

Coronavirus Disease 2019 Vaccine Tracker (Lexi-Drugs)

Candidate SARS-CoV-2 Vaccines in Advanced Clinical Trials: Key Aspects										
Compiled by John D. Grabenstein, MPH, PhD All dates are estimates. All Days are based on first vaccination at Day 0.										
Vaccine Sponsor (with Major Partners)	Univ. of Oxford (Jenner Institute) with AstraZeneca	ModernaTX USA	BioNTech with Pfizer	Johnson & Johnson (Janssen Vaccines)	Novavax	Sanofi Pasteur with GlaxoSmithKline	CureVac	Cansino Biologics with Academy of Military Medical Sciences	Sinopharm (China National Biotech Group) (Beijing IBP, Wuhan IBP)	Sinovac Biotech Co.
Headquarters	Oxford, England; Cambridge, England; Gothenburg, Sweden	Cambridge, Massachusetts	Mainz, Germany; New York, New York	New Brunswick, New Jersey (Leiden, Netherlands)	New Brunswick, New Jersey	Lyon, France; Brentford, England	Tubingen, Germany	Tianjin, China; Beijing, China	Beijing, China; Wuhan, China	Beijing, China
Product Designator	ChAdOx1 or AZD1222	mRNA-1273	BNT162b2	AD26.COV2-S, JNJ-78436735	NVX-Cov2373	TBA	CVnCoV	Ad5-nCoV	BBIBP-CorV	CoronaVac
Vaccine Type	Adenovirus 63 vector	mRNA	mRNA	Adenovirus 26 vector	Subunit protein	Subunit protein	mRNA	Adenovirus 5 vector	Inactivated whole virus	Inactivated whole virus
Product Features	Chimpanzee adenovirus type 63 vector	Within lipid nanoparticle dispersion	Within lipid nanoparticle dispersion	Human adenovirus type 26 vector	Adjuvanted with Matrix-M	Adjuvanted with AS03 or AFO3	Adjuvanted with AS03	Human adenovirus type 5 vector	Adjuvanted with aluminum hydroxide	Adjuvanted with aluminum hydroxide
Production Medium (origin)	HEK-293A (human embryo)	Cell free (synthetic)	Cell free (synthetic)	PER.C6 (human embryo)	Baculovirus/SF9 (insect)	Baculovirus/SF9 (insect)	Cell free (synthetic)	HEK-293 (human embryo)	Vero cells (monkey)	Vero cells (monkey)
Route	IM	IM	IM	IM	IM	IM	IM	IM	IM	IM
Dosing Regimen	Single dose or Days 0 + 28 to 42	Days 0 + 28	Days 0 + 21	Single dose or Days 0 + 56	Days 0 + 21	Days 0 + 21	Days 0 + 28	Single dose or Days 0 + 56	Days 0 + 14 or Days 0 + 21	Days 0 + 14 or Days 0 + 28
Expected Dose	5x10 ¹⁰ viral particles	100 mcg	30 mcg	5x10 ¹⁰ viral particles	5 mcg protein plus 50 mcg Matrix-M adjuvant	5 or 15 mcg, TBD	6 or 8 mcg, TBD	5x10 ¹⁰ or 1x10 ¹¹ viral particles	5 mcg	3 mcg
Expected Packaging	TBA	Frozen liquid, 10-dose vial, preservative-free	Frozen liquid, 5-dose vial, preservative-free	TBA	Liquid	TBA	TBA	TBA	TBA	TBA
Expected Storage & Handling Conditions	Refrigerate @ 2°C to 8°C	Ship @ -20°C. Refrigerate @ 2°C to 8°C. NMT 7 d. Room temp NMT 12 h after thaw.	Ship and store on dry ice. Refrigerate @ 2°C to 8°C. NMT 5 days. After diluting, use within 6 hours	Refrigerate @ 2°C to 8°C	Refrigerate @ 2°C to 8°C	Refrigerate @ 2°C to 8°C. Before injection, mix antigen with adjuvant	TBA	Refrigerate @ 2°C to 8°C	Refrigerate @ 2°C to 8°C	Refrigerate @ 2°C to 8°C
Clinical Trial Status	Phase 2/3	Phase 3	Phase 3	Phase 3	Phase 3	Phase 1	Phase 1	Phase 3	Phase 3	Phase 3
Date Data Sufficient for EUA	2020 Sep?	2020 Nov?	2020 Nov?	2020 Nov?	2021 Jan?	2021 Jan?	2021 Jan?	2020 Jun - China military uses	2020 Jul - China workers and families	2020 Jul - China workers and families
Goal Date to File for License	2020 Oct?	2020 Nov?	2020 Dec?	2021 Jan?	2021 Apr?	2021 Jun?	2021 Jun?	2020 Nov-Dec?	2020 Nov-Dec?	2020 Nov-Dec?
US Gov't Contracts, 2020-21 (doses)	300 million	100 million	100 million	100 million	100 million	100 million	none	none	none	none
ClinicalTrials.gov Numbers	NCT04324606, NCT04400838, NCT04444674, NCT04515746, NCT04536051, NCT04536051, NCT04540393	NCT04283461, NCT04405076, NCT04470427	NCT04368728, NCT04380701, NCT04523571, NCT04537949	NCT0436276, NCT04505722, NCT04509947	NCT04368988, NCT04533399	NCT04517208	NCT04449276, NCT04515147	NCT0431127, NCT04341389, NCT04398147, NCT04526990, NCT04540425, NCT04552366	NCT04510207	NCT04352608, NCT04383574, NCT04565695, NCT04508075, NCT04551547
Ages Studied to Date (y)	18 to 55, 5 to 12	≥18	18 to 55, 65 to 85	18 to 59, ≥60	18 to 59	≥18	≥18	≥18	18 to 59	≥18
Evidence in Non-Human Primates	Graham 2020; van Doremalen 2020	Corbett 2020	Sahn 2020; Vogel 2020	Mercado 2020; Yu 2020	Guebre-Kabier 2020; Tian 2020				Wang 2020	Gao 2020
Evidence in Humans	Folegatt 2020	Jackson 2020; Miller 2020	Mulligan 2020; Walsh 2020	Sadoff 2020	Keech 2020			Zhu 2020a, Zhu 2020b	Xia 2020	Zhang 2020
Analogous Licensed Vaccines	No other adenovirus type-63 based vaccine	No other licensed mRNA vaccine	No other licensed mRNA vaccine	Adenovirus type-26 EU-registered Ebola vaccine component Zaldreno (Janssen, JNJ)	Influenza hemagglutinin vaccine (FluBlok, Sanofi), with NVX-Cov2373 adding an adjuvant	Influenza hemagglutinin vaccine (FluBlok, Sanofi), with this candidate adding an adjuvant	No other licensed mRNA vaccine	No other adenovirus type-5 based vaccine	Inactivated hepatitis A, poliovirus, rabies vaccines	Inactivated hepatitis A, poliovirus, rabies vaccines

