

Characterization of COVID-19 Vaccine Data in the Sentinel System

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Bahareh Rasouli¹; Sally Peprah²; Terrence Lee³; Jamal T. Jones³; Jennifer W. Thompson¹; Gifty Brisbane¹; Jillian Burk¹; John G. Connolly¹; Noelle Cocoros¹; José J. Hernández-Muñoz³

¹ Department of Population Medicine, Harvard Pilgrim Health Care Institute, Boston, MA ²Division of Epidemiology I, Office of Pharmacovigilance and Epidemiology, Office and Epidemiology, Center for Drug Evaluation and Research, US Food and Drug Administration, Silver Spring, MD

³Office of Surveillance and Epidemiology, Center for Drug Evaluation and Research, US Food and Drug Administration, Silver Spring, MD

BACKGROUND

- COVID-19 vaccinations have been delivered in a range of settings, from healthcare visits to state-sponsored vaccination fairs.
- It is important to understand how and to what degree COVID-19 vaccination status is captured in real world data sources such as administrative claims data.

OBJECTIVES

To characterize the COVID-19 vaccine data in the FDA's Sentinel Distributed Database (SDD).

METHODS



- Included Data Partners in the FDA's Sentinel Distributed Database (SDD): 12 commercial health plans, Medicaid, and Medicare
- Identified members with immunization procedure codes from traditional insurance claims and data from state-based Immunization Information Systems (IIS) if available; 5 of 14 Data Partners had IIS data
- Study period: November 1, 2020- January 31, 2024
- Index date was the date of first COVID-19 vaccine
- Identified all available brands and unspecified COVID-19 vaccines
- Inclusion: ≥ 183 days continuous medical and drug coverage before index date (45 days gap was allowed)
- Stratified by year-month*age group



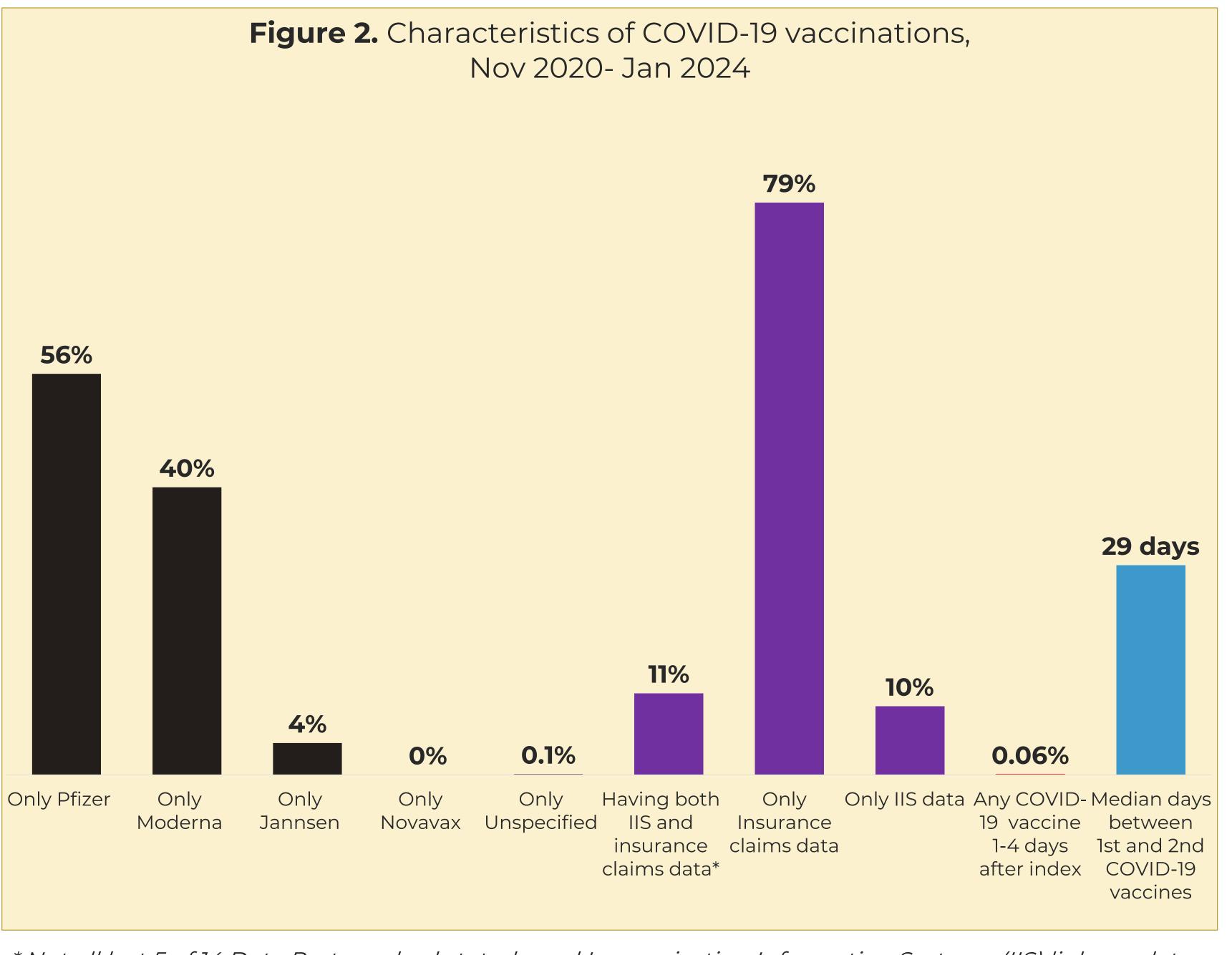
- Demographic characteristics were assessed at index, clinical characteristics at index or 183 days prior, and COVID-19 identified by diagnosis codes at index or 183 days before and after index
- Identified potential duplicate/erroneous codes within 1-4 days of index
 - Calculated time interval between 1st and 2nd doses when applicable

