

What you need to know about Myocarditis and Pericarditis

COVID-19 mRNA vaccines are safe and effective, and are recommended for all Ontario residents 6 months of age and older to prevent severe illness and hospitalization. A small number of cases of myocarditis (inflammation of the heart muscle) and pericarditis (inflammation of the lining around the heart) have been reported following COVID-19 vaccination. **The risk of myocarditis or pericarditis following mRNA vaccination is rare.** The majority of reported cases are mild and resolve quickly.



What you need to know:

- Reported cases of myocarditis and pericarditis following mRNA COVID-19 vaccinations have occurred:
 - more often after the second dose of the primary series;
 - usually within a week after vaccination;
 - more often in those 12 to 29 years of age; and
 - more often in males.
- Myocarditis and pericarditis are less common after a booster dose. The risk is lower than after the second dose in the primary series, but higher than after the first dose.
- A longer interval between doses of a COVID-19 vaccine, for both primary series and booster doses, may be associated with lower risk of myocarditis and/or pericarditis in adolescents and young adults.
- Safety surveillance data from the US suggests that the risk of myocarditis or pericarditis in children 11 years of age and younger is lower than children over age 12 and young adults.
- Common symptoms of myocarditis and pericarditis are chest pain, shortness of breath and feelings of a fast beating, fluttering or pounding heart. Seek medical care if you have any of these symptoms.
- Most cases are mild and resolve quickly with treatment.
- There are many potential causes of myocarditis and pericarditis — including viral infections. They can occur as a result of COVID-19 infection.



The Provincial government recommends the use of the monovalent Pfizer vaccine for people aged 5 to 29 completing their primary series. This recommendation is based on current available evidence from the Ontario Adverse Events Following Immunization (AEFI) surveillance system. The evidence indicates that while rare, fewer cases of myocarditis and pericarditis have been reported after vaccination with the Pfizer vaccine compared to Moderna vaccine in this age group.

Adults 18 to 29 years of age can receive a booster dose with any available bivalent Omicron-containing mRNA COVID-19 vaccine for which they are currently eligible. There is no preferential recommendation between monovalent mRNA vaccine brands for children under 5 years of age or between monovalent or bivalent mRNA vaccine brands for adults 30 years of age and older.



Do the benefits outweigh the risks?

The known risks of COVID-19 illness (including complications like myocarditis/pericarditis) outweigh the potential harms of COVID-19 vaccination. For more information, visit halton.ca/COVIDvaccines.