HIGHLIGHTS OF PRESCRIBING INFORMATION

These highlights do not include all the information needed to use COMIRNATY safely and effectively. See full prescribing information for COMIRNATY.

COMIRNATY (COVID-19 Vaccine, mRNA) suspension for injection, for intramuscular use

Initial U.S. Approval: YYYY

--- INDICATIONS AND USAGE-

COMIRNATY is a vaccine indicated for active immunization to prevent coronavirus disease 2019 (COVID-19) caused by severe acute respiratory syndrome coronavirus 2 (SARS CoV 2) in individuals 16 years of age and older. (1)

------DOSAGE AND ADMINISTRATION-----For intramuscular administration only.

COMIRNATY is administered intramuscularly as a series of 2 doses (0.3 mL each) 3 weeks apart. (2.3)

-- DOSAGE FORMS AND STRENGTHS------

Suspension for injection. After preparation, a single dose is 0.3 mL. (3)

-CONTRAINDICATIONS -

Known history of a severe allergic reaction (e.g., anaphylaxis) to any component of COMIRNATY. (4)

------ WARNINGS AND PRECAUTIONS --

- Postmarketing data demonstrate increased risks of myocarditis and pericarditis, particularly within 7 days following the second dose. (5.2)
- Syncope (fainting) may occur in association with administration of injectable vaccines, including COMIRNATY. Procedures should be in place to avoid injury from fainting. (5.4)

--- ADVERSE REACTIONS----

In clinical studies of participants 16 years of age and older, the most commonly reported adverse reactions (>10%) were pain at the injection site, fatigue, headache, muscle pain, chills, joint pain, fever, and injection site swelling. (6.1)

To report SUSPECTED ADVERSE REACTIONS, contact Pfizer Inc. at 1-800-438-1985 or VAERS at 1-800-822-7967 or <u>http://vaers.hhs.gov</u>.

See 17 for PATIENT COUNSELING INFORMATION.

Revised: M/YYYY

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FULL PRESCRIBING INFORMATION

1 INDICATIONS AND USAGE

COMIRNATY is a vaccine indicated for active immunization to prevent coronavirus disease 2019 (COVID-19) caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) in individuals 16 years of age and older.

2 DOSAGE AND ADMINISTRATION

2.1 Preparation for Administration

Prior to Dilution

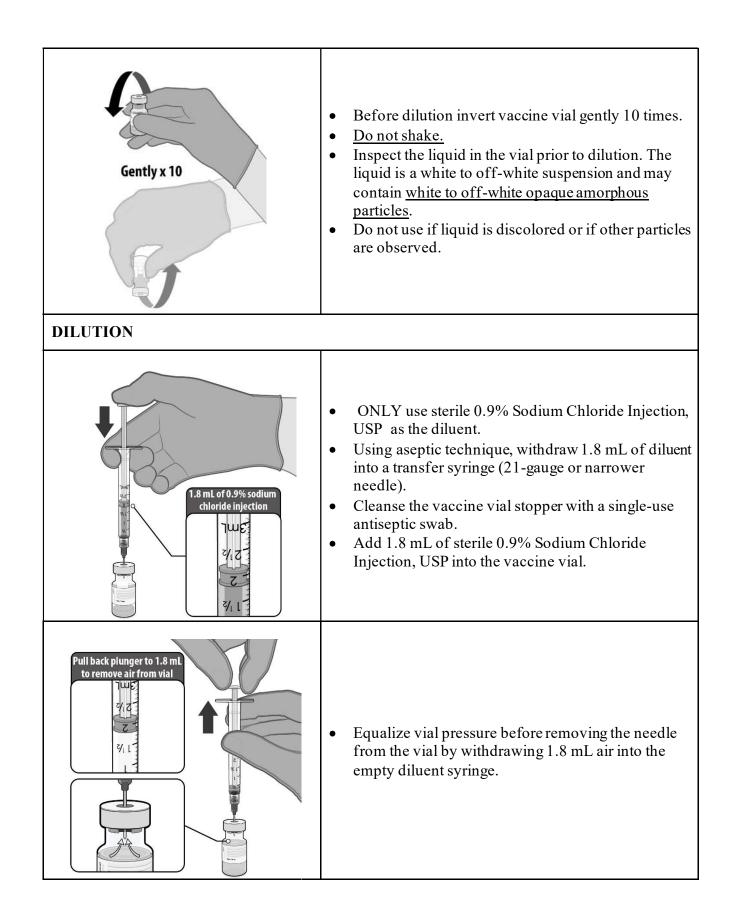
- COMIRNATY Multiple Dose Vial contains a volume of 0.45 mL, supplied as a frozen suspension that does not contain preservative. Each vial must be thawed and diluted prior to administration.
- Vials may be thawed in the refrigerator [2°C to 8°C (35°F to 46°F)] or at room temperature [up to 25°C (77°F)] [see How Supplied/Storage and Handling (16)].
- Refer to thawing instructions in the panels below.

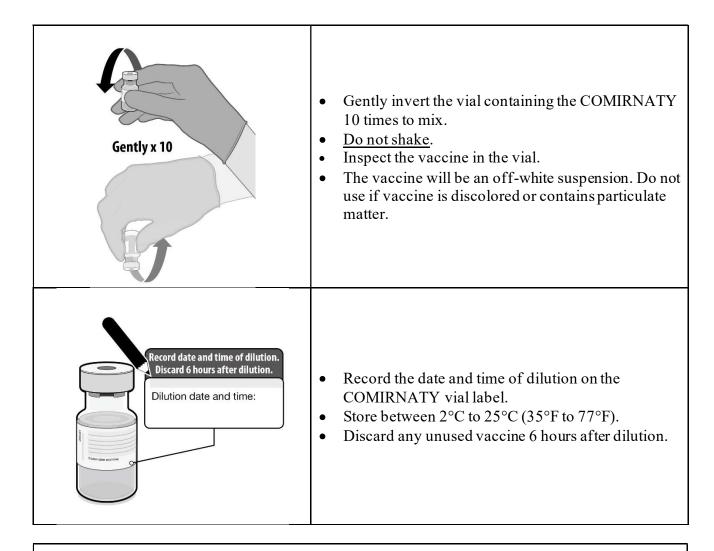
Dilution

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- Dilute the vial contents using 1.8 mL of sterile 0.9% Sodium Chloride Injection, USP to form COMIRNATY. Do not add more than 1.8 mL of diluent.
- ONLY use sterile 0.9% Sodium Chloride Injection, USP as the diluent. <u>Do not use bacteriostatic 0.9%</u> Sodium Chloride Injection or any other diluent.
- Vials of sterile 0.9% Sodium Chloride Injection, USP are provided but shipped separately. Use the provided diluent or an alternate brand of sterile 0.9% Sodium Chloride Injection, USP as the diluent.
- After dilution, 1 vial contains 6 doses of 0.3 mL each.
- Refer to dilution and dose preparation instructions in the panels below.

THAWING PRIOR TO DILUTION	
No more than 2 hours at room temperature (up to 25 °C / 77 °F)	 Thaw vial(s) of COMIRNATY before dilution either by: Allowing vial(s) to thaw in the refrigerator [2°C to 8°C (35°F to 46°F)]. A carton of vials may take up to 3 hours to thaw, and thawed vials can be stored in the refrigerator for up to 1 month. Allowing vial(s) to sit at room temperature [up to 25°C (77°F)] for 30 minutes. Using either thawing method, vials must reach room temperature before dilution and must be diluted within 2 hours.





PREPARATION OF INDIVIDUAL 0.3 mL DOSES OF COMIRNATY Using aseptic technique, cleanse the vial stopper with a single-use antiseptic swab, and withdraw 0.3 mL of COMIRNATY preferentially using low dead-volume syringes and/or needles. Each dose must contain 0.3 mL of vaccine. If the amount of vaccine remaining in a single vial cannot provide a full dose of 0.3 mL, discard the vial and any excess volume. Administer immediately.

2.2 Administration Information

For intramuscular injection only.

Parenteral drug products should be inspected visually for particulate matter and discoloration prior to administration, whenever solution and container permit. Visually inspect each dose in the dosing syringe prior to administration. The vaccine will be an off-white suspension. During the visual inspection,

- verify the final dosing volume of 0.3 mL.
- confirm there are no particulates and that no discoloration is observed.
- do not administer if vaccine is discolored or contains particulate matter.

After dilution, vials of COMIRNATY contain 6 doses of 0.3 mL of vaccine. Low dead-volume syringes and/or needles can be used to extract 6 doses from a single vial. If standard syringes and needles are used, there may not be sufficient volume to extract a sixth dose from a single vial. Irrespective of the type of syringe and needle,

- each dose must contain 0.3 mL of vaccine.
- if the amount of vaccine remaining in the vial cannot provide a full dose of 0.3 mL, discard the vial and any excess volume.
- do not pool excess vaccine from multiple vials.

2.3 Vaccination Schedule

COMIRNATY is administered intramuscularly as a series of 2 doses (0.3 mL each) 3 weeks apart.

There are no data available on the interchangeability of COMIRNATY with other COVID-19 vaccines to complete the vaccination series. Individuals who have received 1 dose of COMIRNATY should receive a second dose of COMIRNATY to complete the vaccination series.

3 DOSAGE FORMS AND STRENGTHS

COMIRNATY is a suspension for injection. After preparation, a single dose is 0.3 mL.

4 CONTRAINDICATIONS

Do not administer COMIRNATY to individuals with known history of a severe allergic reaction (e.g., anaphylaxis) to any component of the COMIRNATY [see Description (11)].

5 WARNINGS AND PRECAUTIONS

5.1 Management of Acute Allergic Reactions

Appropriate medical treatment used to manage immediate allergic reactions must be immediately available in the event an acute anaphylactic reaction occurs following administration of COMIRNATY.

5.2 Myocarditis and Pericarditis

Postmarketing data demonstrate increased risks of myocarditis and pericarditis, particularly within 7 days following the second dose. The observed risk has been highest in adolescent and young adult males under 40

years of age. Available data from short-term follow-up suggest that most individuals have had resolution of symptoms. Information is not yet available about potential long-term sequelae. The CDC has published considerations for vaccination of individuals with a history of myocarditis or pericarditis (<u>https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html#underlying-conditions</u>).

5.4 Syncope

Syncope (fainting) may occur in association with administration of injectable vaccines, including COMIRNATY. Procedures should be in place to avoid injury from fainting.

5.5 Altered Immunocompetence

Immunocompromised persons, including individuals receiving immunosuppressant therapy, may have a diminished immune response to the COMIRNATY.

5.7 Limitation of Effectiveness

COMIRNATY may not protect all vaccine recipients.

6 ADVERSE REACTIONS

In clinical studies with a data cut-off of March 13, 2021, the most frequently reported (>10%) adverse reactions in participants 16 through 55 years of age following any dose included... The most frequently reported (>10%) adverse reactions in participants 56 years of age and older following any dose included...

6.1 Clinical Trials Experience

Because clinical trials are conducted under widely varying conditions, adverse reaction rates observed in the clinical trials of a vaccine cannot be directly compared to rates in the clinical trials of another vaccine and may not reflect the rates observed in practice.

