administration of TIV + PCV and TIV + DTaPcontaining vaccines had higher risks of febrile seizure than when the vaccines were given independently.
- The concomitant administration of TIV + PCV + DTaPcontaining vaccines had the highest risk.
- These increased risks with concomitant vaccination were observed in all influenza seasons studied, not just during the 2010-11 season.

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