Abbreviations & Acronyms: EUA (Emergency Use Authorization); IBP (Institute of Biological Products); mRNA (messenger ribonucleic acid); NMT (not more than); SF9 (Spodoptera frugiperda); TBA (to be announced); TBD (to be determined)
Last updated: 9/28/2020

CLINICAL TRIALS:

<https://clinicaltrials.gov/ct2/show/NCT04324606>

<https://clinicaltrials.gov/ct2/show/NCT04400838>

<https://clinicaltrials.gov/ct2/show/NCT04444674>

<https://clinicaltrials.gov/ct2/show/NCT04516746>

<https://clinicaltrials.gov/ct2/show/NCT04283461>

<https://clinicaltrials.gov/ct2/show/NCT04405076>

<https://clinicaltrials.gov/ct2/show/NCT04470427>

<https://clinicaltrials.gov/ct2/show/NCT04368728>

<https://clinicaltrials.gov/ct2/show/NCT04380701>

<https://clinicaltrials.gov/ct2/show/NCT04523571>

<https://clinicaltrials.gov/ct2/show/NCT04436276>

<https://clinicaltrials.gov/ct2/show/NCT04505722>

<https://clinicaltrials.gov/ct2/show/NCT04509947>

<https://clinicaltrials.gov/ct2/show/NCT04368988>

<https://clinicaltrials.gov/ct2/show/NCT04449276>

<https://clinicaltrials.gov/ct2/show/NCT04515147>

REFERENCES:

