Evaluating the safety and immunogenicity of SARS-CoV-2 vaccines among underserved urban populations

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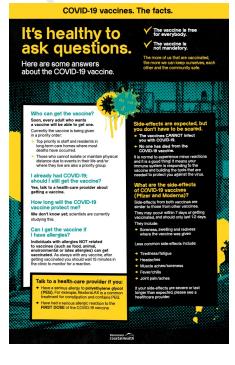




Background

- People who use drugs (PWUD) and people living with HIV(PLWH) are at an increased risk of SARS-CoV-2 infection and COVID-19-related morbidity and mortality
 - Risk factors: congregate living, drug use, HIV infection
 - Eight-fold increase in the odds of coronavirus infection among people with a substance use disorder (SUD)
 - Two-fold increase in the hazard ratio of COVID-19 mortality among people living with HIV
- The Downtown Eastside of Vancouver was prioritized for vaccination in January 2021 due to a high concentration of PWUD and PLWH.
 - Pop-up clinics (e.g., OPS, housing sites, parks)
 - Outreach among homeless population, congregate living settings
 - Incentives: \$5 cash or gift cards offered for vaccination





Objectives

- 1. Characterize vaccination uptake, hesitancy and adherence to vaccine protocols among structurally marginalized population of PLWH in Vancouver;
- 2. Estimate the immunogenicity of coronavirus vaccines and the durability of SARS-CoV-2-specific immune response following vaccination;
- 3. Document adverse effects following vaccination

Methods

- Recruited from an ongoing cohort of structurally marginalized people in downtown Vancouver
 - ACCESS cohort: Adults, HIV-positive, report unregulated drug use in the last six months
- Three study visits, each two months apart (N=275
 - Interviewer administered questionnaire, dried blood spot
- Baseline characteristics:
 - 44% racialized individuals, 74% in congregate living, 36% HCV+, 6% homeless.

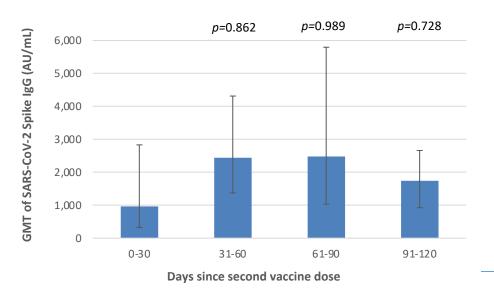
Results

Vaccine uptake (September 2021)

- Two doses: 58%, unvaccinated: 19%
- Suspected COVID-19 infection was associated with lower vaccine uptake

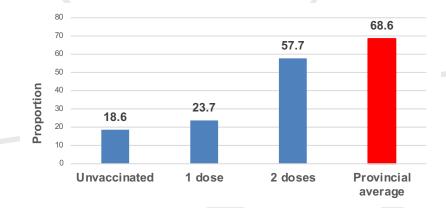
Adverse events

- No serious adverse events were reported
- Adverse events did not vary significantly across socio-demographic, substance use or clinical subgroups



Immunogenicity

 We did not observe and significant associations between sociodemographic, substance use or clinical factors and anti–SARS-CoV-2 Spike IgG response



Discussion

- Vaccine uptake among this marginalized urban population was below provincial rates at the time of data collection (50%% vs. 69%).
- However, vaccination rates as low as 7.6% have been observed among people who use drugs in other settings.
- The targeted vaccination campaign employed in Vancouver may be a model for improving vaccine uptake in other jurisdictions with similar marginalized populations.
- Adverse events and vaccine immunogenicity did not appear to vary across sociodemographic, substance use or clinical subgroups.
- Given that suspected prior COVID-19 infection was associated with lower odds of vaccine uptake, education efforts focused on the benefits of vaccination among those with previous COVID-19 exposure may be worthwhile among marginalized populations with high rates of COVID-1 infection.



