PUBLIC HEALTH ALERT

Reports of myocarditis/pericarditis after COVID-19 vaccination

In early June 2021, the Public Health Agency of Canada (PHAC) advised health care providers of rare cases of myocarditis and pericarditis following vaccination with COVID-19 mRNA vaccines, mainly in adolescents and young adults.

Available information from international sources indicates that:

- Cases were more commonly reported after the second dose, but did occasionally occur after the first dose
- Symptom onset was typically within several days after vaccination
- Cases were more often male
- The majority of the cases experienced mild illness, responded well to conservative treatment and symptoms improved quickly

To date, no clear association has been established between myocarditis/pericarditis and mRNA vaccines. Follow-up on these cases is ongoing. Physicians should:

- Consider myocarditis and pericarditis in patients who present with acute chest pain or pressure, arrhythmias, shortness of breath or other clinically compatible symptoms after vaccination.
- In suspect cases, perform an electrocardiogram (ECG) and troponins test, and consider an echocardiogram (ECHO), in consultation with cardiology. Consultation with infectious disease and/or rheumatology should also be considered to ensure an appropriate work-up for other potential causes of myocarditis and pericarditis.
- Advise patients that, at this time, the benefits of the mRNA vaccines continue to outweigh their risks. There are clear benefits to mRNA vaccines in reducing community spread, as well as hospitalizations and deaths due to COVID-19 infections.

Importantly, all physicians should report ALL cases of myocarditis or pericarditis following vaccination to your local public health authority. Health Canada, PHAC, and provincial and territorial health authorities will continue to closely monitor reports of myocarditis and/or pericarditis and will share more information as it becomes available.

For more information: