

Myocarditis and Pericarditis Reports after mRNA COVID-19 Vaccines:

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As the Chapter Immunization Representative, I wanted to bring your attention to an important news update from [AAP News](#) regarding ongoing investigations of myocarditis or pericarditis in those 30 years of age and younger who have received an mRNA vaccine for COVID-19. To date, federal officials have confirmed 226 cases of myocarditis or pericarditis in those 30 years and younger after mRNA COVID-19 vaccination and are actively investigating approximately 250 additional reports. An emergency meeting is being held by the Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practices (ACIP) on June 18 to discuss these cases.

The [update](#) notes that in the 475 people ages 30 and younger reporting myocarditis or pericarditis to the [Vaccine Adverse Event Reporting System](#) (VAERS), the most commonly reported symptoms included chest pain, dyspnea, elevated cardiac enzymes, ST or T wave changes on EKG, and abnormal echocardiography/imaging. For the 285 cases with known outcomes, approximately 81% have made a full recovery with the remainder having ongoing symptomatology or unknown symptom status. The update states that fifteen are still hospitalized with three in intensive care.

The [CDC provides guidance](#) for clinicians on clinical considerations, signs/symptoms to be aware of, evaluation considerations, and follow-up considerations for adolescents or young adults who may be presenting with symptoms concerning for myocarditis or pericarditis after mRNA COVID-19 vaccination. This guidance is also detailed in the [California Department of Public Health's Health Advisory from May 28, 2021](#). All cases of myocarditis or pericarditis following receipt of a COVID-19 vaccination should be promptly reported to the [Vaccine Adverse Event Reporting System](#) (VAERS). Healthcare providers are also encouraged to report other clinically significant adverse events to VAERS following COVID-19 vaccination, even if they are unsure that the event was caused by the vaccination.

Of note, while anyone can report to VAERS, healthcare providers are [required](#) to report specified serious adverse events after COVID-19 vaccination under Emergency Use Authorization (EUA) to VAERS. The current list of specified serious adverse events that require a healthcare provider report to VAERS can be found [here](#), and the list may be subject to change if later revised by CDC/FDA. [VAERS guidance](#) also notes that healthcare providers should “also report any additional select AEs [adverse events] and/or any revised safety reporting requirements per FDA’s conditions of authorized use of vaccine(s) throughout the duration of any COVID-19 Vaccine being authorized under an Emergency Use Authorization (EUA).”

Guidance on VAERS-reportable events following other routinely recommended childhood immunizations is provided [here](#) for those interested. A [factsheet on the Vaccine Adverse Event Reporting System](#) (VAERS) for patients and providers is available online from the CDC.

[CDC continues to recommend COVID-19 vaccination](#) for all those 12 years of age and older “given the greater risk of other serious complications related to COVID-19, such as hospitalization, multisystem inflammatory syndrome in children (MIS-C), or death.” An updated [COVID-19 vaccine information sheet](#) from the Los Angeles County Department of Public Health with information for patients receiving the Pfizer or Moderna vaccine includes information on reports of post-vaccination myocarditis and pericarditis, as well as advice on when to seek medical attention, and is available online. CDC also provides a site for the general public on [What You Need to Know](#) about recent reports of myocarditis and pericarditis after COVID-19 vaccination.