Corbett KS, Flynn B, Foulds KE, et al. Evaluation of the mRNA-1273 vaccine against SARS-CoV-2 in nonhuman primates [published online July 28, 2020]. *N Engl J Med*. doi:10.1056/NEJMoa2024671. Available at <https://www.nejm.org/doi/full/10.1056/NEJMoa2024671>[PubMed 32722908]

Folegatti PM, Ewer KJ, Aley PK, et al. Safety and immunogenicity of the ChAdOx1 nCoV-19 vaccine against SARS-CoV-2: a preliminary report of a phase 1/2, single-blind, randomised controlled trial. *Lancet*. 2020;396(10249):467-478. doi:10.1016/S0140-6736(20)31604-4. Available at [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)31604-4/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)31604-4/fulltext)[PubMed 32702298]

Gao Q, Bao L, Mao H, et al. Development of an inactivated vaccine candidate for SARS-CoV-2. *Science*. 2020;369(6499):77-81. doi:10.1126/science.abc1932. Available at <https://science.sciencemag.org/content/369/6499/77.full>[PubMed 32376603]

Graham SP, McLean RK, Spencer AJ, et al. Evaluation of the immunogenicity of prime-boost vaccination with the replication-deficient viral vectored COVID-19 vaccine candidate ChAdOx1 nCoV-19. *NPJ Vaccines*. 2020;5:69. doi:10.1038/s41541-020-00221-3. Available at <https://www.nature.com/articles/s41541-020-00221-3>[PubMed 32793398]

Guebre-Xabier M, Patel N, Tian J-H, et al. NVX-CoV2373 vaccine protects cynomolgus macaque upper and lower airways against SARS-CoV-2 challenge [published online August 19, 2020]. *bioRxiv*. Available at <https://www.biorxiv.org/content/10.1101/2020.06.29.178509v1.full.pdf>

Jackson LA, Anderson EJ, Roupheal NG, et al. An mRNA Vaccine against SARS-CoV-2 - Preliminary Report [published online July 14, 2020]. *N Engl J Med*. doi:10.1056/NEJMoa2022483. Available at <https://www.nejm.org/doi/pdf/10.1056/NEJMoa2022483>[PubMed 32663912]

Keech C, Albert G, Cho I, et al. Phase 1–2 trial of a SARS-CoV-2 recombinant spike protein nanoparticle vaccine. *N Engl J Med*. 2020. Available at https://www.nejm.org/doi/full/10.1056/NEJMoa2026920?query=featured_coronavirus

Mercado NB, Zahn R, Wegmann F, et al. Single-shot Ad26 vaccine protects against SARS-CoV-2 in rhesus macaques [published online July 30, 2020]. *Nature*. doi:10.1038/s41586-020-2607-z. Available at <https://www.nature.com/articles/s41586-020-2607-z>[PubMed 32731257]

Miller JM, Moderna, et al. ACIP Presentation: mRNA-1273 Clinical Development Program. By webinar, 2020 Aug 26. <https://investors.modernatx.com/static-files/34f97bb2-d89a-45e4-a770-cae0591fa807>

Mulligan MJ, Lyke KE, Kitchin N, et al. Phase 1/2 study of COVID-19 RNA vaccine BNT162b1 in adults [published online August 12, 2020]. *Nature*. doi:10.1038/s41586-020-2639-4. Available at <https://www.nature.com/articles/s41586-020-2639-4>[PubMed 32785213]

Sadoff J, Le Gars M, Shukarev G, et al. Safety and immunogenicity of the Ad26.COV2.S COVID-19 vaccine candidate: interim results 2 of a phase 1/2a, double-blind, randomized, placebo-controlled trial. medRxiv 2020 Sep 25. <https://doi.org/10.1101/2020.09.23.20199604>