The safety of COMIRNATY was evaluated in participants 16 years of age and older in 2 clinical studies conducted in Germany (Study 1), United States, Argentina, Brazil, Turkey, South Africa, and Germany (Study 2). Study BNT162-01 (Study 1) was a 2-part, dose-escalation trial that enrolled 60 participants, 18 through 55 years of age and 36 participants, 56 through 85 years of age. Study C4591001 (Study 2) is a multicenter, multinational, randomized, saline placebo-controlled, observer-blind, dose-finding, vaccine candidate-selection and efficacy study that has enrolled approximately 44,047 participants (22,026 TRADENAME; 22,021 placebo) 16 years of age or older (including 378 and 376 participants 16 through 17 years of age in the vaccine and placebo groups, respectively). Study 2 also included 200 participants with confirmed stable human immunodeficiency virus (HIV) infection; HIV-positive participants are included in safety population disposition but are summarized separately in safety analyses. Confirmed stable HIV disease was defined as documented viral load <50 copies/mL and CD4 count >200 cells/mm³ within 6 months before enrollment, and on stable antiretroviral therapy for at least 6 months

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	e consistent with the Prescribing Information for other vaccines which generally do not address concurrent illness at time of vaccination, we have deleted this subsection General vaccine administration practices iderations for vaccination of individuals with acute illness, are comprehensively addressed in the ACIP's General Best Practice Guidelines for Immunization	, including
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8	r,	
	e consistent with the Prescribing Information for other intramuscularly administered vaccines which generally do not address use in individuals with increased bleeding risk, we have deleted this subsection General stration practices, including considerations for intramuscular administration in persons with increased bleeding risk, are comprehensively addressed in the ACIP's General Best Practice Guidelines for Immuniza	

At the time of the analysis of the ongoing Study 2 with a data cut-off of March 13, 2021, there were 25,651 (58.2%) participants (13,031 COMIRNATY and 12,620 placebo) 16 years of age and older followed for \geq 4 months after the second dose.

Participants 16 years and older in the reactogenicity subset were monitored for solicited local and systemic reactions and use of antipyretic medication after each vaccination in an electronic diary. Participants are being monitored for unsolicited adverse events, including serious adverse events, throughout the study [from Dose 1 through 1 month (all unsolicited adverse events) or 6 months (serious adverse events) after the last vaccination].

Demographic characteristics in Study 2 were generally similar with regard to age, gender, race, and ethnicity among participants who received COMIRNATY and those who received placebo. Overall, among the total participants who received either COMIRNATY or placebo, 50.9% were male and 49.1% were female, 82.0% were White, 9.6% were Black or African American, 25.9% were Hispanic/Latino, 4.3% were Asian, and 1.0% were American Indian or Alaska Native.

Local and Systemic Adverse Reactions Solicited in the Study 2

Table 1 and Table 2 present the frequency and severity of reported solicited local and systemic reactions, respectively, within 7 days following each dose of COMIRNATY and placebo in the subset of participants 16 through 55 years of age included in the safety population who were monitored for reactogenicity with an electronic diary.

Table 3 and Table 4 present the frequency and severity of reported solicited local and systemic reactions, respectively, within 7 days of each dose of COMIRNATY and placebo for participants 56 years of age and older.

In participants 16 to 55 years of age after receiving Dose 2, the mean duration of pain at the injection site was 2.5 days (range 1 to 70 days), for redness 2.2 days (range 1 to 9 days), and for swelling 2.1 days (range 1 to 8 days) for participants in the COMIRNATY group. In participants 56 years of age and older after receiving Dose 2, the mean duration of pain at the injection site was 2.4 days (range 1 to 36 days), for redness 3.0 days (range 1 to 34 days), and for swelling 2.6 days (range 1 to 34 days) for participants in the COMIRNATY group.

Table 1:	Study 2 – Frequency and Percentages of Participants with Solicited Local Reactions, by
	Maximum Severity, Within 7 Days After Each Dose – Participants 16 Through 55 Years of
	Age – Reactogenicity Subset of the Safety Population*

	COMIRNATY Dose 1 N ^a =2899 n ^b (%)	Placebo Dose 1 N ^a =2908 n ^b (%)	COMIRNATY Dose 2 N ^a =2682 n ^b (%)	Placebo Dose 2 N ^a =2684 n ^b (%)
Redness ^c				
Any (>2.0 cm)	156 (5.4)	28 (1.0)	151 (5.6)	18 (0.7)
Mild	113 (3.9)	19 (0.7)	90 (3.4)	12 (0.4)
Moderate	36 (1.2)	6 (0.2)	50 (1.9)	6 (0.2)
Severe	7 (0.2)	3 (0.1)	11 (0.4)	0
Swelling ^c				
Any (>2.0 cm)	184 (6.3)	16 (0.6)	183 (6.8)	5 (0.2)
Mild	124 (4.3)	6 (0.2)	110 (4.1)	3 (0.1)
Moderate	54 (1.9)	8 (0.3)	66 (2.5)	2 (0.1)

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	COMIRNATY Dose 1 N ^a =2899 n ^b (%)	Placebo Dose 1 N ^a =2908 n ^b (%)	COMIRNATY Dose 2 N ^a =2682 n ^b (%)	Placebo Dose 2 N ^a =2684 n ^b (%)
Severe	6 (0.2)	2 (0.1)	7 (0.3)	0
Pain at the injection site ^d			Л	
Any	2426 (83.7)	414 (14.2)	2101 (78.3)	312 (11.6)
Mild	1464 (50.5)	391 (13.4)	1274 (47.5)	284 (10.6)
Moderate	923 (31.8)	20 (0.7)	788 (29.4)	28 (1.0)
Severe	39 (1.3)	3 (0.1)	39 (1.5)	0

Notes: Reactions were collected in the electronic diary (e-diary) from Day 1 to Day 7 a fter vaccination.

No Grade 4 solicited local reactions were reported in participants 16 through 55 years of age.

* Randomized participants in the safety analysis population who received at least 1 dose of the study intervention.

a. N = Number of participants reporting at least 1 yes or no response for the specified reaction after the specified dose. The N for each reaction was the same, therefore, this information was included in the column header.

b. n = Number of participants with the specified reaction.

c. Mild: >2.0 to ≤ 5.0 cm; Moderate: >5.0 to ≤ 10.0 cm; Severe: >10.0 cm.

d. Mild: does not interfere with activity; Moderate: interferes with activity; Severe: prevents daily activity.

Table 2:Study 2 – Frequency and Percentages of Participants with Solicited Systemic Reactions, by
Maximum Severity, Within 7 Days After Each Dose – Participants 16 Through 55 Years of
Age – Reactogenicity Subset of the Safety Population*

	COMIRNATY	Placebo	COMIRNATY	Placebo
	Dose 1	Dose 1	Dose 2	Dose 2
	N ^a =2899	N ^a =2908	N ^a =2682	N ^a =2684
	n ^b (%)	n ^b (%)	n ^b (%)	n ^b (%)
Fever				
≥38.0°C	119 (4.1)	25 (0.9)	440 (16.4)	11 (0.4)
$\ge 38.0^{\circ}$ C to 38.4° C	86 (3.0)	16 (0.6)	254 (9.5)	5 (0.2)
$238.4^{\circ}C \text{ to } 38.9^{\circ}C$	25 (0.9)	5 (0.2)	146 (5.4)	4 (0.1)
>38.9°C to 40.0°C	8 (0.3)	4 (0.1)	39 (1.5)	2 (0.1)
>40.0°C	0	0	1 (0.0)	0
Fatigue ^c				
Any	1431 (49.4)	960 (33.0)	1649 (61.5)	614 (22.9)
Mild	760 (26.2)	570 (19.6)	558 (20.8)	317 (11.8)
Moderate	630 (21.7)	372 (12.8)	949 (35.4)	283 (10.5)
Severe	41 (1.4)	18 (0.6)	142 (5.3)	14 (0.5)
Headache ^c				
Any	1262 (43.5)	975 (33.5)	1448 (54.0)	652 (24.3)
Mild	785 (27.1)	633 (21.8)	699 (26.1)	404 (15.1)
Moderate	444 (15.3)	318 (10.9)	658 (24.5)	230 (8.6)
Severe	33 (1.1)	24 (0.8)	91 (3.4)	18 (0.7)

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Number: 2 Author: Author Date: Indeterminate
Pfizer: Please add footnotes to Tables 1-4, that participants with chronic, stable HIV disease were excluded Ģ

	COMIRNATY	Placebo	COMIRNATY	Placebo
	Dose 1	Dose 1	Dose 2	Dose 2
	N ^a =2899	N ^a =2908	N ^a =2682	N ^a =2684
	n ^b (%)	n ^b (%)	n ^b (%)	n ^b (%)
Chills ^c				
Any	479 (16.5)	199 (6.8)	1015 (37.8)	114 (4.2)
Mild	338 (11.7)	148 (5.1)	477 (17.8)	89 (3.3)
Moderate	126 (4.3)	49 (1.7)	469 (17.5)	23 (0.9)
Severe	15 (0.5)	2 (0.1)	69 (2.6)	2 (0.1)
Vomiting ^d				
Any	34 (1.2)	36 (1.2)	58 (2.2)	30(1.1)
Mild	29 (1.0)	30 (1.0)	42 (1.6)	20 (0.7)
Moderate	5 (0.2)	5 (0.2)	12 (0.4)	10 (0.4)
Severe	0	1 (0.0)	4 (0.1)	0
Diarrhea ^e			• • • •	
Any	309 (10.7)	323 (11.1)	269 (10.0)	205 (7.6)
Mild	251 (8.7)	264 (9.1)	219 (8.2)	169 (6.3)
Moderate	55 (1.9)	58 (2.0)	44 (1.6)	35 (1.3)
Severe	3 (0.1)	1 (0.0)	6 (0.2)	1 (0.0)
New or worsened musc	ele pain ^c			
Any	664 (22.9)	329 (11.3)	1055 (39.3)	237 (8.8)
Mild	353 (12.2)	231 (7.9)	441 (16.4)	150 (5.6)
Moderate	296 (10.2)	96 (3.3)	552 (20.6)	84 (3.1)
Severe	15 (0.5)	2 (0.1)	62 (2.3)	3 (0.1)
New or worsened joint	pain ^c			
Any	342 (11.8)	168 (5.8)	638 (23.8)	147 (5.5)
Mild	200 (6.9)	112 (3.9)	291 (10.9)	82 (3.1)
Moderate	137 (4.7)	55 (1.9)	320 (11.9)	61 (2.3)
Severe	5 (0.2)	1 (0.0)	27 (1.0)	4 (0.1)
Use of antipyretic or pain medication ^f	805 (27.8)	398 (13.7)	1213 (45.2)	320 (11.9)

Notes: Reactions and use of antipyretic or pain medication were collected in the electronic diary (e-diary) from Day 1 to Day 7 after each dose.

No Grade 4 solicited systemic reactions were reported in participants 16 through 55 years of age.