Figure 1. Design diagram Start date: November 1, 2020 Latest available data: January 31, 2024 First observed COVID-19 Second vaccine record observed Day 0 COVID-19 vaccine record Any Covid-19 **Continuous enrollment requirement:** vaccine code 1-4 [-183, -1] days after index 45 days gap is allowed considered a duplicate **Exclusion**: Any Covid-19 vaccine [start of enrolment, -1] Interval between 1st and 2nd COVID-19 vaccine in days II: (-183, 0) III: (1, 183) **Covariates time window assessment:** I: Age, year, race, sex, ethnicity, COVID-19 vaccine brand/type of code II: High-risk comorbidities for severe COVID-19, and COVID-19 diagnosis/treatment

III: COVID-19 diagnosis/Treatment

RESULTS

- Identified records for >38 million recipients (Table 1), with Pfizer (56%) and Moderna (40%) being the most common (Figure 2).
- Most vaccinations (79%) were identified through claim insurance data (Figure 2).
- About 27% of vaccinees had hypertension, 19% had obesity/overweight, and 13% had diabetes at the index date or 183 days prior (Table 1).
- Most adults (88%) received their first COVID-19 vaccination in 2021, while 10% were vaccinated in 2022 (Figure 3).

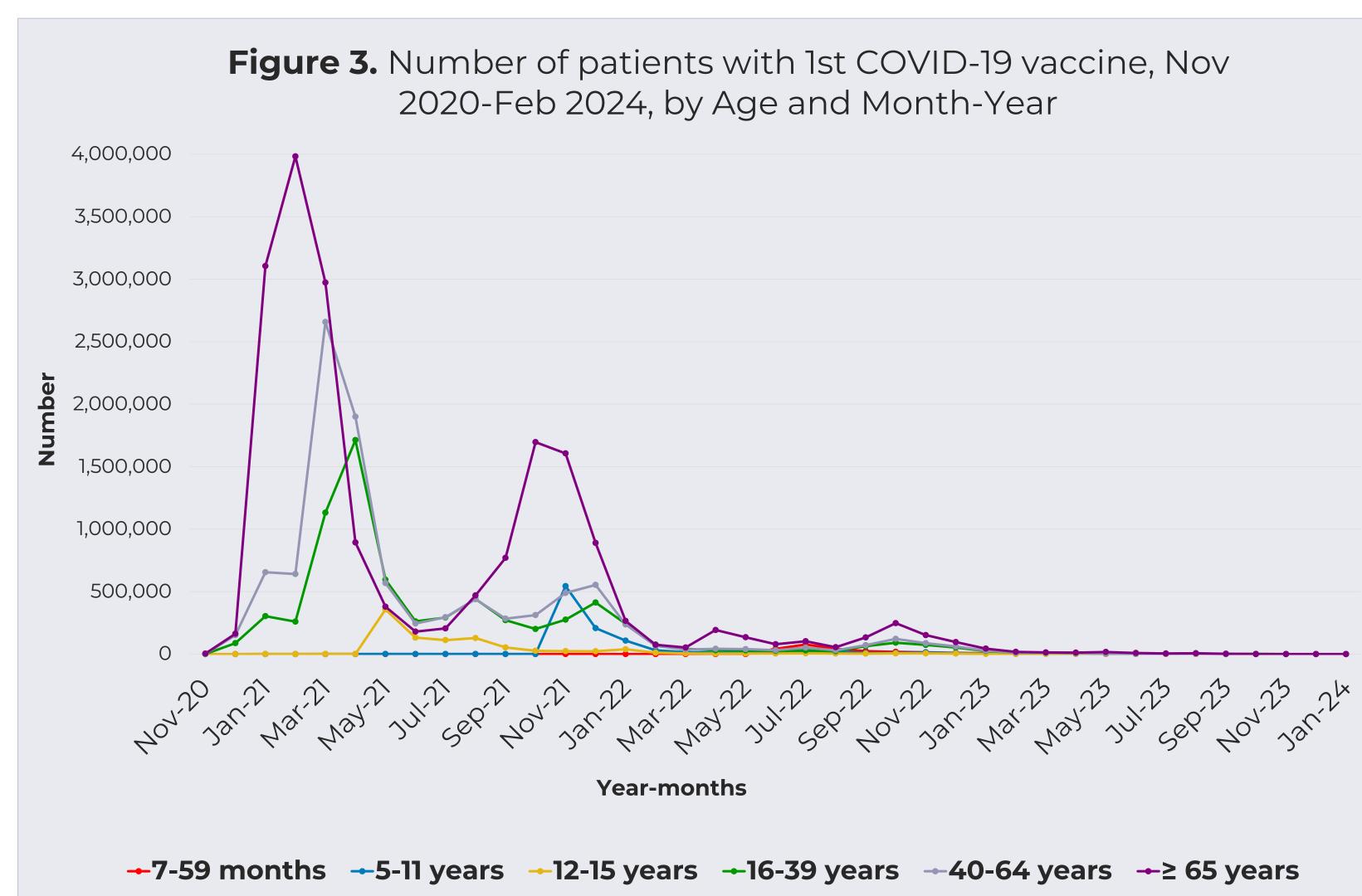


* Not all but 5 of 14 Data Partners had state-based Immunization Information Systems (IIS) linkage data

Table 1. Characteristics of patients with ≥1 COVID-19 vaccination, Nov 2020-Jan 2024* Number of patients 38.575.376

