

There is a rapidly growing body of research evidence about the effectiveness of COVID-19 vaccines against variants of concern

Iorio A, Little J, Linkins L, Abdelkader W, Bennett D, Lavis JN. COVID-19 living evidence synthesis #6 (version 6.29): What is the efficacy and effectiveness of available COVID-19 vaccines in general and specifically for variants of concern? Hamilton: Health Information Research Unit, 2 February 2022.

Why is the evidence on this topic being summarized?

- All viruses evolve over time. When a virus multiplies in the human body, it sometimes changes a little bit. These changes are called "mutations." A virus with one or more new mutations is referred to as a "variant" of the original virus.
- A variant of concern is a variant for which there is evidence of an increased risk of spread, more severe disease (for example, causing more hospitalizations or deaths), lower capacity of antibodies generated during previous infection or vaccination to block it, reduced success of treatments or vaccines, or failure of diagnostic tests to detect the virus.
- It is important to understand how COVID-19 variants of concern affect the virus' behaviour, including their impact on the how well vaccines work among the adult population.
- Another living evidence synthesis examines the effectiveness of COVID-19 vaccines among children and adolescents (plain-language summary available here).

What guestion did we want to answer?

• What is the protection provided by available COVID-19 vaccines against variants of concern?

How have we done this living evidence synthesis?

- We conducted a broad search in several databases and websites to retrieve studies evaluating the effectiveness of COVID-19 vaccines, including the COVID-END Inventory of Best Syntheses.
- We examined the studies reporting data on how well vaccines work against variants of concern (for example, whether the vaccines prevent infection, severe disease, death, and prevent transmission).

How up to date is this living evidence synthesis?

• This living evidence synthesis was last updated on 2 February 2022.

What are the main results of our living evidence synthesis?

- We appraised a total of 379 studies, 132 of which were deemed eligible for our synthesis.
- We critically appraised the studies and determined the level of certainty of the body of evidence (table 1). The color indicates the level of certainty based on the evidence.

Table 1. Levels of certainty based on the best evidence available

High-certainty evidence	Moderate-certainty evidence	Low-certainty evidence
Our confidence in the body of	Our confidence in the body of	Our confidence in the body of
evidence is high. The studies	evidence is moderate. The	evidence is low. There are
were well done with low risk	studies were done with low to	aspects of the studies that led
of bias*. The studies revealed	moderate risk of bias* but	us to believe the results may
consistent findings.	revealed only partially	not be the same in future
	consistent findings. We will	studies (low to serious risk of
	become more confident if new	bias* with inconsistent
	studies have the same findings.	findings).

^{*}Features of the study (such as who was selected for the study, how the study was designed, and how the date was reported) that could lead to misleading results.

In table 2 below, we present what is known about the effectiveness of vaccines up to 30 days after last dose.

Table 2. Vaccine effectiveness (2 doses unless otherwise stated) up to 30 days after last dose

Outcome	Variants of concern			
(and vaccine)	Alpha	Beta	Gamma	Delta
Any infection				
Pfizer	78 to 95%		93%	42 to 91%
Moderna	86 to 100%	96%	95%	52 to 91%
AstraZeneca	62 to 79%		90%	45 to 73%
Johnson & Johnson				3 to 71%*
Sinovac			66%	74%
AstraZeneca followed by Pfizer or Moderna	82 to 91%		96%	88%
Symptomatic infection (repor	ted when data on '	any infection'	is limited)	
Pfizer		84 to 88%	84 to 88%	63 to 94%
Moderna			88%	87%
AstraZeneca		10%	65%	61 to 92%
Johnson & Johnson				51%
Novavax	86%	43%**		
Sinovac				59%
Covaxin				50%
AstraZeneca followed by				67 to 79%
Pfizer or Moderna				
Transmission				
Pfizer	70 to 82%		31 to 63% (unvaccinated contact) 10 to 40% (vaccinated contact)	
Moderna	88%		62 to 77%	
AstraZeneca	58 to 63%		36%	
Johnson & Johnson	77%*			
AstraZeneca followed by Pfizer or Moderna			86%	
Severe disease (may include de		es)	,	
Pfizer	92 to 100%			82 to 98%

Moderna	96%	96%		93 to 100%
AstraZeneca			76%	
Johnson & Johnson		82%		
Sinovac				46 to 89%
Death				
Pfizer	91%			90%
AstraZeneca				91%
Sinovac			86%	77%

In table 3 below, we present what is known about vaccine effectiveness against Omicron, which is currently the most dominant variant.

Table 3. Vaccine effectiveness against Omicron

Outcome	Number of doses	Time since last	Effectiveness
(and vaccine)		dose (days)	
Infection			
Pfizer	2	7 to 59	6 to 55%
	2	164	-76.5%
	3	7 to 30	34 to 55%
Moderna	2	14 to 90	30 to 37%
	2	164	-39%
	3	7 to 30	59 to 64%
Symptomatic infection			
Pfizer	2	14 to 63	88%
		175	34%
	3	14	75.5%
AstraZeneca	2	175	6%
AstraZeneca followed by	2 doses of AstraZeneca	14	71.4%
Pfizer or Moderna	and 1 dose of Pfizer or		
	Moderna		
Transmission			
No evidence available			
Severe disease (may include o	death in some studies)		
No evidence available	,		
Death			
No evidence available			

The COVID-19 Evidence Network to support Decision-making (COVID-END) is supported by an investment from the Government of Canada through the Canadian Institutes of Health Research (CIHR). To help Canadian decision-makers as they respond to unprecedented challenges related to the COVID-19 pandemic, COVID-END in Canada is preparing rapid evidence responses like this one. The opinions, results, and conclusions are those of the evidence-synthesis team that prepared the rapid response, and are independent of the Government of Canada and CIHR. No endorsement by the Government of Canada or CIHR is intended or should be inferred.