* Randomized participants in the safety analysis population who received at least 1 dose of the study intervention.

a. N = Number of participants reporting at least 1 yes or no response for the specified reaction after the specified dose. The N for each reaction or use of antipyretic or pain medication was the same, therefore, this information was included in the column header.

b. n = Number of participants with the specified reaction.

c. Mild: does not interfere with a ctivity; Moderate: some interference with a ctivity; Severe: prevents daily a ctivity.

d. Mild: 1 to 2 times in 24 hours; Moderate: >2 times in 24 hours; Severe: requires intravenous hydration.

e. Mild: 2 to 3 loose stools in 24 hours; Moderate: 4 to 5 loose stools in 24 hours; Severe: 6 or more loose stools in 24 hours.

f. Severity was not collected for use of antipyretic or pain medication.

Table 3:	Study 2 – Frequency and Percentages of Participants with Solicited Local Reactions, by
	Maximum Severity, Within 7 Days After Each Dose – Participants 56 Years of Age and
	Older – Reactogenicity Subset of the Safety Population*

	COMIRNATY Dose 1 N ^a =2008	Placebo Dose 1 N ^a =1989	COMIRNATY Dose 2 N ^a =1860	Placebo Dose 2 Nª=1833
	n ^b (%)	n ^b (%)	n ^b (%)	n ^b (%)
Redness ^c				
Any (>2.0 cm)	106 (5.3)	20 (1.0)	133 (7.2)	14 (0.8)
Mild	71 (3.5)	13 (0.7)	65 (3.5)	10 (0.5)
Moderate	30 (1.5)	5 (0.3)	58 (3.1)	3 (0.2)
Severe	5 (0.2)	2 (0.1)	10 (0.5)	1 (0.1)
Swelling ^c				
Any (>2.0 cm)	141 (7.0)	23 (1.2)	145 (7.8)	13 (0.7)
Mild	87 (4.3)	11 (0.6)	80 (4.3)	5 (0.3)
Moderate	52 (2.6)	12 (0.6)	61 (3.3)	7 (0.4)
Severe	2 (0.1)	0	4 (0.2)	1 (0.1)
Pain at the injection site	e ^d			
Any (>2.0 cm)	1408 (70.1)	185 (9.3)	1230 (66.1)	143 (7.8)
Mild	1108 (55.2)	177 (8.9)	873 (46.9)	138 (7.5)
Moderate	296 (14.7)	8 (0.4)	347 (18.7)	5 (0.3)
Severe	4 (0.2)	0	10 (0.5)	0

Notes: Reactions were collected in the electronic diary (e-diary) from Day 1 to Day 7 a fter vaccination.

No Grade 4 solicited local reactions were reported in participants 56 years of age and older.

* Randomized participants in the safety analysis population who received at least 1 dose of the study intervention.

a. N = Number of participants reporting at least 1 yes or no response for the specified reaction a fter the specified dose. The N for each reaction was the same, therefore, the information was included in the column header.

b. n = Number of participants with the specified reaction.

c. Mild: >2.0 to ≤ 5.0 cm; Moderate: >5.0 to ≤ 10.0 cm; Severe: >10.0 cm.

d. Mild: does not interfere with activity; Moderate: interferes with activity; Severe: prevents daily activity.

Table 4: Study 2 – Frequency and Percentages of Participants with Solicited Systemic Reactions, by Maximum Severity, Within 7 Days After Each Dose – Participants 56 Years of Age and Older – Reactogenicity Subset of the Safety Population*

	COMIRNATY Dose 1 N ^a =2008 n ^b (%)	Placebo Dose 1 N ^a =1989 n ^b (%)	COMIRNATY Dose 2 N ^a =1860 n ^b (%)	Placebo Dose 2 N ^a =1833 n ^b (%)
Fever				
≥38.0°C	26 (1.3)	8 (0.4)	219 (11.8)	4 (0.2)
\geq 38.0°C to 38.4°C	23 (1.1)	3 (0.2)	158 (8.5)	2 (0.1)
>38.4°C to 38.9°C	2 (0.1)	3 (0.2)	54 (2.9)	1 (0.1)
>38.9°C to 40.0°C	1 (0.0)	2 (0.1)	7 (0.4)	1 (0.1)
>40.0°C	0	0	0	0
Fatigue ^c				
Any	677 (33.7)	447 (22.5)	949 (51.0)	306 (16.7)
Mild	415 (20.7)	281 (14.1)	391 (21.0)	183 (10.0)
Moderate	259 (12.9)	163 (8.2)	497 (26.7)	121 (6.6)
Severe	3 (0.1)	3 (0.2)	60 (3.2)	2 (0.1)

	COMIRNATY Dose 1 N ^a =2008	Placebo Dose 1 Nª=1989	COMIRNATY Dose 2 Na=1860	Placebo Dose 2 Nª=1833
	n ^b (%)	n ^b (%)	n^{b} (%)	n ^b (%)
Grade 4	0	0	1 (0.1)	0
Headache ^c				
Any	503 (25.0)	363 (18.3)	733 (39.4)	259 (14.1)
Mild	381 (19.0)	267 (13.4)	464 (24.9)	189 (10.3)
Moderate	120 (6.0)	93 (4.7)	256 (13.8)	65 (3.5)
Severe	2 (0.1)	3 (0.2)	13 (0.7)	5 (0.3)
Chills ^c		· · ·	• • • •	
Any	130 (6.5)	69 (3.5)	435 (23.4)	57 (3.1)
Mild	102 (5.1)	49 (2.5)	229 (12.3)	45 (2.5)
Moderate	28 (1.4)	19(1.0)	185 (9.9)	12 (0.7)
Severe	0	1 (0.1)	21 (1.1)	0
Vomiting ^d				
Any	10 (0.5)	9 (0.5)	13 (0.7)	5 (0.3)
Mild	9 (0.4)	9 (0.5)	10 (0.5)	5 (0.3)
Moderate	1 (0.0)	0	1 (0.1)	0
Severe	0	0	2 (0.1)	0
Diarrhea ^e				
Any	168 (8.4)	130 (6.5)	152 (8.2)	102 (5.6)
Mild	137 (6.8)	109 (5.5)	125 (6.7)	76 (4.1)
Moderate	27 (1.3)	20(1.0)	25 (1.3)	22 (1.2)
Severe	4 (0.2)	1 (0.1)	2 (0.1)	4 (0.2)
New or worsened muscl	e pain ^c			
Any	274 (13.6)	165 (8.3)	537 (28.9)	99 (5.4)
Mild	183 (9.1)	111 (5.6)	229 (12.3)	65 (3.5)
Moderate	90 (4.5)	51 (2.6)	288 (15.5)	33 (1.8)
Severe	1 (0.0)	3 (0.2)	20 (1.1)	1 (0.1)
New or worsened joint p	ain ^c			
Any	175 (8.7)	124 (6.2)	353 (19.0)	72 (3.9)
Mild	119 (5.9)	78 (3.9)	183 (9.8)	44 (2.4)
Moderate	53 (2.6)	45 (2.3)	161 (8.7)	27 (1.5)
Severe	3 (0.1)	1 (0.1)	9 (0.5)	1 (0.1)
Use of antipyretic or pain medication ^f	382 (19.0)	224 (11.3)	688 (37.0)	170 (9.3)

Notes: Reactions and use of antipyretic or pain medication were collected in the electronic diary (e-diary) from Day 1 to Day 7 after each dose.

The only Grade 4 solicited systemic reaction reported in participants 56 years of a ge and older was fatigue.

* Randomized participants in the safety analysis population who received at least 1 dose of the study intervention.

a. N = Number of participants reporting at least 1 yes or no response for the specified reaction after the specified dose. N for each reaction or use of antipyretic or pain medication was the same, therefore was included in the column header.

b. n = Number of participants with the specified reaction.

c. Mild: does not interfere with a ctivity; Moderate: some interference with a ctivity; Severe: prevents daily a ctivity; Grade 4 reactions were defined in the clinical study protocol as emergency room visit or hospitalization for severe fatigue, severe headache, severe chills, severe muscle pain, or severe joint pain.

d. Mild: 1 to 2 times in 24 hours; Moderate: >2 times in 24 hours; Severe: requires intravenous hydration; Grade 4 emergency visit or hospitalization for severe vomiting.

COMIRNATY	Placebo	COMIRNATY	Placebo
Dose 1	Dose 1	Dose 2	Dose 2
N ^a =2008	N ^a =1989	N ^a =1860	N ^a =1833
n ^b (%)	n ^b (%)	n ^b (%)	n ^b (%)

e. Mild: 2 to 3 loose stools in 24 hours; Moderate: 4 to 5 loose stools in 24 hours; Severe: 6 or more loose stools in 24 hours; Grade 4: emergency room or hospitalization for severe diarrhea.

f. Severity was not collected for use of antipyretic or pain medication.

Table 5 and Table 6 present the frequency and severity of reported solicited local and systemic reactions, respectively, within 7 days of each dose of COMIRNATY and placebo for participants 16 years of age and older with confirmed stable HIV infection.

Table 5:Study 2 – Frequency and Percentages of Participants with Solicited Local Reactions, by
Maximum Severity, Within 7 Days After Each Dose – HIV-Positive Participants 16 Years of
Age and Older – Reactogenicity Subset of the Safety Population*

	COMIRNATY	Placebo	COMIRNATY	Placebo
	Dose 1	Dose 1	Dose 2	Dose 2
	N ^a =54	N ^a =56	N ^a =60	N ^a =62
	n ^b (%)	n ^b (%)	n ^b (%)	n ^b (%)
Redness ^c				
Any (>2.0 cm)	2 (3.7)	3 (5.4)	4 (6.7)	1 (1.6)
Mild	2 (3.7)	1 (1.8)	3 (5.0)	1 (1.6)
Moderate	0	0	1 (1.7)	0
Severe	0	2 (3.6)	0	0
Swelling ^c				
Any (>2.0 cm)	3 (5.6)	1 (1.8)	5 (8.3)	0
Mild	2 (3.7)	0	2 (3.3)	0
Moderate	1 (1.9)	0	3 (5.0)	0
Severe	0	1 (1.8)	0	0
Pain at the injection sited	1			
Any	34 (63.0)	9 (16.1)	32 (53.3)	5 (8.1)
Mild	26 (48.1)	8 (14.3)	22 (36.7)	5 (8.1)
Moderate	8 (14.8)	1 (1.8)	9 (15.0)	0
Severe	0	0	1 (1.7)	0

Notes: Reactions were collected in the electronic diary (e-diary) from Day 1 to Day 7 a fter vaccination.

No Grade 4 solicited local reactions were reported in HIV-positive participants 16 years of age and older.

* Randomized participants in the safety analysis population who received at least 1 dose of the study intervention.

a. N = Number of participants reporting at least 1 yes or no response for the specified reaction a fter the specified dose. The N for each reaction was the same, therefore, this information was included in the column header.

b. n = Number of participants with the specified reaction.

c. Mild: ≥ 2.0 to ≤ 5.0 cm; Moderate: ≥ 5.0 to ≤ 10.0 cm; Severe: ≥ 10.0 cm.

d. Mild: does not interfere with activity; Moderate: interferes with activity; Severe: prevents daily activity.