Sahin U, Muik A, Derhovanessian E, et al. Concurrent human antibody and TH1 type T-cell responses elicited by a COVID-19 RNA vaccine [published online July 20, 2020]. *medRxiv*. Available at <https://www.medrxiv.org/content/10.1101/2020.07.17.20140533v1.full.pdf>

Tian J-H, Patel N, Haupt R, et al. SARS-CoV-2 spike glycoprotein vaccine candidate NVX-CoV2373 elicits immunogenicity in baboons and protection in mice [published online June 30, 2020]. *bioRxiv*. Available at <https://www.biorxiv.org/content/10.1101/2020.06.29.178509v1.full.pdf>

van Doremalen N, Lambe T, Spencer A, et al. ChAdOx1 nCoV-19 vaccination prevents SARS-CoV-2 pneumonia in rhesus macaques. Preprint [published online May 13, 2020]. *bioRxiv*. doi:10.1101/2020.05.13.093195. Available at <https://doi.org/10.1038/s41586-020-2608-y>[PubMed 32511340]

Vogel AB, Kanevsky I, Che Y, et al. A prefusion SARS-CoV-2 spike RNA vaccine is highly immunogenic and prevents lung infection in non-human primates [published online September 8, 2020]. *bioRxiv*. Available at <https://www.biorxiv.org/content/10.1101/2020.09.08.280818v1.full.pdf>

Walsh EE, Frenck R, Falsey AR, et al. RNA-based COVID-19 vaccine BNT162b2 selected for a pivotal efficacy study. Preprint [published online August 20, 2020]. *medRxiv*. doi:10.1101/2020.08.17.20176651 Available at <https://www.medrxiv.org/content/10.1101/2020.08.17.20176651v1.full.pdf>[PubMed 32839784]

Wang H, Zhang Y, Huang B, et al. Development of an inactivated vaccine candidate, BBIBP-CorV, with potent protection against SARS-CoV-2. *Cell*. 2020;182(3):713-721. doi:10.1016/j.cell.2020.06.008. Available at [https://www.cell.com/cell/fulltext/S0092-8674\(20\)30695-4?_returnURL=https%3A%2F%2Flinkinghub.elsevier.com%2Fretrieve%2Fpii%2FS0092867420306954%3Fshowall%3Dtrue](https://www.cell.com/cell/fulltext/S0092-8674(20)30695-4?_returnURL=https%3A%2F%2Flinkinghub.elsevier.com%2Fretrieve%2Fpii%2FS0092867420306954%3Fshowall%3Dtrue)[PubMed 32778225]

Xia S, Duan K, Zhang Y, et al. Effect of an inactivated vaccine against SARS-CoV-2 on safety and immunogenicity outcomes: interim analysis of 2 randomized clinical trials [published online August 13, 2020]. *JAMA*. 2020;e2015543. doi:10.1001/jama.2020.15543 [PubMed 32789505]

Yu J, Tostanoski LH, Peter L, et al. DNA vaccine protection against SARS-CoV-2 in rhesus macaques. *Science*. 2020;369(6505):806-811. doi:10.1126/science.abc6284. Available at <https://science.sciencemag.org/content/369/6505/806.full>[PubMed 32434945]

Zhang Y, Zeng G, Pan H, et al. Immunogenicity and safety of a SARS-CoV-2 inactivated vaccine in healthy adults aged 18-59 years: report of the randomized, double-blind, and placebo-controlled phase 2 clinical trial [published online August 10, 2020]. *medRxiv*. Available at <https://www.medrxiv.org/content/10.1101/2020.07.31.20161216v1>

Zhu FC, Guan XH, Li YH, et al. Immunogenicity and safety of a recombinant adenovirus type-5-vectored COVID-19 vaccine in healthy adults aged 18 years or older: a randomised, double-blind, placebo-controlled, phase 2 trial. *Lancet*. 2020;396(10249):479-488. doi:10.1016/S0140-6736(20)31605-6. Available at [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)31605-6/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)31605-6/fulltext)[PubMed 32702299]

