

Correlation of immunogenicity and reactogenicity of BNT162b2 and CoronaVac SARS-CoV-2 Vaccines

RR Zhang^{a,1}, KY Leung^{b,1}, <u>D Liu^{a,}</u>,Y Fan^a, L Lu^b, PC Chan^b, KKW To^{b,c,d}, H Chen^{b,c,d}, KY Yuen^{b,c,d}, KH Chan^{b,c,d,}, IFN Hung^{a,c,d,#}

^a Department of Medicine, Li Ka Shing Faculty of Medicine, University of Hong Kong, HKSAR, China;
 ^b Department of Microbiology, Li Ka Shing Faculty of Medicine, University of Hong Kong, HKSAR, China;
 ^c State Key Laboratory for Emerging Infectious Diseases, Li Ka Shing Faculty of Medicine, University of Hong Kong, HKSAR;
 ^d Carol Yu Centre for Infection, Li Ka Shing Faculty of Medicine, University of Hong Kong, HKSAR, China.

Background COVID-19 infection is a global health issue. Although some therapies have been confirmed to have partial antiviral effects in clinical trials, there is still a lack of specific

Results

Immunogenicity (Table 1)

Safety Injection site pain (88.8%) and redness (77.5%) were

treatment. At present, some vaccines had been evaluated and included in the emergency use list, BNT162b2 and CoronaVac have been imported by Hong Kong government in early 2021. Therefore, the development of related vaccines and widespread vaccination is considered as an effective and promising measure to contain the pandemic. The aim of this study is to compare the effectiveness and safety of BNT162b2 and CoronaVac vaccines, and explore the relationship between the reactogenicity and immunogenicity of the two vaccines.

Table 1 Immunogenicity of CoronaVac and BNT162b2

the most commonly BNT162b2-related AE, and injection site pain (37.7%) and tiredness (26.4%) were more frequent in CoronaVac group. Women showed higher frequency of headache (45.7% vs. 29.4%) and joint pain (26.1 vs. 14.7%) than men in BTN162b2 group. Headache (26.5% vs. 0) and tiredness (38.2% vs. 5.3%) were more common in women than in men vaccinated with CoronaVac.

Correlation between immunogenicity and reactogenicity (Table 2)

		CoronaVac			BNT162b2	
	Female (n=61)	Male (n=34)	Total (n=95)	Female (n=53)	Male (n=41)	Total (n=94)
Day 0						
GMT value	5.0 (5.0-5.0)	5.0 (5.0-5.0)	5.0 (5.0-5.0)	5.0 (5.0-5.0)	5.0 (5.0-5.0)	5.0 (5.0-5.0)
Day 21*/28						
GMT value	5.7 (5.2-6.2)	5.8 (5.0 -6.6)	5.71 (5.31-6.14)	11.5 (8.4-15.9) *	10.9 (7.6-15.6) *	11.3 (8.9-14.3) *
Seroprotection	0 (0)	0 (0)	0 (0)	10 (18.9%)	4 (9.8%)	14 (14.9%)
Day 56						
GMT value	14.0 (11.6-17.0)	11.4 (8.7–15.0)	13.1 (11.2-15.3)	147.9 (118.9-184.1)	109.3 (81.6-146.3)	129.9 (108.6-155.2)
Seroprotection	7 (14.9%) ^a	2 (7.7%) ^b	9 (12.3%)	53 (100%) ^c	36 (90%) ^d	89 (96.7%)

GMT: geometric mean titre, data presentation: GMT values (95% CI); * Day 21: BNT162b2, Day 28: CoronaVac; Seroprotection: vMN titre≥40; a: 47 subjects took blood on Day 56; b. 26 subjects took blood on Day 56; c: 53 subjects took blood on Day 56; d: 40 subjects took blood on Day 56.

Methods In this study, 189 participants received BNT162b2 or CoronaVac vaccine and 133 of them recorded adverse events (AE) daily for 4 weeks after vaccination. Blood was collected from the participants for antibody assay at three time points, including the baseline, day 21 (BNT162b2) or day 28 (CoronaVac), and day 56. Live virus microneutralization (vMN) assay was used to measure serum antibody titre. **Conclusion** Low correlations between antibody titre and symptoms in both genders were found. The degree of AEs would cause different negative impacts on public's acceptance of vaccination, but AEs may work as an indicator of immuno-genicity of vaccine. Furthermore, a higher dose of vaccine for men may be considered so as to enhance antibody response to a level that is comparable with women.

Table 2 Correlation between antibody response and adverse events of COVID-19 vaccines

CoronaVac (n=53)

BNT162b2 (n=80)

	Day28 MN titre	Day56 MN titre	Day21 MN titre	Day56 MN titre		
	rho (p value)	rho (p value)	rho (p value)	rho (p value)		
Systemic reactions	-0.16 (0.257)	0.10 (0.467)	0.20 (0.083)	0.008 (0.947)		
Fever	_	_	0.16 (0.147)	0.22 (0.048)		
Chills	-0.062 (0.668)	0.047 (0.737)	_	0.095 (0.404)		
Headache	0.060 (0.678)	0.038 (0.787)	0.000 (0.998)	-0.086 (0.451)		
Tiredness	-0.076 (0.600)	0.051 (0.719)	0.14 (0.211)	-0.025 (0.826)		
Nausea	-0.089 (0.540)	0.15 (0.271)	-0.058 (0.607)	-0.077 (0.499)		
Vomit	_	0.21 (0.134)	_	0.033 (0.771)		
Diarrhea	0.18 (0.217)	0.28 (0.039)	0.12 (0.308)	0.13 (0.256)		
Muscle pain	-0.059 (0.686)	0.041 (0.772)	0.17 (0.123)	-0.12 (0.282)		
Joint pain	-0.089 (0.540)	-0.12 (0.396)	0.12 (0.291)	-0.18 (0.112)		
Skin rash	-0.062 (0.668)	-0.062 (0.661)	0.19 (0.101)	0.11 (0.324)		
Local reactions	0.14 (0.328)	0.12 (0.400)	0.11 (0.340)	-0.066 (0.565)		
Pain	0.14 (0.338)	0.11 (0.417)	0.051 (0.651)	-0.094 (0.411)		
Redness	_	-0.062 (0.661)	0.21 (0.062)	0.036 (0.751)		
Swelling	0.31 (0.028)	0.10 (0.458)	0.13 (0.270)	0.077 (0.498)		
Ecchymosis Spearman's correlation coc	officient: 0 5>rho>0 3 low positiv	- ve correlation: n-0.05: the correl	0.17 (0.131)	0.12 (0.278)		
Itching	0.31 (0.028)	0.15 (0.287)	ation coefficient is statistically significant 0.19 (0.099)	-0.044 (0.703)		