Table 6:Study 2 – Frequency and Percentages of Participants with Solicited Systemic Reactions, by
Maximum Severity, Within 7 Days After Each Dose – HIV-Positive Participants 16 Years of
Age and Older – Reactogenicity Subset of the Safety Population*

	COMIRNATY Dose 1 N ^a =54 n ^b (%)	Placebo Dose 1 N ^a =56 n ^b (%)	COMIRNATY Dose 2 N ^a =60 n ^b (%)	Placebo Dose 2 N ^a =62 n ^b (%)
Fever	II [*] (70)	II [*] (70)		II [*] (70)
≥38.0°C	1 (1.9)	4 (7.1)	9 (15.0)	5 (8.1)
$\geq 38.0^{\circ}$ C to 38.4° C	$\frac{1(1.9)}{1(1.9)}$	$\frac{4(7.1)}{2(3.6)}$	4 (6.7)	5 (8.1)
>38.4°C to 38.9°C	0	0	4 (6.7)	0
>38.9°C to 40.0°C	0	2 (3.6)	1 (1.7)	0
>40.0°C	0	0	0	0
Fatigue ^c	0	0	Ŭ	0
Any	22 (40.7)	15 (26.8)	24 (40.0)	12 (19.4)
Mild	15 (27.8)	9(16.1)	12 (20.0)	5 (8.1)
Moderate	7 (13.0)	5 (8.9)	9(15.0)	7 (11.3)
Severe	0	1 (1.8)	3 (5.0)	0
Headache ^c	v	• (••0)	5 (5.0)	v
Any	11 (20.4)	18 (32.1)	18 (30.0)	12 (19.4)
Mild	7 (13.0)	10 (17.9)	8 (13.3)	8 (12.9)
Moderate	4 (7.4)	7 (12.5)	8 (13.3)	4 (6.5)
Severe	0	1 (1.8)	2 (3.3)	0
Chills ^c	,	1 (110)		<u> </u>
Any	6(11.1)	5 (8.9)	14 (23.3)	4 (6.5)
Mild	5 (9.3)	4 (7.1)	5 (8.3)	3 (4.8)
Moderate	1 (1.9)	1 (1.8)	8 (13.3)	1 (1.6)
Severe	0	0	1 (1.7)	0
Vomiting ^d	I.			
Any	1 (1.9)	3 (5.4)	2 (3.3)	2 (3.2)
Mild	1 (1.9)	1 (1.8)	1 (1.7)	1 (1.6)
Moderate	0	0	1 (1.7)	1 (1.6)
Severe	0	2 (3.6)	0	0
Diarrhea ^e				
Any	5 (9.3)	8 (14.3)	4 (6.7)	9 (14.5)
Mild	5 (9.3)	6 (10.7)	1 (1.7)	6 (9.7)
Moderate	0	1 (1.8)	2 (3.3)	3 (4.8)
Severe	0	1 (1.8)	1 (1.7)	0
New or worsened muscl	le pain ^c			
Any	9 (16.7)	10 (17.9)	10 (16.7)	5 (8.1)
Mild	7 (13.0)	7 (12.5)	5 (8.3)	1 (1.6)
Moderate	2 (3.7)	3 (5.4)	5 (8.3)	4 (6.5)
Severe	0	0	0	0
New or worsened joint p				
Any	5 (9.3)	7 (12.5)	10 (16.7)	5 (8.1)
Mild	5 (9.3)	4 (7.1)	4 (6.7)	1 (1.6)
Moderate	0	3 (5.4)	6 (10.0)	4 (6.5)
Severe	0	0	0	0
Use of antipyretic or pain medication ^f	7 (13.0)	8 (14.3)	16 (26.7)	7 (11.3)

COMIRNATY	Placebo	COMIRNATY	Placebo
Dose 1	Dose 1	Dose 2	Dose 2
N ^a =54	N ^a =56	N ^a =60	N ^a =62
n ^b (%)	n ^b (%)	n ^b (%)	n ^b (%)

Notes: Reactions and use of antipyretic or pain medication were collected in the electronic diary (e-diary) from Day 1 to Day 7 after each dose.

No Grade 4 solicited systemic reactions were reported in HIV-positive participants 16 years of a ge and older.

* Randomized participants in the safety analysis population who received at least 1 dose of the study intervention.

- a. N = Number of participants reporting at least 1 yes or no response for the specified reaction after the specified dose. The N for each event or use of antipyretic or pain medication was the same, therefore, this information was included in the column header.
- b. n = Number of participants with the specified reaction.
- c. Mild: does not interfere with activity; Moderate: some interference with activity; Severe: prevents daily activity.
- d. Mild: 1 to 2 times in 24 hours; Moderate: >2 times in 24 hours; Severe: requires intravenous hydration.
- e. Mild: 2 to 3 loose stools in 24 hours; Moderate: 4 to 5 loose stools in 24 hours; Severe: 6 or more loose stools in 24 hours.
- f. Severity was not collected for use of antipyretic or pain medication.

Unsolicited Adverse Events

Upon issuance of the EUA for COMIRNATY, participants were unblinded to offer placebo participants COMIRNATY. Adverse events are reported as incidence rates per 100 person-years to account for the variable exposure since unblinding began in a phased manner for participants in the study. Adverse events detailed below for participants 16 years of age and older are for the placebo-controlled blinded follow-up period up to the participants' unblinding dates.

Serious Adverse Events

In Study 2, among participants 16 through 55 years of age who had received at least 1 dose of vaccine or placebo (COMIRNATY =12,995; placebo = 13,026), serious adverse events from Dose 1 up to the participant unblinding date in ongoing follow-up were reported by 103 (0.8%) COMIRNATY recipients and 117 (0.9%) placebo recipients. In a similar analysis, in participants 56 years of age and older (COMIRNATY =8931, placebo = 8895), serious adverse events were reported by 165 (1.8%) COMIRNATY recipients and 151 (1.7%) placebo recipients who received at least 1 dose of COMIRNATY or placebo, respectively. In these analyses, 58.2% of study participants had at least 4 months of follow-up after Dose 2. Among participants with confirmed stable HIV infection serious adverse events from Dose 1 up to the participant unblinding date in ongoing follow-up were reported by 2 (2%) COMIRNATY recipients and 2 (2%) placebo recipients.

There were no notable patterns between treatment groups for specific categories of serious adverse events (including neurologic, neuro-inflammatory, and thrombotic events) that would suggest a causal relationship to COMIRNATY.

Non-Serious Adverse Events

Overall in Study 2 in which 12,995 participants 16 through 55 years of age received COMIRNATY and 13,026 participants received placebo, all events, which include non-serious adverse events from Dose 1 up to the participant unblinding date in ongoing follow-up were reported by 4396 (33.8%) participants who received COMIRNATY and 2136 (16.4%) participants in the placebo group, for participants who received at least 1 dose. In a similar analysis, in participants 56 years of age and older (COMIRNATY = 8931, placebo = 8895), all events, which include nonserious adverse events were reported by 2551 (28.6%) participants who received COMIRNATY and 1432 (16.1%) participants in the placebo group, for participants who received at least 1 dose. Among participants with confirmed stable HIV infection, all events, which include non-serious adverse

events from Dose 1 up to the participant unblinding date in ongoing followup were reported by 29 (29%) participants who received COMIRNATY and 15 (15%) participants in the placebo group, for participants who received at least 1 dose.

In these analyses, 58.2% of study participants had at least 4 months of follow-up after Dose 2. The higher frequency of reported unsolicited non-serious adverse events among COMIRNATY recipients (inclusive of stable HIV infection) compared to placebo recipients was primarily attributed to local and systemic adverse events reported during the first 7 days following each dose of vaccine that are consistent with adverse reactions solicited among participants in the reactogenicity subset and presented in Table 3 and Table 4.

From Dose 1 up to the participant unblinding date, reports of lymphadenopathy were imbalanced with notably more cases in the COMIRNATY group (87) vs. the placebo group (8).

Throughout the placebo-controlled safety follow-up period to date, Bell's palsy (facial paralysis) was reported by ‡participants in the COMIRNATY group and 2 participants in the placebo group. Onset of facial paralysis was Day 37 after Dose 1 (participant did not receive Dose 2) and Days 3, 9, and 48 after Dose 2. In the placebo group the onset of facial paralysis was Day 32 and Day 102. Currently available information is insufficient to determine a causal ‡lationship with the vaccine. There were no other notable patterns or numerical imbalances between treatment groups for specific categories of non-serious adverse events (including other neurologic or neuro-inflammatory, and thrombotic events) that would suggest a causal relationship to COMIRNATY.

6.2 Postmarketing Experience

The following adverse reactions have been identified during postmarketing use of COMIRNATY, including under Emergency Use Authorization. Because these reactions are reported voluntarily from a population of uncertain size, it is not always possible to reliably estimate their frequency or establish a causal relationship to vaccine exposure.

Cardiac Disorders: myocarditis, pericarditis

Gastrointestinal Disorders: diarrhea, vomiting

Immune System Disorders: severe allergic reactions, including anaphylaxis, and other hypersensitivity reactions (e.g., rash, pruritus, urticaria, angioedema)

Musculoskeletal and Connective Tissue Disorders: pain in extremity (arm)

8 USE IN SPECIFIC POPULATIONS

8.1 Pregnancy

Risk Summary

All pregnancies have a risk of birth defect, loss, or other adverse outcomes. In the US general population, the estimated background risk of major birth defects and miscarriage in clinically recognized pregnancies is 2% to 4% and 15% to 20%, respectively. Available data on COMIRNATY administered to pregnant women are insufficient to inform vaccine-associated risks in pregnancy.

A developmental toxicity study has been performed in female rats administered the equivalent of a single human dose of COMIRNATY on four occasions, twice prior to mating and twice during gestation. These studies revealed no evidence of harm to the fetus due to the vaccine *(see Animal Data)*.

Number: 1 Author: Author Date: Indeterminate Pfizer: Please describe local and systemic reactogenicity for the stable, chronic HIV+ participants in text to indicate that the frequencies of local and solicited reactions were generally the same or less frequent as compared to the overall safety population described in Tables 1-4

Number: 2 Author: Author Date: Indeterminate Pfizer: Please add a subsection to provide a description of the safety evaluation for the original BNT162b2 recipients who have at least 6 months of follow up post dose 2, through blinded and unblinded time periods

Number: 3 Author: Author Date: Indeterminate Pfizer: Please delete this sentence and revise this introduction to describe the variable exposure caused by the unblinding that occurred in a phased manner, to include the actual difference in duration of follow up between groups We will then report the following events as frequencies n/N (%) rather than incidence rates, as revised below

Data

Animal Data

In a developmental toxicity study, 0.06 mL of a vaccine formulation containing the same quantity of nucleoside-modified messenger ribonucleic acid (mRNA) (30 mcg) and other ingredients included in a single human dose of COMIRNATY was administered to female rats by the intramuscular route on 4 occasions: 21 and 14 days prior to mating, and on gestation days 9 and 20. No vaccine-related adverse effects on female fertility, fetal development, or postnatal development were reported in the study.

