

Studies find bivalent COVID-19 shot effective for preventing thromboembolic events

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A bivalent mRNA COVID-19 vaccine after receipt of an original

monovalent COVID-19 vaccine is effective for preventing COVID-19-related thromboembolic events, according to research published in the Jan. 11 issue of the U.S. Centers for Disease Control and Prevention *Morbidity and Mortality Weekly Report*.

Amanda B. Payne, Ph.D., from the CDC in Atlanta, and colleagues estimated the incremental benefit of receipt of a bivalent mRNA COVID-19 vaccine after receipt of an original monovalent COVID-19 vaccine.

Two retrospective cohort studies were conducted among Medicare fee-for-service enrollees during Sept. 4, 2022, to March 4, 2023, to estimate the [vaccine effectiveness](#) (VE) of a bivalent mRNA COVID-19 dose for preventing thromboembolic events versus original monovalent COVID-19 doses only.

The researchers found that the effectiveness of a bivalent mRNA COVID-19 vaccine dose versus the original [vaccine](#) alone against COVID-19-related thromboembolic events was 47 and 51 percent among Medicare enrollees aged 65 years and older and among adults aged 18 years and older with end stage renal disease receiving dialysis, respectively.

Among Medicare beneficiaries who were immunocompromised, VE was similar: 46 and 45 percent among adults aged 65 years and older and those aged 18 years and older with end-stage renal disease, respectively.

"To prevent COVID-19-related complications, including thromboembolic events, adults should stay up to date with recommended COVID-19 vaccination," the authors write.

More information: Amanda B. Payne et al, Effectiveness of Bivalent mRNA COVID-19 Vaccines in Preventing COVID-19–Related

Thromboembolic Events Among Medicare Enrollees Aged ≥ 65 Years and Those with End Stage Renal Disease—United States, September 2022–March 2023, *MMWR. Morbidity and Mortality Weekly Report* (2024). [DOI: 10.15585/mmwr.mm7301a4](https://doi.org/10.15585/mmwr.mm7301a4)

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