Zhu FC, Li YH, Guan XH, et al. Safety, tolerability, and immunogenicity of a recombinant adenovirus type-5 vectored COVID-19 vaccine: a dose-escalation, open-label, non-randomised, first-in-human trial. *Lancet*. 2020;395(10240):1845-1854. doi:10.1016/S0140-6736(20)31208-3. Available at <https://www.thelancet.com/action/showPdf?pii=S0140-6736%2820%2931208-3>[PubMed 32450106]

RESOURCE DOCUMENTS:

Biomedical Advanced Research & Development Authority (BARDA): Award list: <https://medicalcountermeasures.gov/app/barda/coronavirus/COVID19.aspx>

Coalition for Epidemic Preparedness Innovations (CEPI): <https://cepi.net/news/>

Food & Drug Administration, Emergency Use Authorizations (EUA): <https://www.fda.gov/emergency-preparedness-and-response/mcm-legal-regulatory-and-policy-framework/emergency-use-authorization>

Food & Drug Administration, Fast Track & Similar Designations: <https://www.fda.gov/patients/learn-about-drug-and-device-approvals/fast-track-breakthrough-therapy-accelerated-approval-priority-review>

SARS-CoV-2 Vaccines: Evidence from Human Immunogenicity Studies										
Compiled by John D. Grabenstein, RPh, PhD			All Days based on first vaccination at Day 0.							
Table describes results with doses carried forward into phase 3 efficacy trials. Other available data noted.										
Vaccine Sponsor (with Major Partners)	Univ. of Oxford (Jenner Institute) with AstraZeneca	ModernaTX USA	BioNTech with Pfizer	Johnson & Johnson (Janssen Vaccines)	Novavax	Sanofi Pasteur with GlaxoSmithKline	CureVac	CanSino Biologics with Academy of Military Medical Sciences	Sinopharm (China National Biotech Group) (Beijing IBP, Wuhan IBP)	Sinovac Biotech Co.
Product Designator	ChAdOx1 or AZD1222	mRNA-1273	BNT162b2	Ad26.CoV2-S, JN1-78436735	NVX-CoV2373	TBA	CvriCoV	Ad5-nCoV	BBIBP-CoVr	CoronaVac
Vaccine Type	Adenovirus 63 vector	mRNA	mRNA	Adenovirus 26 vector	Subunit protein	Subunit protein	mRNA	Adenovirus 5 vector	Inactivated whole	Inactivated whole
Product Features	Chimpanzee adenovirus type 63 vector	Within lipid nanoparticle dispersion	Within lipid nanoparticle dispersion	Human adenovirus type 26 vector	Adjuvanted with Matrix-M	Adjuvanted with AS03 or AF03	Adjuvanted with AS03	Human adenovirus type 5 vector	Adjuvanted with aluminum hydroxide	Adjuvanted with aluminum hydroxide
Publication lead author	Folegatti 2020	Jackson 2020 (18 to 55); Miller 2020 (≥56)	Walsh 2020	Saeoff 2020	Keech 2020	not yet reported	not yet reported	Zhu 2020a, Zhu 2020b	Xia 2020	Zhang 2020
Vaccine Cohort 1: age range (y), n	18 to 55, n=533	Jackson: 18 to 55, n=15	18 to 55, n=12	18 to 55, n=402	18 to 59, n=29			≥18, n=253	18 to 59, n=42	18 to 59, n=120
1. Vaccine Dosage, Regimen	5x10 ¹⁰ vp, single dose	100 mcg, Days 0 + 28	30 mcg, Days 0 + 21	5x10 ¹⁰ or 1x10 ¹¹ vp, single dose or Day 0 + 56	5 mcg spike + 50 mcg adjuvant, Days 0 + 21			1x10 ¹¹ vp, single dose	5 mcg, Days 0 + 21	3 mcg, Days 0 + 28
1. Neutralizing antibody responses: Onset (A). Assay (B). Peak	Onset by Day 28 (moderate at Day 14). MNA: 51 at Day 28, detected in 91% (n=35) rising further to Day 42. PRNT: 218 at Day 28, detected in 100% (n=35). MarburgVN: 62% at Day 56 (n=37)	Onset by Day 35 (moderate at Days 14 and 28). PsVNA: 344 (peak Day 42), detected in 100% at Day 35. PRNT: 654 at Day 42, detected in 100% at Day 42	Onset by Day 28 (modest at Day 21). VNT: 361 at Day 28, detected in 100%	Onset by Day 28. wtVNA: 214 (low dose) or 243 (high dose), detected in 92% at Day 28. Response to dose 2 pending	Most respond by Day 21 (earliest measurement), all by Day 35. MNA: Peak 3906 at Day 35, detected in 100%			Onset by Day 28. NA-LV: 19.5 at Day 28, detected in 43%. NA-PV: 61 at Day 28, detected in 85%. Prior Ad5 immunity reduced nAb response ~2-fold	Onset by Day 35. PRNT: 247 at Day 35, detected in 98%	>90% respond by Day 56 (only day tested). MCEA: ~42 at Day 56
1. Relative to convalescent serum pool (C)	Pool n=142, pseudoneutralization, Figure 5, vaccines similar to pool at Day 35 or 52. Pool n=5, MarburgVN, Figure 4, less than pool	Pool n=41. PsVNA: 109. PRNT: 158. Figure 2b: Dose 1-similar, Dose 2 (Day 56) vaccines exceeded pool	Pool n=38. VNT: 94. Figure 4: Vaccines 3.8-fold higher than pool	Pool n not described. wtVNA: 899 (NSS)	Pool n=29. MNA: 983. Figure 3B: Vaccines 4-fold higher than pool			Not assessed	Unable to benchmark to convalescent serum	Pool not described. MCEA: 164. Vaccines 2.5- to 6.8-fold lower than pool