Number of patients	30,373,376
Age in years - mean (SD)	57 (16)
Female (%)	55
Known race (%)	71
White among known race	83
Known ethnicity (%)	64
Hispanic origin among known ethnicity	4
Year (%)	
2020	<7
2021	88
2022	10
2023	1
2024	<7
Hypertension (%)	27
Obesity/overweight (%)	19
Diabetes types 1 or 2	13
COVID-19 diagnosis at index or 183 days prior (%)	5
COVID-19 diagnosis in 183 days post index (%)	3

* Most covariates are assessed at the index date or 183 days prior to it, unless stated otherwise



CONCLUSIONS

- Data on >38 million people with COVID-19 vaccination are available for analysis in Sentinel through January 2024.
- Data quality:
 - Low proportion (<1%) with duplicate codes
 - Median time from 1st to 2nd doses (29 days) aligns with recommendations
- Most adults (88%) received their first COVID-19 vaccine in 2021; however, vaccine uptake varied across age groups and by month and year.
- The Sentinel Data Partners continue to link to state-based IIS, and IIS data availability expected to increase with more linkages by commercial health plans.

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- B. Rasouli, G. Brisbane, J. Burk, JG. Connolly and N. Cocoros are employees at Harvard Pilgrim Health Care Institute, which conducts work for government and private organizations, including pharmaceutical companies.