

Pfizer, Moderna COVID-19 vaccines linked to rare cases of heart inflammation

Angelo Perera**27 June 2021**

The Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practices (ACIP) concluded on Wednesday that there is a "likely association" between mRNA COVID-19 vaccines (i.e., Pfizer-BioNTech and Moderna) and cases of inflammation of the heart called myocarditis and pericarditis. In addition, it appears to have a higher propensity in younger people, with a predominance in males and occurs more frequently several days after the second booster dose.

Myocarditis results in inflammation of the heart muscle, while pericarditis causes inflammation of the heart's membrane. Symptoms associated with the diagnosis include chest pain, shortness of breath and the feeling of a rapid heart rate or pounding in the chest. In most cases, it can be treated with a course of nonsteroidal anti-inflammatories. (Some have required steroids.) A significant majority of patients have made a seemingly full recovery.

"Clinical presentation of myocarditis cases following vaccination has been distinct, occurring most often within one week after dose two, with chest pain as the most common presentation," said Dr. Grace Lee, chair of ACIP.

According to Tom Shimabukuro, MD, MPH, MBA, the deputy director of the Immunization Safety Office at the CDC, the agency has received reports of 1,226 cases of myocarditis, of which 827 (or 67.5 percent) occurred after the second dose of the mRNA vaccines. This translates to approximately 12.6 cases per 1 million doses administered (about one in 80,000). Among the 1,226 patients, 484 were younger than 29, and two-thirds were men.

A COVID-19 infection carries a higher risk of causing heart inflammation as compared to the COVID-19 mRNA vaccines. A small study conducted

last year at Ohio State University that examined COVID-19 cases among 26 college athletes, using cardiac magnetic resonance imaging, found four athletes had possible myocarditis, and eight had evidence of scar tissue, which may have been a byproduct either of the infection or normal athletic adaptation.

Approximately 1 in 3,000 people under the age of 21 infected will develop multisystem inflammatory syndrome (MIS-C), a debilitating, potentially fatal neurological condition that could cause permanent impairment to vital functions. Meanwhile, only 1 in 100,000 vaccinated children seem to develop a mild form of myocarditis. Thus, the benefits of the vaccines appear to vastly outweigh the risks that accompany the shots.

Immediately following the CDC ACIP meeting, the US Department of Health and Human Services issued a statement explaining the risks: "The facts are clear: this is an extremely rare side effect, and only an exceedingly small number of people will experience it after vaccination. Importantly, for the young people who do, most cases are mild, and individuals often recover on their own or with minimal treatment. In addition, we know that myocarditis and pericarditis are much more common *if you get COVID-19*, and the risks to the heart from COVID-19 infection can be more severe."

The US Food and Drug Administration (FDA) will add a warning to the fact sheets for these vaccines, while medical experts will investigate why these adverse events are occurring. Dr. Doran Fink, MD, PhD, deputy director of the FDA's Division of Vaccines and Related Products Application, told the CDC expert panel that they were finalizing the wording of the warning statement. He told the panel, "Based on

limited follow-up, most cases appear to have been associated with resolution of symptoms, but limited information is available about potential long-term sequelae.”

With the demand to fully open schools in the fall for in-class instruction, federal, state, and local officials are pushing the FDA to authorize the vaccines for children under 12. However, scientists have urged caution because there is limited data on vaccine safety for younger age groups, requiring more rigorous study. The urgency is compounded by the more transmissible Delta variant spreading rapidly among children. There are roughly 48 million children under the age of 12 in the US.

CDC Director Dr. Rochelle Walensky has said that she expects the Delta variant will soon become the dominant strain in the US. As cases of COVID-19 infections are beginning to rise in the Midwest, where vaccination rates are lower than in the Northeast and West Coast, President Joe Biden has urged younger people to get vaccinated. This comes on the heels of a sharp slowing of the vaccination campaign that has seen a 38 percent week-to-week decline in the number of doses administered. Only 45.6 percent of the entire US population has been fully inoculated.

Based on an ACIP report dated June 11, 2021, when cases were broken down by age categories, among 16 to 17 year olds who had received 2.3 million doses, there were 79 cases of myocarditis or pericarditis reported through the federal government’s Vaccine Adverse Event Reporting System (VAERS). This is far higher than the expected 2 to 19 cases, or about four times normal. For 18 to 24 year olds, who had received 9.8 million doses, there were 196 cases of myocarditis and pericarditis reported, compared to an expected 8 to 83 cases, or about twice the normal rate.

Young males reported the condition at a much higher rate than young females. However, Haitham Ahmed of Harvard Chan School of Public Health, now the chair of cardiology at AdvantageCare Physicians, New York, cautioned against misinterpreting the data since “high odds of a low number can still be a very low number.”

Placing the present discussion into context, if 1 million boys aged 12 to 17 received a second dose of the mRNA COVID-19 vaccines, 70 cases of myocarditis might develop. However, by vaccinating these million boys, 5,700 infections would be

prevented, including 215 hospitalizations and 2 deaths.

However, the pandemic cannot be controlled by vaccinations alone. As scientists have stressed, the pandemic must be eradicated by strict mitigation measures while expanding vaccinations to everyone across the globe. No one country can exit the pandemic without the rest of the world. This only highlights the deep contradictions of the ruling class policy of vaccine nationalism.



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