1. T-cell response	100% responded, peak Day 14, n=43. No mention of CD8	100% responded, Th1 biased (TNFα > IL2 > IFNγ >> IL4, IL13). Low-level CD8 response post second 100-mcg dose	Results pending	CD4+ response in 80% at Day 14. Robust CD8 response, yet Th1 bias. Response to dose 2 pending	Most responded, Th1 biased (TNFα > IL2 > IFNγ >> IL5, IL13)			IFNγ in 90% at Day 28. Not influenced by ad-5 status. No mention of CD8	No differences from controls for Th1, Th2 or Th17	Not studied
Vaccine Cohort 2: age range (y), n	18 to 55, n=10	Miller: 56 to 70, n=10, ≥71, n=10	65 to 85, n=12	≥65, n=394. Data on first 15 (65 to 88) reported here	18 to 59, n=28			≥18, n=129	18 to 59, n=42	18 to 59, n=120
2. Vaccine Dosage, Regimen	5x10 ¹⁰ vp, Days 0 + 28	100 mcg, Days 0 + 28	30 mcg, Days 0 + 21	5x10 ¹⁰ or 1x10 ¹¹ vp, single dose or Day 0 + 56	25 mcg spike + 50 mcg adjuvant, Days 0 + 21			5x10 ¹⁰ vp, single dose	5 mcg, Days 0 + 14	3 mcg, Days 0 + 14
2. Neutralizing antibody responses: Onset (A). Assay (B). Peak	Onset by Day 28 (moderate at Day 14), higher with boost. MNA: 136 at Day 56, detected in 100% (n=9). MarburgVN: 100% at Day 56 (n=10)	Onset by Day 35 (moderate at Days 14 and 28). PsVNA: 324 or 242 at Day 56, detected in 100%	Onset by Day 28 (modest at Day 21). VNT: 149 at Day 28, detected in 100%	Onset by Day 28. wtVNA: 1967 (low dose, n=50) or 127 (high dose, n=50), detected in 100% and 83% at Day 28. Response to dose 2 pending	Most respond by day 21 (earliest measurement). MNA: 3305 at Day 35, detected in 100%			Onset by Day 28. NA-LV: 18.3 at Day 28, detected in 35%. NA-PV: 55 at Day 28, detected in 83%. Prior Ad5 immunity reduced nAb response ~2-fold	Onset by Day 28. PRNT: 121, detected in 98%	>90% respond by Day 28. MCEA: 27.6 at Day 28
2. Relative to convalescent serum pool (C)	Pool n=5, MarburgVN, Figure 4, less than pool	Pool n=41. Figure 2b: above median titer at Day 56	Pool n=38. VNT: 94. Figure 4: Vaccines 1.6-fold higher than pool	Pool n not described. wtVNA: 899 (NSS)	Pool n=29. MNA: 983. Figure 3B: Vaccines 3.4-fold higher than pool			Not assessed	Unable to benchmark to convalescent serum	Pool not described. MCEA: 164. Vaccines 2.5- to 6.8-fold lower than pool
2. T-cell response	100% responded, peak Day 14, n=43, little response to boost. No mention of CD8	100% responded, Th1 biased response across all age groups	Results pending	CD4+ response in 83% at Day 14. Robust CD8 response, yet Th1 bias. Response to dose 2 pending	Most responded, Th1 biased (TNFα > IL2 > IFNγ >> IL5, IL13)			IFNγ in 88% at Day 28. Not influenced by ad-5 status. No mention of CD8	No differences from controls for Th1, Th2 or Th17 (CD4, CD8, NK, B, TNFα, IFNγ, IL2, IL4, IL5, IL6)	Not studied
3. Other cohorts described in papers, but omitted here	None	Jackson: 25 mcg (n=15), 250 mcg (n=15). Miller: 50 mcg (n=20)	Mulligan 2020 for BNT162b1	None	25 mcg spike alone twice (n=25); 25 mcg spike + 50 mcg adjuvant, Day 0 only (n=25)			None	2.5, 5, 10 mcg, Days 0 + 28 + 56	6 mcg, either Days 0 + 14 or Days 0 + 28
Total n reported, all vaccinated study arms	543	42	72 with BNT162b2, others with BNT162b1	402+15=417	100			382	240	480
Most common injection-site symptoms	Tenderness, pain, warmth	Any ~100%; pain, redness	Pain, swelling, redness	Any: 27% to 58%; pain	Any ~90%; tenderness, pain			Pain, itch, induration, swelling, redness	Pain, itching, swelling	Pain
Most common systemic adverse events	Fatigue, headache, muscle ache, chills, feverishness	Any: 65% w/dose 1, 100% w/dose 2; fatigue, headache, joint ache, chills, muscle ache	Fatigue, headache, chills, muscle pain, fever, joint pain	Any: 36% to 64%; fatigue, headache, myalgia, fever (5% grade-3) among 18 to 55 y/o	Any ~60%; headache, fatigue, muscle pain, malaise, joint pain, nausea			Fatigue, fever, headache, muscle pain, joint pain, appetite impaired	Fever, nausea, fatigue, headache	Fatigue, fever
SAEs in these trials related to vaccine	None	None	None	One - fever (hospitalized)	None			None	None	None

