COVID-19 Vaccine Janssen: Risk for immune thrombocytopenia (ITP) and venous thromboembolism (VTE)

Dear Healthcare Professional,

Janssen-Cilag International NV in agreement with the European Medicines Agency and <the National Competent Authority> would like to inform you of the following:

Summary

Immune thrombocytopenia (ITP):

- **Cases of ITP, some with very low platelet levels (<20,000 per µL), have been reported very rarely, usually within the first four weeks after receiving COVID-19 Vaccine Janssen. This included cases with bleeding and cases with a fatal outcome. Some of these occurred in individuals with a history of ITP.**
- **If an individual has a history of ITP, the risks of developing low platelet levels should be considered before vaccination, and platelet monitoring is recommended after vaccination.**
- **Individuals should be alert to signs and symptoms of ITP, such as spontaneous bleeding, bruising or petechiae.**
- **Individuals diagnosed with thrombocytopenia within 3 weeks after vaccination with COVID-19 Vaccine Janssen should be actively investigated for signs of thrombosis to assess a potential diagnosis of thrombosis with thrombocytopenia syndrome (TTS) that requires specialised clinical management.**

Venous thromboembolism (VTE):

- **Venous thromboembolism has been observed rarely following vaccination with COVID-19 Vaccine Janssen.**
- **The risk of VTE should be considered for individuals with increased risk for thromboembolism.**
- **Healthcare professionals should be alert to the signs and symptoms of VTE. Those vaccinated should be instructed to seek immediate medical attention if they develop symptoms such as shortness of breath, chest pain, leg pain, leg swelling, or persistent abdominal pain following vaccination.**
- **Individuals who present with thrombosis within 3 weeks of vaccination should be evaluated for thrombocytopenia to assess a potential diagnosis of thrombosis with thrombocytopenia syndrome (TTS) that requires specialised clinical management.**

The benefits of vaccination continue to outweigh the risks.

Background on the safety concern

COVID-19 Vaccine Janssen suspension for injection is indicated for active immunisation to prevent COVID-19 caused by SARS-CoV-2, in individuals 18 years of age and older

Immune thrombocytopenia (ITP)

Although there was no imbalance of thrombocytopenia in clinical trials, review of post-marketing cases support ITP being an adverse drug reaction following vaccination with the COVID-19 Vaccine Janssen.

Analysis of key cases and literature suggests individuals with a medical history of ITP might be at an increased risk of decreased platelets and symptomatic ITP following vaccination with the Covid-19 vaccine Janssen. If an individual has a history of ITP, the risks of developing low platelet levels should be considered before vaccination, and platelet monitoring is recommended after vaccination.

Healthcare professionals should be alert to the signs and symptoms of thrombocytopenia. Those vaccinated should be instructed to seek prompt medical attention if they experience spontaneous bleeding, skin bruising (petechia) beyond the site of vaccination after a few days.

Individuals diagnosed with thrombocytopenia within 3 weeks after vaccination with COVID-19 Vaccine Janssen should be actively investigated for signs of thrombosis to assess a potential diagnosis of thrombosis with thrombocytopenia syndrome (TTS) that requires specialised clinical management.

Venous thromboembolism (VTE)

Venous thromboembolism has been observed rarely following vaccination with COVID-19 Vaccine Janssen. This should be considered for individuals at increased risk for venous thromboembolism.

During the double-blind period (median follow-up 123 days) of an ongoing phase 3 study (COV3001), venous thromboembolic events were observed in 26/21,894 (0.1%) of individuals who received COVID-19 Vaccine Janssen and 9/21,882 (0.04%) of individuals who received placebo. Of these, venous thromboembolic events were observed within 28 days in 8 individuals who received COVID-19 Vaccine Janssen and in 4 individuals who received placebo. Deep vein thrombosis and pulmonary embolism were mostly observed (21 individuals who received COVID-19 Vaccine Janssen and 8 individuals who received placebo during the entire double-blind phase). The majority of events were reported in individuals with at least one predisposing risk factor for venous thromboembolism.

In another ongoing phase 3 study (COV3009, 15,708 individuals receiving the vaccine and 15,592 placebo), there was no increase in venous thromboembolic events among individuals who received the COVID-19 Vaccine Janssen (median follow-up time 70 days).

Healthcare professionals should be alert to the signs and symptoms of VTE. Those vaccinated should be instructed to seek immediate medical attention if they develop symptoms such as shortness of breath, chest pain, leg pain, leg swelling, or persistent abdominal pain following vaccination. Individuals who present with thrombosis within 3 weeks of vaccination should be evaluated for thrombocytopenia to assess a potential diagnosis of thrombosis with thrombocytopenia syndrome (TTS) that requires specialized clinical management.

Call for reporting

Healthcare professionals should report any suspected adverse reactions associated with the use of COVID-19 Vaccine Janssen in accordance with the national spontaneous reporting system <include the details (e.g., name, postal address, fax number, website address) on how to access the national spontaneous reporting system>.

This product is subject to additional monitoring. This will allow quick identification of new safety information. Healthcare professionals are asked to report any suspected adverse reactions.

Company contact point

<Contact point details for access to further information, including relevant website address(es), telephone numbers and a postal address (company contact point in the concerned EU MS should be included, respectively)>

Yours Faithfully

Medical Director of Janssen-Cilag International B.V.

Communication Plan for Direct Healthcare Professional Communication

DHPC COMMUNICATION PLAN	
Medicinal product(s)/active substance(s)	COVID-19 Vaccine Janssen suspension for injection (Ad26.COV2-S [recombinant])
Marketing authorisation holder(s)	Janssen-Cilag International N.V.
Safety concern and purpose of the communication	Information regarding the risk of ITP and VTE following vaccination with COVID-19 vaccine Janssen
DHPC recipients	General practitioners, specialists in internal medicine, haematology, emergency medicine, neurology, intensive care and vaccination centers. The target group should be further defined at national level, in agreement with the respective national competent authority.
Member States where the DHPC will be distributed	All EU member states where COVID-19 Vaccine Janssen is authorised.

Timetable	Date
DHPC and communication plan (in English) agreed by PRAC	Thursday Sep 30 2021
DHPC and communication plan (in English) agreed by CHMP/CMDh	Friday Oct 01 2021
Submission of translated DHPCs to the national competent authorities for review	Wednesday Oct 06 2021
Agreement of translations by national competent authorities	Friday Oct 08 2021
Dissemination of DHPC	Wednesday Oct 13 2021