8.2 Lactation

Risk Summary

It is not known whether COMIRNATY is excreted in human milk. Data are not available to assess the effects of COMIRNATY on the breastfed infant or on milk production/excretion. The developmental and health benefits of breastfeeding should be considered along with the mother's clinical need for COMIRNATY and any potential adverse effects on the breastfed child from COMIRNATY or from the underlying maternal condition. For preventive vaccines, the underlying maternal condition is susceptibility to disease prevented by the vaccine.

8.4 Pediatric Use

Safety and effectiveness of COMIRNATY in individuals 16 through 17 years of age is based on safety and effectiveness data in this age group and in adults [see Adverse Reactions (6) and Clinical Studies (14.1)].

The safety and effectiveness of COMIRNATY in individuals younger than 16 years of age have not been established.

8.5 Geriatric Use

Of the total number of COMIRNATY recipients in Study 2 as of March 13, 2021 (N = 22,026), 20.7% (n = 4552) were 65 years of age and older and 4.2% (n = 925) were 75 years of age and older *[see Clinical Studies (14.1)]*. No overall differences in safety or effectiveness were observed between these recipients and younger recipients.

11 DESCRIPTION

COMIRNATY (COVID-19 Vaccine, mRNA) is a sterile suspension for injection for intramuscular use. COMIRNATY is supplied as a frozen suspension in multiple dose vials; each vial must be diluted with 1.8 mL of sterile 0.9% Sodium Chloride Injection, USP prior to use to form the vaccine. Each dose of COMIRNATY contains 30 mcg of a nucleoside-modified messenger RNA (mRNA) encoding the viral spike (S) glycoprotein of SARS-CoV-2.

Each dose of the COMIRNATY also includes the following ingredients: lipids (0.43 mg ((4-hydroxybutyl)azanediyl)bis(hexane-6,1-diyl)bis(2-hexyldecanoate), 0.05 mg 2-(polyethylene glycol 2000)-N,N-ditetradecylacetamide, 0.09 mg 1,2-distearoyl-sn-glycero-3-phosphocholine, and 0.2 mg cholesterol), 0.01 mg potassium chloride, 0.01 mg monobasic potassium phosphate, 0.36 mg sodium chloride,

	Number: 1	Author: Author Date: Indeterminate
7	Pfizer, This subsectio	n should focus on adverse reactions not observed in clinical trials. Please provide a rationale for inclusion of diarrhea, vomiting and pain in extremity (arm)
	Number: 2	Author: Author Date: Indeterminate
9	Pfizer, Please add the	PTs for "Dizziness" and "Dyspnea" and their corresponding SOCs to section 6 2
	Number: 3	Author: Author Date: Indeterminate
-	Pfizer.	

Prizer, Please include information regarding Pregnancy Exposure Registry for COMIRNATY to monitor pregnancy outcomes in women exposed to COMIRNATY during pregnancy Please list the telephone number for the health care providers to call and register women who receive COMIRNATY during pregnancy 0.07 mg dibasic sodium phosphate dihydrate, and 6 mg sucrose. The diluent (0.9% Sodium Chloride Injection, USP) contributes an additional 2.16 mg sodium chloride per dose.

COMIRNATY does not contain preservative.

The vial stoppers are not made with natural rubber latex.

12 CLINICAL PHARMACOLOGY

12.1 Mechanism of Action

The nucleoside-modified mRNA in COMIRNATY is formulated in lipid particles, which enable delivery of the mRNA into host cells to allow expression of the SARS-CoV-2 S antigen. The vaccine elicits an immune response to the S antigen, which protects against COVID-19.

13 NONCLINICAL TOXICOLOGY

13.1 Carcinogenesis, Mutagenesis, Impairment of Fertility

COMIRNATY has not been evaluated for the potential to cause carcinogenicity, genotoxicity, or impairment of male fertility. In a developmental toxicity study in rats with COMIRNATY. There were no vaccine -related effects on female fertility *[see Use in Special Populations (8.1)]*.

14 CLINICAL STUDIES

Efficacy in Participants 16 Years of Age and Older

Study 2 is a multicenter, multinational, randomized, placebo-controlled, observer-blind, dose-finding, vaccine candidate-selection, and efficacy study in participants 12 years of age and older. Randomization was stratified by age: 12 through 15 years of age, 16 through 55 years of age, or 56 years of age and older, with a minimum of 40% of participants in the \geq 56-year stratum. The study excluded participants who were immunocompromised and those who had previous clinical or microbiological diagnosis of COVID-19. Participants with preexisting stable disease, defined as disease not requiring significant change in therapy or hospitalization for worsening disease during the 6 weeks before enrollment, were included as were participants with known stable infection with HIV, hepatitis C virus (HCV), or hepatitis B virus (HBV).

In Study 2, based on data accrued through March 13, 2021, approximately 44,000 participants 16 years of age and older were randomized equally and received 2 doses of COMIRNATY or placebo. Participants are planned to be followed for up to 24 months, for assessments of safety and efficacy against COVID-19.

The population for the analysis of the primary efficacy endpoint included, 36,621 participants 12 years of age and older (18,242 in the COMIRNATY group and 18,379 in the placebo group) who did not have evidence of prior infection with SARS-CoV-2 through 7 days after the second dose. Table 7 presents the specific demographic characteristics in the studied population.

	COMIRNATY	Placebo
	(N=18,242)	(N=18,379)
	n (%)	n (%)
Sex		
Male	9318 (51.1)	9225 (50.2)
Female	8924 (48.9)	9154 (49.8)
Age (years)		
Mean (SD)	50.6 (15.70)	50.4 (15.81)
Median	52.0	52.0
Min, max	(12, 89)	(12,91)
Age group		
\geq 12 through 15 years	46 (0.3)	42 (0.2)
\geq 16 through 64 years	14,216 (77.9)	14,299 (77.8)
\geq 65 through 74 years	3176 (17.4)	3226 (17.6)
\geq 75 years	804 (4.4)	812 (4.4)
Race		
White	15,110 (82.8)	15,301 (83.3)
Black or African American	1617 (8.9)	1617 (8.8)
American Indian or Alaska Native	118 (0.6)	106 (0.6)
Asian	815 (4.5)	810 (4.4)
Native Hawaiian or other Pacific Islander	48 (0.3)	29 (0.2)
Other ^b	534 (2.9)	516 (2.8)
Ethnicity		
Hispanic or Latino	4886 (26.8)	4857 (26.4)
Not Hispanic or Latino	13,253 (72.7)	13,412 (73.0)
Not reported	103 (0.6)	110 (0.6)
Comorbidities ^c		
Yes	8432 (46.2)	8450 (46.0)
No	9810 (53.8)	9929 (54.0)

Table 7: Demographics (Population For the Primary Efficacy Endpoint)^a

a. All eligible randomized participants who receive all vaccination(s) as randomized within the predefined window, have no other important protocol deviations as determined by the clinician, and have no evidence of SARS-CoV-2 infection prior to 7 days after Dose 2.

b. Includes multiracial and not reported.

c. Number of participants who have 1 or more comorbidities that increase the risk of severe COVID-19 disease:

- Chronic lung disease (e.g., emphysema and chronic bronchitis, idiopathic pulmonary fibrosis, and cystic fibrosis) or moderate to severe asthma
- Significant cardiac disease (e.g., heart failure, coronary artery disease, congenital heart disease, cardiomyopathies, and pulmonary hypertension)
- Obesity (body mass index \geq 30 kg/m²)
- Diabetes (Type 1, Type 2, or gestational)
- Liver disease
- Human Immunodeficiency Virus (HIV) infection (not included in the efficacy evaluation)

Efficacy Against COVID-19

The population in the protocol pre-specified primary efficacy analysis included all participants 12 years of age and older who had been enrolled from July 27, 2020, and followed for the development of COVID-19 through November 14, 2020. Participants 18 through 55 years of age and 56 years of age and older began enrollment

from July 27, 2020, 16 through 17 years of age began enrollment from September 16, 2020, and 12 through 15 years of age began enrollment from October 15, 2020.

The vaccine efficacy information is presented in Table 8.

Table 8:	Vaccine Efficacy – First COVID-19 Occurrence From 7 Days After Dose 2, by Age
	Subgroup – Participants Without Evidence of Infection and Participants With or Without
	Evidence of Infection Prior to 7 Days After Dose 2 – Evaluable Efficacy (7 Days) Population

	occurrence from 7 days after	Dose 2 in participants witho	
		-2 infection*	
	COMIRNATY	Placebo	
	N ^a =18,198	N ^a =18,325	
	Cases	Cases	
	n1 ^b	n1 ^b	Vaccine Efficacy %
Subgroup	Surveillance Time ^c (n2 ^d)	Surveillance Time ^c (n2 ^d)	(95% CI)
	8	162	95.0
All participants ^e	2.214 (17,411)	2.222 (17,511)	$(90.3, 97.6)^{f}$
	7	143	95.1
16 to 64 years	1.706 (13,549)	1.710 (13,618)	(89.6, 98.1) ^g
	1	19	94.7
65 years and older	0.508 (3848)	0.511 (3880)	(66.7, 99.9) ^g
	1	14	92.9
65 to 74 years	0.406 (3074)	0.406 (3095)	(53.1, 99.8) ^g
	0	5	100.0
75 years and older	0.102 (774)	0.106 (785)	(-13.1, 100.0) ^g
First COVID-19 occur	rrence from 7 days after Dose		ithout* evidence of prio
		7-2 infection	
	COMIRNATY	Placebo	
	N ^a =19,965	N ^a =20,172	
	Cases	Cases	
	n1 ^b	n1 ^b	Vaccine Efficacy %
Subgroup	Surveillance Time ^c (n2 ^d)	Surveillance Time ^c (n2 ^d)	(95% CI)
	9	169	94.6
All participants ^e	2.332 (18,559)	2.345 (18,708)	$(89.9, 97.3)^{\rm f}$
	8	150	94.6
16 to 64 years	1.802 (14,501)	1.814 (14,627)	$(89.1, 97.7)^{g}$
	1	19	94.7
65 years and older	0.530 (4044)	0.532 (4067)	(66.8, 99.9) ^g
	1	14	92.9
65 to 74 years	0.424 (3239)	0.423 (3255)	(53.2, 99.8) ^g
	0	5	100.0
75 years and older	0.106 (805)	0.109 (812)	(-12.1, 100.0) ^g

Note: Confirmed cases were determined by Reverse Transcription-Polymerase Chain Reaction (RT-PCR) and at least 1 symptom consistent with COVID-19 (symptoms included: fever; new or increased cough; new or increased shortness of breath; chills; new or increased muscle pain; new loss of taste or smell; sore throat; diarrhea; vomiting).

* Participants who had no evidence of past SARS-CoV-2 infection (i.e., N-binding antibody [serum] negative at Visit 1 and SARS-CoV-2 not detected by NAAT [nasal swab] at Visits 1 and 2), and had negative NAAT (nasal swab) at any unscheduled visit prior to 7 days after Dose 2 were included in the analysis.

a. N = Number of participants in the specified group.