Abbreviations: Ad5 (adenovirus type 5); AIOH3 (aluminum hydroxide); MCEA (modified cytopathic effect assay); MNA (microneutralization assay); NA (neutralizing activity); nAb (neutralizing antibody); NA-LV (neutralizing antibody against live SARS-CoV-2 virus); NA-PV (neutralizing antibody against pseudovirus); PRNT (plaque-reduction neutralization test); PsVNT (pseudotyped single-round virus neutralization assay); SAE (serious adverse event); TBA (to be announced); VNT (virus neutralization titer); VN (virus neutralization); vp (viral particles); wt (wild-type)

Notes:
A - Onset defined as significant rise in neutralizing in all or most vaccine recipients. Comparison limited by few and inconsistent data points.
B - Major differences in assay methods between studies. Do not directly compare values between studies.
C - Each pool of convalescent plasma differs in size, donor age, disease severity, time since disease onset, and other factors.
Last updated: 9/28/2020

REFERENCES:

Folegatti PM, Ewer KJ, Aley PK, et al. Safety and immunogenicity of the ChAdOx1 nCoV-19 vaccine against SARS-CoV-2: a preliminary report of a phase 1/2, single-blind, randomised controlled trial. *Lancet*. 2020;396(10249):467-478.

doi:10.1016/S0140-6736(20)31604-4. Available at [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)31604-4/fulltext\[PubMed 32702298\]](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)31604-4/fulltext[PubMed 32702298])

