July 21, 2021

TO: Emergency Operations Centre
Medical Health Officers
Public Health Managers
Public Health Immunization Coordinators
Saskatchewan Registered Nurses Association
Saskatchewan Association of Licensed Practical Nurses
College of Physicians and Surgeons of Saskatchewan
Saskatchewan College of Pharmacy Professionals
Registered Psychiatric Nurses Association of Saskatchewan
Saskatchewan College of Respiratory Therapists
Saskatchewan College of Paramedics
Drug Plan and Extended Benefits Branch

Re: Post-COVID-19 Vaccine Myocarditis / Pericarditis Immunization Recommendations

Dear Colleagues:


Investigations into the association between myocarditis/ pericarditis and mRNA vaccines continue in Canada and abroad. Based on cases reported internationally, available information indicates that they occur more often after the second dose, usually within a week after vaccination, more often in adolescents and young adults under 30 years of age, and more frequently in males than in females.

It is unclear if people who developed myocarditis or pericarditis after a first dose of an mRNA COVID-19 vaccine are at increased risk of further adverse cardiac events following a second dose of the vaccine. As a precautionary measure, NACI recommends that the second mRNA COVID-19 vaccine dose should be deferred in individuals who developed myocarditis or pericarditis following the first dose of an mRNA COVID-19 vaccine until more information is available. NACI will continue to monitor the evidence and update recommendations as needed.
If an individual is at high risk of COVID-19 acquisition or severe outcome due to community transmission or underlying condition, then a decision to get the second dose should be made in consultation with the individual’s physician (cardiologist if possible) and the patient and their informed consent. People with a history of myocarditis or pericarditis following a first dose of an mRNA COVID19 vaccine, who choose or are recommended by their specialist to receive the second dose of an mRNA COVID-19 vaccine, should wait at least until their episode of myocarditis or pericarditis has completely resolved. This includes resolution of symptoms attributed to myocarditis or pericarditis, as well as no evidence of ongoing heart inflammation or sequelae as determined by the person's clinical team, which may include a cardiologist, and special testing to assess cardiac recovery. Decisions about proceeding with the second dose should include a conversation between the patient, their parent/guardian/caregiver (when relevant), and their clinical team. These individuals should be informed of the risks of myocarditis and pericarditis following a second mRNA COVID-19 vaccine dose and advised to seek medical attention if they develop symptoms.

Please note that NACI does not list a previous history of myocarditis or pericarditis unrelated to the mRNA COVID-19 vaccines as a contraindication to receiving these vaccines.


Sincerely,

Dr. Julie Kryzanowski
Deputy Chief Medical Health Officer