- b. n1 = Number of participants meeting the endpoint definition.
- c. Total surveillance time in 1000 person-years for the given endpoint across all participants within each group at risk for the endpoint. Time period for COVID-19 case accrual is from 7 days after Dose 2 to the end of the surveillance period. d. En2 = Number of participants at risk for the endpoint.
- e. No confirmed cases were identified in participants 12 to 15 years of age.
- f. Two-sided credible interval for vaccine efficacy was calculated using a beta-binomial model with a beta (0.700102, 1) prior for $\theta = r(1-VE)/(1+r(1-VE))$, where r is the ratio of surveillance time in the active vaccine group over that in the placebo group.
- g. Two-sided confidence interval (CI) for vaccine efficacy is derived based on the Clopper and Pearson method a djusted to the surveillance time.

The population for the updated vaccine efficacy analysis included participants 16 years of age and older who had been enrolled from July 27, 2020 and followed for the development of COVID-19 during blinded placebocontrolled follow-up through March 13, 2020, representing up to 6 months of follow up after Dose 2.

The updated vaccine efficacy information is presented in Table 9.

Table 9:Vaccine Efficacy – First COVID-19 Occurrence From 7 Days After Dose 2, by Age
Subgroup – Participants Without Evidence of Infection and Participants With or Without
Evidence of Infection Prior to 7 Days After Dose 2 – Evaluable Efficacy (7 Days) Population
During the Placebo-Controlled Follow-up Period

v		idence of prior
COMIRNATY N ^a =20,998 Cases n1 ^b	Placebo Nª=21,096 Cases n1 ^b	Vaccine Efficacy %
		(95% CI ^e)
77 6.247 (20,712)	850 6.003 (20,713)	91.3 (89.0, 93.2)
70 4.859 (15,519)	710 4.654 (15,515)	90.6 (87.9, 92.7)
7	124	94.5 (88.3, 97.8)
		t* evidence of prior
N ^a =22,166	N ^a =22,320	
n1 ^b	n1 ^b	Vaccine Efficacy %
		(95% CI°) 91.1
6.509 (21,642)	6.274 (21,689)	(88.8, 93.0)
	727	90.2
5.073 (16,218)	4.879 (16,269)	(87.6, 92.4)
	SARS-CoV-2 inf COMIRNATY Nª=20,998 Cases Cases n1 ^b Surveillance Time ^c (n2 ^d) 77 6.247 (20,712) 70 4.859 (15,519) 7 1.233 (4192) Price from 7 days after Dose 2 in SARS-CoV-2 in COMIRNATY SARS-CoV-2 in SARS-COV-2	N ^a =20,998 Placebo Cases $n1^b$ $n1^b$ Surveillance Time ^c (n2 ^d) Surveillance Time ^c (n2 ^d) 77 850 6.247 (20,712) 6.003 (20,713) 70 710 4.859 (15,519) 4.654 (15,515) 7 124 1.233 (4192) 1.202 (4226) ence from 7 days after Dose 2 in participants with or without SARS-CoV-2 infection COMIRNATY Placebo N ^a =22,166 N ^a =22,320 Cases Cases n1 ^b n1 ^b Surveillance Time ^c (n2 ^d) Surveillance Time ^c (n2 ^d) 81 873 6.509 (21,642) 6.274 (21,689)

Number: 1 Author: Author Date: Indeterminate Pfizer: Please delete this table and describe demographics of the efficacy population using the March 2021 data cutoff, to also include percentages of the participants in the age group >65 years, and those with comorbidities (with a definition)

Note: Confirmed cases were determi	ned by Reverse Transcription-Polyme	raseChainReaction(RT-PCR)an	nd a t least 1 symptom
consistent with COVID 10 (sympton	ns included fever new or increased of	ough : new or increased shortness (fbreath chills new or

consistent with COVID-19 (symptoms included: fever; new or increased cough; new or increased shortness of breath; chills; new or increased muscle pain; new loss of taste or smell; sore throat; diarrhea; vomiting).

- * Participants who had no evidence of past SARS-CoV-2 infection (i.e., N-binding antibody [serum] negative at Visit 1 and SARS-CoV-2 not detected by NAAT [na sal swab] at Visits 1 and 2), and had negative NAAT (nasal swab) at any unscheduled visit prior to 7 days after Dose 2 were included in the analysis.
- a. N = Number of participants in the specified group.
- b. n1 = Number of participants meeting the endpoint definition.
- c. Total surveillance time in 1000 person-years for the given endpoint across all participants within each group at risk for the endpoint. Time period for COVID-19 case a cerual is from 7 days after Dose 2 to the end of the surveillance period.
- d. n2 = Number of participants a trisk for the endpoint.
- e. Diwo-sided confidence interval (CI) for vaccine efficacy is derived based on the Clopper and Pearson method a djusted to the surveillance time.
- f. Included confirmed cases in participants 12 through 15 years of a ge: 0 in the COMIRNATY group (both <u>without</u> and <u>with or without</u> evidence of prior SARS-CoV-2 infection); 16 and 18 in the placebo group (<u>without</u> and <u>with or without</u> evidence of prior SARS-CoV-2 infection).

The updated subgroup analyses of vaccine efficacy by demographic characteristics are presented in Table 10 and Table 11.

Evaluable Efficacy (7 Days) Population During the Placebo-Controlled Follow-up Period				
	COMIRNATY	Placebo		
	N ^a =20,998	N ^a =21,096		
	Cases	Cases		
	n1 ^b	n1 ^b	Vaccine Efficacy %	
Subgroup	Surveillance Time ^c (n2 ^d)	Surveillance Time ^c (n2 ^d)	(95% CI) ^e	
Sex	•	•		
	42	399	90.1	
Male	3.246 (10,637)	3.047 (10,433)	(86.4, 93.0)	
	35	451	92.4	
Female	3.001 (10,075)	2.956 (10,280)	(89.2, 94.7)	
Ethnicity	•	• • •		
	29	241	88.5	
Hispanic or Latino	1.786 (5161)	1.711 (5120)	(83.0, 92.4)	
	47	609	92.6	
Not Hispanic or Latino	4.429 (15,449)	4.259 (15,484)	(90.0, 94.6)	
Race	· · · · · · · · · · · · · · · · · · ·	• • • •		
	4	48	91.9	
Black or African American	0.545 (1737)	0.527 (1737)	(78.0, 97.9)	
	67	747	91.3	
White	5.208 (17,186)	5.026 (17,256)	(88.9, 93.4)	
	6	55	90.0	
All others ^f	0.494 (1789)	0.451 (1720)	(76.9, 96.5)	

Table 10: Vaccine Efficacy – First COVID-19 Occurrence From 7 Days After Dose 2 – Participants Without Evidence of Infection* Prior to 7 Days After Dose 2 by Demographic Characteristics – Image: State of State

Author: Author Date: Indeterminate Number: 1

Pfizer: Please describe the primary efficacy analysis in text as outlined below and remove Table 8

For participants without evidence of SARS-CoV-2 infection prior to 7 days after Dose 2, VE against confirmed COVID-19 occurring at least 7 days after Dose 2 was 95 0% The case split was 8 COVID-19 cases in the BNT162b2 group compared to 162 COVID-19 cases in the placebo group. The 95% credible interval for the vaccine efficacy was 90 3% to 97 6%, indicating that the true VE is at least 90 3% with a 97 5% probability, which met the pre-

Number: 2 Author: Author Date: Indeterminate Pfizer: Please insert a sentence describing the percentage of participants with blinded placebo-controlled follow up ≥4months, to mirror the description of the Safety population

Number: 3 Author: Author: Author Date: Indeterminate Pfizer: Please revise Updated VE tables to display VE for participants 16 years of age and older (exclude participants 12-15 years of age) for only confirmed cases that we agree upon (exclude participant 10031167 from all analyses, as previously communicated)

Please also delete the last 2 rows of each portion of the table: 65 through 74 years and 75 years and older

Subgroup	COMIRNATY N ^a =20,998 Cases n1 ^b Surveillance Time ^c (n2 ^d)	Placebo N ^a =21,096 Cases n1 ^b Surveillance Time ^c (n2 ^d)	Vaccine Efficacy % (95% CI) ^e
Country			
	15	108	86.5
Argentina	1.012 (2600)	0.986 (2586)	(76.7, 92.7)
	12	80	86.2
Brazil	0.406 (1311)	0.374 (1293)	(74.5, 93.1)
	0	1	100.0
Germany	0.047 (236)	0.048 (242)	(-3874.2, 100.0)
	0	9	100.0
South Africa	0.080 (291)	0.074 (276)	(53.5, 100.0)
	0	5	100.0
Turkey	0.027 (228)	0.025 (222)	(-0.1, 100.0)
	50	647	92.6
United States	4.674 (16,046)	4.497 (16,094)	(90.1, 94.5)

Notes: Confirmed cases were determined by Reverse Transcription-Polymerase Chain Reaction (RT-PCR) and at least 1 symptom consistent with COVID-19 (symptoms included: fever; new or increased cough; new or increased shortness of breath; chills; new or increased muscle pain; new loss of taste or smell; sore throat; diarrhea; vomiting).

Included confirmed cases in participants 12 through 15 years of a ge: 0 in the COMIRNATY group; 16 in the placebo group.

* Participants who had no evidence of past SARS-CoV-2 infection (i.e., N-binding antibody [serum] negative at Visit 1 and SARS-CoV-2 not detected by NAAT [na sal swab] at Visits 1 and 2), and had negative NAAT (nasal swab) at any unscheduled visit prior to 7 days after Dose 2 were included in the analysis.

a. N = Number of participants in the specified group.

- b. n1 = Number of participants meeting the endpoint definition.
- c. Total surveillance time in 1000 person-years for the given endpoint across all participants within each group a trisk for the endpoint. Time period for COVID-19 case a cerual is from 7 days a fter Dose 2 to the end of the surveillance period.
- d. n2 = Number of participants at risk for the endpoint.
- e. Two-sided confidence interval (CI) for vaccine efficacy is derived based on the Clopper and Pearson method adjusted to the surveillance time.
- f. All others = American Indian or Alaska Native, Asian, Native Hawaiian or other Pacific Islander, multiracial, and not reported race categories.