Jackson LA, Anderson EJ, Routhael NG, et al. An mRNA vaccine against SARS-CoV-2 – preliminary report [published online July 14, 2020]. *N Engl J Med*. doi:10.1056/NEJMoa2022483. Available at

<https://www.nejm.org/doi/pdf/10.1056/NEJMoa2022483>,
[https://www.nejm.org/doi/suppl/10.1056/NEJMoa2022483/suppl_file/nejm2022483_appendix.pdf\[PubMed 32663912\]](https://www.nejm.org/doi/suppl/10.1056/NEJMoa2022483/suppl_file/nejm2022483_appendix.pdf[PubMed 32663912])

Keech C, Albert G, Cho I, et al. Phase 1-2 trial of a SARS-CoV-2 recombinant spike protein nanoparticle vaccine [published online September 2, 2020]. *N Engl J Med*. doi:10.1056/NEJMoa2026920. Available at

https://www.nejm.org/doi/full/10.1056/NEJMoa2026920?query=featured_coronavirus[PubMed 32877576]

Miller JM, Moderna, et al. ACIP Presentation: mRNA-1273 clinical development program. By webinar, August 26, 2020.

Available at <https://investors.modernatx.com/static-files/34f97bb2-d89a-45e4-a770-cae0591fa807>

Sadoff J, Le Gars M, Shukarev G, et al. Safety and immunogenicity of the Ad26.COV2.S COVID-19 vaccine candidate: interim results 2 of a phase 1/2a, double-blind, randomized, placebo-controlled trial. medRxiv 2020 Sep 25.

<https://doi.org/10.1101/2020.09.23.20199604>

Walsh EE, Frenck R, Falsey AR, et al. RNA-based COVID-19 vaccine BNT162b2 selected for a pivotal efficacy study.

Preprint. *medRxiv*. 2020;2020.08.17.20176651. doi:10.1101/2020.08.17.20176651. Available at

<https://www.medrxiv.org/content/10.1101/2020.08.17.20176651v1.full.pdf>[PubMed 32839784]

Xia S, Duan K, Zhang Y, et al. Effect of an inactivated vaccine against SARS-CoV-2 on safety and immunogenicity outcomes: interim analysis of 2 randomized clinical trials [published online August 13, 2020]. *JAMA*. 2020;e2015543.

doi:10.1001/jama.2020.15543 [PubMed 32789505]

Zhang Y, Zeng G, Pan H, et al. Immunogenicity and safety of a SARS-CoV-2 inactivated vaccine in healthy adults aged 18-59 years: report of the randomized, double-blind, and placebo-controlled phase 2 clinical trial [published online August 10, 2020]. *medRxiv*. Available at

<https://www.medrxiv.org/content/10.1101/2020.07.31.20161216v1>

Zhu FC, Guan XH, Li YH, et al. Immunogenicity and safety of a recombinant adenovirus type-5-vectored COVID-19 vaccine in healthy adults aged 18 years or older: a randomised, double-blind, placebo-controlled, phase 2 trial. *Lancet*.

2020;396(10249):479-488. doi:10.1016/S0140-6736(20)31605-6. Available at

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)31605-6/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)31605-6/fulltext)[PubMed 32702299]

Zhu FC, Li YH, Guan XH, et al. Safety, tolerability, and immunogenicity of a recombinant adenovirus type-5 vectored COVID-19 vaccine: a dose-escalation, open-label, non-randomised, first-in-human trial. *Lancet*. 2020;395(10240):1845-

1854. doi:10.1016/S0140-6736(20)31208-3. Available at [https://www.thelancet.com/action/showPdf?pii=S0140-](https://www.thelancet.com/action/showPdf?pii=S0140-6736%2820%2931208-3)

[6736%2820%2931208-3](https://www.thelancet.com/action/showPdf?pii=S0140-6736%2820%2931208-3)[PubMed 32450106]

Applies to

Coronavirus Vaccine; COVID-19; COVID-19 Vaccine Tracker; COVID19; COVID19 Vaccine Tracker; SARS-CoV-2 Vaccine

Last Updated 9/28/20



© 2020 UpToDate, Inc. and its affiliates and/or licensors. All rights reserved.