Table 11: Vaccine Efficacy– First COVID-19 Occurrence From 7 Days After Dose 2 – Participants With or Without* Evidence of Infection Prior to 7 Days After Dose 2 by Demographic Characteristics – Evaluable Efficacy (7 Days) Population During the Placebo-Controlled Follow-up Period

Subgroup	COMIRNATY N ^a =22,166 Cases n1 ^b Surveillance Time ^c (n2 ^d)	Placebo N ^a =22,320 Cases n1 ^b Surveillance Time ^c (n2 ^d)	Vaccine Efficacy % (95% CI) ^e
Sex	44	411	89.9
Male	3.376 (11,103)	3.181 (10,920)	(86.2, 92.8)
	37	462	92.1
Female	3.133 (10,539)	3.093 (10,769)	(88.9, 94.5)

Number: 1 Author: Author Date: Indeterminate
Pfizer: This footnote should be removed based on our comment above to exclude all participants 12-15 years of age from this analysis

	COMIRNATY	Placebo N ^a =22,320	
	N ^a =22,166	Cases n1 ^b	
	Cases n1 ^b	n1° Surveillance Time ^c	Vaccine Efficacy %
Subgroup	Surveillance Time ^c (n2 ^d)	(n2 ^d)	(95% CI) ^e
Ethnicity	Surveinance Time (12)	(112)	(5570 CI)
	32	245	87.4
Hispanic or Latino	1.862 (5408)	1.794 (5391)	(81.8, 91.6)
	48	628	92.6
Not Hispanic or Latino	4.615 (16,128)	4.445 (16,186)	(90.1, 94.6)
Race	· · · · · ·		
	4	49	92.0
Black or African American	0.611 (1958)	0.601 (1985)	(78.1, 97.9)
	69	768	91.3
White	5.379 (17,801)	5.191 (17,880)	(88.9, 93.3)
	8	56	86.8
All others ^f	0.519 (1883)	0.481 (1824)	(72.1, 94.5)
Country			
	16	110	85.7
Argentina	1.033 (2655)	1.017 (2670)	(75.7, 92.1)
	14	82	84.2
Brazil	0.441 (1419)	0.408 (1401)	(71.9, 91.7)
	0	1	100.0
Germany	0.047 (237)	0.048 (243)	(-3868.6,100.0)
	0	10	100.0
South Africa	0.099 (358)	0.096 (358)	(56.6, 100.0)
	0	6	100.0
Turkey	0.029 (238)	0.026 (232)	(22.2, 100.0)
	51	664	92.6
United States	4.861 (16,735)	4.678 (16,785)	(90.2, 94.6)

Notes: Confirmed cases were determined by Reverse Transcription-Polymerase Chain Reaction (RT-PCR) and at least 1 symptom consistent with COVID-19 (symptoms included: fever; new or increased cough; new or increased shortness of breath; chills; new or increased muscle pain; new loss of taste or smell; sore throat; diarrhea; vomiting).

Included confirmed cases in participants 12 through 15 years of a ge: 0 in the COMIRNATY group; 18 in the placebo group. * Participants who had no evidence of past SARS-CoV-2 infection (i.e., N-binding antibody [serum] negative at Visit 1 and

- SARS-CoV-2 not detected by NAAT [na sal swab] at Visits 1 and 2), and had negative NAAT (nasal swab) at any unscheduled visit prior to 7 days after Dose 2 were included in the analysis.
- a. N = Number of participants in the specified group.
- b. n1 = Number of participants meeting the endpoint definition.
- c. Total surveillance time in 1000 person-years for the given endpoint across all participants within each group at risk for the endpoint. Time period for COVID-19 case a cerual is from 7 days after Dose 2 to the end of the surveillance period.
- d. n2 = Number of participants at risk for the endpoint.
- e. Two-sided confidence interval (CI) for vaccine efficacy is derived based on the Clopper and Pearson method adjusted to the surveillance time.
- f. All others = American Indian or Alaska Native, Asian, Native Hawaiian or other Pacific Islander, multiracial, and not reported race categories.

The updated subgroup analyses of vaccine efficacy by risk status in participants are presented in Table 12 and Table 13.

(, <i>») = •</i> • • • • • • • • • • • • • • • • • • •	COMIRNATY	Placebo	
	N ^a =20,998	N ^a =21,096	
	Cases	Cases	
	n1 ^b	n1 ^b	Vaccine Efficacy %
Subgroup	Surveillance Time ^c (n2 ^d)	Surveillance Time ^c (n2 ^d)	(95% CI) ^e
First COVID-19 occurrence from	77	850	91.3
7 days after Dose 2 ^f	6.247 (20,712)	6.003 (20,713)	(89.0, 93.2)
At risk ^g		• • • • • • • • •	· · · · · /
	35	401	91.6
Yes	2.797 (9167)	2.681 (9136)	(88.2, 94.3)
	42	449	91.0
No	3.450 (11,545)	3.322 (11,577)	(87.6, 93.6)
Age group (years) and risk status		• • • • • • • • •	· · · · · /
	41	385	89.8
16 through 64 and not at risk	2.776 (8887)	2.661 (8886)	(85.9, 92.8)
	29	325	91.5
16 through 64 and at risk	2.083 (6632)	1.993 (6629)	(87.5, 94.4)
_	1	53	98.1
65 and older and not at risk	0.553 (1870)	0.546 (1922)	(89.2, 100.0)
	6	71	91.8
65 and older and at risk	0.680 (2322)	0.656 (2304)	(81.4, 97.1)
Obese ^h		-	
	27	314	91.6
Yes	2.103 (6796)	2.050 (6875)	(87.6, 94.6)
	50	536	91.1
No	4.143 (13,911)	3.952 (13,833)	(88.1, 93.5)
Age group (years) and obesity sta	itus	· · · · · ·	
	46	444	90.1
16 through 64 and not obese	3.178 (10,212)	3.028 (10,166)	(86.6, 92.9)
	24	266	91.3
16 through 64 and obese	1.680 (5303)	1.624 (5344)	(86.7, 94.5)
	4	79	95.2
65 and older and not obese	0.829 (2821)	0.793 (2800)	(87.1, 98.7)
	3	45	93.2
65 and older and obese	0.404 (1370)	0.410 (1426)	(78.9, 98.7)

Table 12: Vaccine Efficacy – First COVID-19 Occurrence From 7 Days After Dose 2, by Risk Status – Participants Without Evidence of Infection* Prior to 7 Days After Dose 2 – Evaluable Efficacy (7 Days) Population During the Placebo-Controlled Follow-up Period

Note: Confirmed cases were determined by Reverse Transcription-Polymerase Chain Reaction (RT-PCR) and at least 1 symptom consistent with COVID-19 (symptoms included: fever; new or increased cough; new or increased shortness of breath; chills; new or increased muscle pain; new loss of taste or smell; sore throat; diarrhea; vomiting).

^{*} Participants who had no evidence of past SARS-CoV-2 infection (i.e., N-binding antibody [serum] negative at Visit 1 and SARS-CoV-2 not detected by NAAT [na sal swab] at Visits 1 and 2), and had negative NAAT (nasal swab) at any unscheduled visit prior to 7 days after Dose 2 were included in the analysis.

a. N = Number of participants in the specified group.

b. n1 = Number of participants meeting the endpoint definition.

	COMIRNATY	Placebo	
	N ^a =20,998	N ^a =21,096	
	Cases	Cases	
	n1 ^b	n1 ^b	Vaccine Efficacy %
Subgroup	Surveillance Time ^c (n2 ^d)	Surveillance Time ^c (n2 ^d)	(95% CI) ^e

c. Total surveillance time in 1000 person-years for the given endpoint across all participants within each group a trisk for the endpoint. Time period for COVID-19 case a cerual is from 7 days after Dose 2 to the end of the surveillance period.

d. n2 = Number of participants at risk for the endpoint.

- e. Two-sided confidence interval (CI) for vaccine efficacy is derived based on the Clopper and Pearson method adjusted for surveillance time.
- f. Included confirmed cases in participants 12 through 15 years of a ge: 0 in the COMIRNATY group; 16 in the placebo group.
- g. At risk is defined as having at least 1 of the Charlson Comorbidity Index (CMI) category or obesity ($BMI \ge 30 \text{ kg/m}^2 \text{ or } BMI \ge 95^{\text{th}}$ percentile [12 through 15 years of age]).
- h. Obese is defined as BMI \ge 30 kg/m². For 12 through 15 years age group, obesity is defined as a BMI at or above the 95th percentile. Refer to the CDC growth charts at <u>https://www.cdc.gov/growth charts/html_charts/html_charts/bmiagerev.htm</u>.

Table 13: Vaccine Efficacy – First COVID-19 Occurrence From 7 Days After Dose 2, by Risk Status – Participants With or Without* Evidence of Infection Prior to 7 Days After Dose 2 – Evaluable Efficacy (7 Days) Population During the Placebo-Controlled Follow-up Period

	COMIRNATY	Placebo	
	N ^a =22,166	N ^a =22,320	
	Cases	Cases	
	n1 ^b	n1 ^b	Vaccine Efficacy %
Subgroup	Surveillance Time ^c (n2 ^d)	Surveillance Time ^c (n2 ^d)	(95% CI) ^e
First COVID-19 occurrence from		873	91.1
7 days after Dose 2 ^f	6.509 (21,642)	6.274 (21,689)	(88.8, 93.0)
At risk ^g			X / /
	36	410	91.6
Yes	2.925 (9601)	2.807 (9570)	(88.1, 94.2)
	45	463	90.6
No	3.584 (12,041)	3.466 (12,119)	(87.2, 93.2)
Age group (years) and risk status			
	44	397	89.3
16 through 64 and not at risk	2.887 (9254)	2.779 (9289)	(85.4, 92.4)
	30	330	91.3
16 through 64 and at risk	2.186 (6964)	2.100 (6980)	(87.3, 94.2)
	1	55	98.2
65 and older and not at risk	0.566 (1920)	0.559 (1966)	(89.6, 100.0)
	6	73	92.1
65 and older and at risk	0.701 (2395)	0.672 (2360)	(82.0, 97.2)
Obese ^h			
	28	319	91.4
Yes	2.207 (7139)	2.158 (7235)	(87.4, 94.4)
	53	554	90.8
No	4.301 (14,497)	4.114 (14,448)	(87.9, 93.2)
Age group (years) and obesity sta	atus		
	49	458	89.8
16 through 64 and not obese	3.303 (10,629)	3.158 (10,614)	(86.2, 92.5)

Table 13: Vaccine Efficacy – First COVID-19 Occurrence From 7 Days After Dose 2, by Risk Status – Participants With or Without* Evidence of Infection Prior to 7 Days After Dose 2 – Evaluable Efficacy (7 Days) Population During the Placebo-Controlled Follow-up Period

Efficacy (7 Days) 10	pulation During the Tracebo	1	
	COMIRNATY	Placebo	
	N ^a =22,166	N ^a =22,320	
	Cases	Cases	
	n1 ^b	n1 ^b	Vaccine Efficacy %
Subgroup	Surveillance Time ^c (n2 ^d)	Surveillance Time ^c (n2 ^d)	(95% CI) ^e
	25	269	91.0
16 through 64 and obese	1.768 (5584)	1.719 (5649)	(86.4, 94.3)
	4	82	95.3
65 and older and not obese	0.850 (2899)	0.811 (2864)	(87.6, 98.8)
	3	46	93.4
65 and older and obese	0.417 (1415)	0.420 (1462)	(79.5, 98.7)

Note: Confirmed cases were determined by Reverse Transcription-Polymerase Chain Reaction (RT-PCR) and at least 1 symptom consistent with COVID-19 (symptoms included: fever; new or increased cough; new or increased shortness of breath; chills; new or increased muscle pain; new loss of taste or smell; sore throat; diarrhea; vomiting).

- * Participants who had no evidence of past SARS-CoV-2 infection (i.e., N-binding antibody [serum] negative at Visit 1 and SARS-CoV-2 not detected by NAAT [na sal swab] at Visits 1 and 2), and had negative NAAT (nasal swab) at any unscheduled visit prior to 7 days after Dose 2 were included in the analysis.
- a. N = number of participants in the specified group.
- b. n1 = Number of participants meeting the endpoint definition.
- c. Total surveillance time in 1000 person-years for the given endpoint across all participants within each group a trisk for the endpoint. Time period for COVID-19 case a cerual is from 7 days after Dose 2 to the end of the surveillance period.
- d. n2 = Number of participants at risk for the endpoint.
- e. Two-sided confidence interval (CI) for vaccine efficacy is derived based on the Clopper and Pearson method adjusted for surveillance time.
- f. Included confirmed cases in participants 12 through 15 years of a ge: 0 in the COMIRNATY group; 18 in the placebo group.
- g. At risk is defined as having at least 1 of the Charlson Comorbidity Index (CMI) category or obesity ($BMI \ge 30 \text{ kg/m}^2 \text{ or } BMI \ge 95^{\text{th}}$ percentile [12 through 15 years of age]).
- h. Obese is defined as BMI \geq 30 kg/m². For the 12 through 15 years of a ge group, obesity is defined as a BMI at or a bove the 95th percentile. Refer to the CDC growth charts at <u>https://www.cdc.gov/growthcharts/html_charts/bmiagerev htm</u>.

Efficacy Against Severe COVID-19

Updated efficacy analyses of secondary efficacy endpoints supported benefit of COMIRNATY in preventing severe COVID-19. Vaccine efficacy against severe COVID-19 is presented only for participants with or without prior SARS-CoV-2 infection (Table 14) as the COVID-19 case counts in participants without prior SARS-CoV-2 infection were the same as those in participants with or without prior SARS-CoV-2 infection in both the COMIRNATY and placebo groups.

Table 14: Vaccine Efficacy – First Severe COVID-19 Occurrence in Participants With or Without* Prior SARS-CoV-2 Infection Based on Protocol[†] or Centers for Disease Control and Prevention (CDC)[‡] Definition After Dose 1 or From 7 Days After Dose 2 in the Placebo-Controlled Followup

Vaccine Efficacy – First Severe COVID-19 Occurrence				
	COMIRNATY Placebo			
	Cases	Cases		
	n1 ^a	n1 ^a	Vaccine Efficacy %	
	Surveillance Time (n2 ^b)	Surveillance Time (n2 ^b)	(95% CI ^c)	
After Dose 1 ^d	1	30	96.7	

	8.439 ^e (22,505)	8.288 ^e (22,435)	(80.3, 99.9)
	1	21	95.3
7 days after Dose 2 ^f	6.522 ^g (21,649)	6.404 ^g (21,730)	(70.9, 99.9)
Vaccine Efficacy	y – First Severe COVID-19 O	occurrence Based on CDC l	Definition
	COMIRNATY	Placebo	
	Cases	Cases	
	n1 ^a	n1 ^a	Vaccine Efficacy %
	Surveillance Time (n2 ^b)	Surveillance Time (n2 ^b)	(95% CI ^c)
	1	45	97.8
After Dose 1 ^d	8.427° (22,473)	8.269° (22,394)	(87.2, 99.9)
	0	32	100
7 days after Dose 2 ^f	$6.514^{g}(21,620)$	6.391g (21,693)	(88.0, 100.0)

Note: Confirmed cases were determined by Reverse Transcription-Polymerase Chain Reaction (RT-PCR) and at least 1 symptom consistent with COVID-19 (symptoms included: fever; new or increased cough; new or increased shortness of breath; chills; new or increased muscle pain; new loss of taste or smell; sore throat; diarrhea; vomiting).

* Participants who had no evidence of past SARS-CoV-2 infection (i.e., N-binding antibody [serum] negative at Visit 1 and SARS-CoV-2 not detected by NAAT [nasal swab] at Visits 1 and 2), and had negative NAAT (nasal swab) at any unscheduled visit prior to 7 days after Dose 2 were included in the analysis.

[†] Severe illness from COVID-19 is defined in the protocol as confirmed COVID-19 and presence of at least 1 of the following:

- Clinical signs at rest indicative of severe systemic illness (respiratory rate ≥30 breaths per minute, heart rate ≥125 beats per minute, saturation of oxygen ≤93% on room air at sea level, or ratio of arterial oxygen partial pressure to fractional inspired oxygen <300 mm Hg);
- Respiratory failure [defined as needing high-flow oxygen, noninvasive ventilation, mechanical ventilation or extracorporeal membrane oxygenation (ECMO)];
- Evidence of shock (systolic blood pressure <90 mm Hg, diastolic blood pressure <60 mm Hg, or requiring vasopressors);
- Significant a cuterenal, hepatic, or neurologic dysfunction;
- Admission to an Intensive Care Unit;
- Death.

[‡] Severe illness from COVID-19 as defined by CDC is confirmed COVID-19 and presence of at least 1 of the following:

- Hospitalization;
- Admission to the Intensive Care Unit;
- Intubation or mechanical ventilation;
- Death.
- a. n1 = Number of participants meeting the endpoint definition.
- b. n2 = Number of participants a trisk for the endpoint.
- c. Two-side confidence interval (CI) for vaccine efficacy is derived based on the Clopper and Pearson method adjusted to the surveillance time.
- d. Efficacy assessed based on the Dose 1 all a vailable efficacy (modified intention-to-treat) population that included all randomized participants who received at least 1 dose of study intervention.
- e. Total surveillance time in 1000 person-years for the given endpoint across all participants within each group at risk for the endpoint. Time period for COVID-19 case a ccrual is from Dose 1 to the end of the surveillance period.
- f. Efficacy assessed based on the evaluable efficacy (7 Days) population that included all eligible randomized participants who receive all dose(s) of study intervention as randomized within the predefined window, have no other important protocol deviations as determined by the clinician.
- g. Total surveillance time in 1000 person-years for the given endpoint across all participants within each group at risk for the endpoint. Time period for COVID-19 case a ccrual is from 7 days after Dose 2 to the end of the surveillance period.

16 HOW SUPPLIED/STORAGE AND HANDLING

COMIRNATY Suspension for Intramuscular Injection, Multiple Dose Vials are supplied in a carton containing 25 multiple dose vials (NDC 0069-1000-03) or 195 multiple dose vials (NDC 0069-1000-02). A 0.9% Sodium Chloride Injection, USP diluent is provided but shipped separately, and should be stored at controlled room

Number: 1 Author: Author Date: Indeterminate
 Pfizer: Please delete Table 10-13

temperature 20°C to 25°C (68°F to 77°F) [see USP Controlled Room Temperature]. After dilution, 1 vial contains 6 doses of 0.3 mL.

During storage, minimize exposure to room light, and avoid exposure to direct sunlight and ultraviolet light.

Do not refreeze thawed vials.

Frozen Vials Prior to Use

Cartons of COMIRNATY Multiple Dose Vials arrive in thermal containers with dry ice. Once received, remove the vial cartons immediately from the thermal container and preferably store in an ultra-low temperature freezer between -80°C to -60°C (-112°F to -76°F) until the expiry date printed on the label. Alternatively, vials may be stored at -25°C to -15°C (-13°F to 5°F) for up to 2 weeks. Vials must be kept frozen and protected from light, in the original cartons, until ready to use. Vials stored at -25°C to -15°C (-13°F to 5°F) for up to 2 weeks may be returned 1 time to the recommended storage condition of -80°C to -60°C (-112°F to -76°F). Total cumulative time the vials are stored at -25°C to -15°C (-13°F to 5°F) should be tracked and should not exceed 2 weeks.

If an ultra-low temperature freezer is not available, the thermal container in which COMIRNATY arrives may be used as <u>temporary</u> storage when consistently re-filled to the top of the container with dry ice. <u>Refer to the re-icing guidelines packed in the original thermal container for instructions regarding the use of the thermal container for temporary storage</u>. The thermal container maintains a temperature range of -90°C to -60°C (-130°F to -76°F). Storage of the vials between -96°C to -60°C (-141°F to -76°F) is not considered an excursion from the recommended storage condition.

Transportation of Frozen Vials

If local redistribution is needed and full cartons containing vials cannot be transported at -90°C to -60°C (-130°F to -76°F), vials may be transported at -25°C to -15°C (-13°F to 5°F). Any hours used for transport at -25°C to -15°C (-13°F to 5°F) count against the 2-week limit for storage at -25°C to -15°C (-13°F to 5°F). Frozen vials transported at -25°C to -15°C (-13°F to 5°F) may be returned 1 time to the recommended storage condition of -80°C to -60°C (-112°F to -76°F).

Thawed Vials Before Dilution

Thawed Under Refrigeration

Thaw and then store undiluted vials in the refrigerator [2°C to 8°C (35°F to 46°F)] for up to 1 month. A carton of 25 vials or 195 vials may take up to 2 or 3 hours, respectively, to thaw in the refrigerator, whereas a fewer number of vials will thaw in less time.

Thawed at Room Temperature

For immediate use, thaw undiluted vials at room temperature [up to 25°C (77°F)] for 30 minutes. Thawed vials can be handled in room light conditions.

Vials must reach room temperature before dilution.

Number: 1 Author: Author Date: Indeterminate Pfizer: Please revise this table as follows: Remove the rows for severe cases after Dose 1 Remove the specification of the FDA Definition of Severe Disease, as revised Undiluted vials may be stored at room temperature for no more than 2 hours.

Transportation of Thawed Vials

Available data support transportation of 1 or more thawed vials at 2°C to 8°C (35°F to 46°F) for up to 12 hours.

Vials After Dilution

After dilution, store vials between 2°C to 25°C (35°F to 77°F) and use within 6 hours from the time of dilution. During storage, minimize exposure to room light, and avoid exposure to direct sunlight and ultraviolet light. Any vaccine remaining in vials must be discarded after 6 hours. Do not refreeze.

17 PATIENT COUNSELING INFORMATION

Inform vaccine recipient of the potential benefits and risks of vaccination with COMIRNATY.

Inform vaccine recipient of the importance of completing the two dose vaccination series.

There is a pregnancy exposure registry for COMIRNATY. Encourage individuals exposed to COMIRNATY around the time of conception or during pregnancy to register by calling

Advise vaccine recipient to report any adverse events to their healthcare provider or to the Vaccine Adverse Event Reporting System at 1-800-822-7967 and <u>www.vaers.hhs.gov</u>.

This product's labeling may have been updated. For the most recent prescribing information, please visit www.pfizer.com.

BIONTECH

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Pfizer

Manufactured by Pfizer Inc., New York, NY 10017

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US Govt. License No. x

CPT Code x

Number: 1	Author: Author Date: Indeterminate

Pfizer, Please include a description of the vials from each of the two suppliers and include NDC numbers for cartons and containers of diluent from each of the manufacturers